Midwifery Practice in Ireland for the last 100 Years

NMBI Conference, Dublin
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Breedagh Hughes
The Midwives Petition, 1643

“And whereas we are called midwives by our profession we knowing the cases of women better than any as being more experienced in what they sensibly suffer since the wars began...it is a great wrong that women should want their husbands and live without comfort, whereby we midwives are also undone, as for women are helpers unto men, so we are unto women in all their extremities”
Midwives Petition, 1643 (cont’d)

“....for which we were formerly well paid and highly respected in our parishes for our great skill and midnight industry, but now our Art doth fail us and little gettings have we in this age barren of all natural joys.... We desire therefore that for the better propagating of our own benefit and the greater good of all women, wives may no longer spare their husbands to be devoured by the sword”
The Journey to Legislation

Medical Act, 1858

Provided for registration as a medical practitioner - dependent on a qualification in midwifery as well as medicine and surgery.

Strong opposition to women qualifying in medicine – this didn’t happen until 1876 when the GMC agreed to accept women for registration.
London Obstetrical Society

1880

The names of sixty-three professionally qualified midwives (i.e. holding Diploma of London Obstetrical Society) published in *Work and Leisure*

1881

Matrons Aid, or Trained Midwives Registration Society formed in London (80 qualified midwives by this time)
The Midwives’ Institute

1886
Change of name to Midwives’ Institute and Trained Nurses Club

1889
Purposes of the Midwives’ Institute defined:
- To raise the efficiency and improve the status of midwives and to petition Parliament for their recognition
- To establish a Registry for members and a centre of information for the public
- To provide a good Medical Lending Library and Clubroom for friendly meetings
- To arrange courses of Medical lectures and to afford opportunities for discussion on subjects connected with the profession
The First Bill

1889 - First Bill for the Registration of Midwives introduced as Private Member’s Bill by Mr Henry Fell Pease – supported by GMC

Also supported by 109 of the 240 Coroners in England and Wales who had in-depth knowledge of the high death rates among women (and their babies) who were not professionally attended upon at birth.
However...

Not all medics felt the same way

The Bill was opposed by Dr Tanner (member for Mid-Cork) on grounds that it would deprive medical men of much legitimate practice as midwives with a fee of half a guinea would undercut the doctors who charged a guinea per visit.

The Bill was in any case withdrawn in September 1889 as it ran out of time.
However, during the drafting of the Bill the GMC changed its mind in relation to the proposal to allow registration of unqualified midwives, despite this being completely impractical as there weren’t enough qualified doctors and midwives available to cope without the aid of unqualified midwives, although by 1891 there were over 1,000 qualified midwives who held the Diploma of the LOS.
The Second Attempt

• 1891 – Bill re-submitted but unsupported by the Government. Actively opposed by provincial GPs and the British Nurses Association

• 1882/83 – Select Committee appointed which supported the Bill

• 1895 – Draft Bill presented to House of Lords, however the Government lost a general election and all draft legislation was abandoned
The other attempts....

- 1898 – Midwives’ Bill reintroduced to Commons – debate deferred
- 1899 – Midwives’ Bill reintroduced to Commons (again!) but ‘talked out’
- 1900 – Midwives’ Bill reintroduced to Commons but ‘talked out’ (again!)
- 1902 – Midwives’ Act (E&W) given Royal Assent on 31st July 1902 (finally!)
Purpose of the Act

• To secure better training for midwives
• Regulate midwives’ practice
• Ensure a woman could not call herself, nor practise as a midwife, unless she was certified under the Act
• Contravention of the provisions of the Act could lead to a fine of £5 (equivalent to almost £300 today)
The Midwives’ Act of 1902 applied only to England and Wales – it was to be another 13 years (1915) before legislation was introduced in Scotland and a further 16 years before the Midwives Act (Ireland) came into force in 1918.

This legislation was enacted before the Partition of Ireland and underpins midwifery practice in both parts of the Island.
“Any woman who, within two years of the date of this Act coming into operation, claims to be certified under this Act, shall be so certified provided she holds a certificate in midwifery from the Royal College of Physicians of Ireland, or from the Obstetrical Society of London, or the Coombe Lying-in Hospital and Guinness’s Dispensary or the Rotunda Hospital for the Relief of the Poor Lying-in Women of Dublin
…..or such other certificate as may be approved by the Central Midwives’ Board, or produces evidence, satisfactory to the Board, that at the passing of this Act, she had been for at least one year in *bona fide* practice as a midwife and that she bears a good character”
The first Central Midwives’ Board

One (medical practitioner) nomination from
• Royal College of Physicians
• Royal College of Surgeons
• Society of Apothecaries
• Midwives Institute
• Two persons (one of whom was required to be a woman) appointed by the Privy Council
• One each from the Association of County Councils, Queen Victoria’s Jubilee Institute and the Royal British Nurses’ Association
Composition of the Board

In addition to the four (male) medical nominees, there were an additional two men – one from the County Councils and one appointed by the Privy Council.

A third of the Board was therefore composed of women – one (a midwife) appointed by the Privy Council, one (Rosalind Paget) nominated by the Queen’s Institute and another (nurse and midwife) appointed by the Royal British Nurses’ Association.
Role of the CMB

To make rules and regulations for

• The issuing of certificates
• Training and examinations
• Supervision of midwives
• Restrictions, suspension or removal from the Roll
So who were the first regulated midwives?

When the full provisions of the Act came into place in England and Wales in April 1905 there were 22,308 names on the Roll

- 7,465 with LOS certificates
- 2,322 with hospital certificates
- 12,521 who declared themselves to be *bona fide* practising midwives

After 1910 it was illegal to practise as a lay midwife unless under direct supervision of a doctor
Ireland

The provisions of the 1918 Act remained virtually intact, with the Central Midwives Board (CMB) being established in 1923 by the new Irish government.

A further Midwives Act in 1931 affirmed that the word ‘midwife’ means a woman who is certified under the 1918 Act and made provision for the issuing of badges to appropriately qualified midwives with a fine of £10 for those posing as a midwife without being legally qualified.
CMB 1944

11 members, 7 appointed by the Minister (4 midwives and at least one doctor) plus another 4 elected members – all medics.

It maintained the Midwives’ Roll and set out processes for entering, suspending and removing midwives’ names from the Roll and arrangements for midwives to attend ‘courses of instruction’

It also introduced the designation ‘State Certified Midwife’
Nurses Act 1950

1919 Nurses Act established General Nursing Council throughout the British Isles, however the 1950 Act in Ireland dissolved both the CMB and the GNC and established An Bord Altranais and repealed the previous Midwives’ Acts.

The 1950 Act stated that the word ‘midwife’ means a person registered in the midwives’ division and the word ‘nurse’ means a person registered in the register of nurses and includes a midwife and the word ‘nursing’ includes midwifery.
The establishment of An Bord Altranais in June 1951 was preceded by (unsuccessful) lobby of politicians to prevent the government from eliminating the term ‘midwife’ and replacing it with ‘maternity nurse’ except for those midwives in independent practice.

Without a separate Midwives Roll there has been no accurate way to determine how many practising midwives in Ireland between 1950 and 2011
An Bord Altranais

23 members, 10 appointed by the Minister
1 x PHN
2 x registered under the 1944 Act
2 x Mental Health Nurses
3 x General Nurses with experience in nursing education
1 x private nurse
1 nurse from a non-training hospital
The Others?

- A master of a maternity hospital
- 2 medical practitioners engaged in training nurses in training hospitals
- 1 medical practitioner from mental health
- 1 General Practitioner
- 1 Medical Officer of Health
- 1 person ‘specially experienced in educational matters’
• 2 representatives from local authorities
• 2 nurses

Although it did establish a Midwifery Committee to replace the CMB....

However.....
The Midwifery Committee

8 members, to include

• The maternity hospital master from the Board
• A medical practitioner from a maternity training school outside Dublin
• A GP with experience in obstetrics
• The Medical Officer of Health from the Board
• One of the nurses from the Board who had to be a midwife
• A (unspecified) medical practitioner’
• Two ‘persons’ on the nursing register and “in any other case, midwives”
A ‘Midwives’ Division’ was established alongside a ‘Nursing Division’ to replace the previous Midwives’ Roll

The fine for posing as a nurse or midwife was increased to £100
Situation worsened in 1985 when an updated Nurses Act reconstituted An Bord Altranais with a 29 member Board of which 3 were to be midwives. It also included individuals from the Department of Health, Health Boards and hospital management boards and two lay members ‘representative of the interest of the general public’
It recognised the requirement to become or remain compliant with the EU Directives relating to standards for nursing and midwifery training. It removed the requirement for midwives to notify their intention to practice to the LSA and for the first time, it required midwives practising outwith the health service to notify their intention to practice to the local Health Board.
Commission on Nursing in 1988 recommended a ‘midwives amendment to the 1985 Act and the establishment of a statutory Midwifery Committee within An Bord but this never happened
2007 Nurses and Midwives Bill led to more intensive lobbying for recognition of midwifery as a distinct and separate profession

FINALLY

2011 – Nurses and Midwives Act specifically recognises midwifery as a separate profession - “For the avoidance of doubt, it is hereby declared and recognised that midwifery is a separate profession to nursing.”
Northern Ireland

Along with most other UK legislation, the 1918 Act was ‘Northern Ireland-ised’ in 1922 and thereafter largely replicated legislation introduced in England and Wales.

A unique feature was however the establishment in Northern Ireland of the Joint Nurses and Midwives Council which regulated the education and practice of both nurses and midwives in the new jurisdiction.
1929 Midwives and Nursing Homes Act (Northern Ireland) - mirrored amendments brought in elsewhere in the UK in 1926 which gave further protection to the title and function of the midwife and also provided for payment from the LSA if she was suspended from practice to prevent the spread of infectious diseases
In the mid 1920s only 63% of parishes in England had a trained midwife and despite earlier legislation *bona fide* (unqualified) midwives were still working in some areas until the NHS was established in 1948 although the fine for practising as a midwife without proper qualification had increased to £10 in 1926
Midwives Act 1936

The Midwives Act was further updated in the UK in 1936 following a campaign by the Midwives’ Institute when local authorities were required to employ salaried midwives so that all women had access to the service of a qualified midwife. This was a major advance as midwives were almost all self employed with unpredictable and part time work – and they were also to be entitled to one day off a week!
The introduction of the NHS in 1948 provided free maternity care for all women by making payments to GPs for providing antenatal care to pregnant women. The continuity of care previously provided for women by their local midwife became disrupted as midwives only cared for women during and after birth – the RCM has been campaigning since then to have continuity of care and carer restored.
1979 Nurses, Midwives and Health Visitors Act

This act established the United Kingdom Central Council for Nursing Midwifery and Health Visiting (UKCC) and abolished the CMB and the General Nursing Councils in England, Scotland and Wales as well as the Northern Ireland Council for Nurses and Midwives.

Established National Boards for Nursing, Midwifery and Health Visiting in each UK country.
The 1979 Act established a statutory Midwifery Committee which the Council was obliged to consult on all matters relating to midwifery education and practice and no new rules could be approved by the government in relation to midwifery practice unless they had been approved by the Midwifery Committee, the majority of whose members were required to be practising midwives.
Nursing and Midwifery Council

The Nursing and Midwifery Order, 2001, abolished the UKCC and established the Nursing and Midwifery Council (NMC)

The statutory Midwifery Committee was retained until it was removed, along with statutory supervision for midwives in 2017 despite vigorous campaigning by midwives throughout the UK
100 years of midwifery education

Midwifery originally ‘Direct Entry but many of those who trained as midwives had already qualified as nurses

1902 – 3 months
1918 – 4 months in Ireland
1921 – 4 months in England, Scotland and Wales
1926 – 6 months for qualified nurses, otherwise 1 year
1939 – Part 1 – 6 months for nurses, 18 months otherwise
   Part 2 – 6 months for all
1968 – CMB removes direct entry training except for 2 English training hospitals
1980 – EC directive introduces new requirements
   EITHER 3 years direct entry OR nursing qualification plus 2 years midwifery training
Ireland adopts this requirement but UK negotiates an agreement of

EITHER

3 years direct entry training

OR

18 months training (now 21 months) if qualified nurse to be followed by 1 year post registration experience before midwifery qualification being recognised elsewhere in EU
1995 – Ireland midwifery education into universities
1997 – Northern Ireland into universities

Northern Ireland introduced Direct Entry midwifery education in 2003 and Ireland in 2007
Changing Times

Very difficult to get statistics on place of birth in Ireland – the Registrar General was too busy ascertaining whether or not babies were illegitimate to be concerned with their place of birth!

Safe to assume however that in 1918 – vast majority of babies in Ireland born at home
In England and Wales....

1934 – 24% hospital births
1938 – 40% hospital births
1959 – 64% hospital births
1968 – 99% hospital births
What happened?

1970 – Peel Report recommends all births should be in hospital

1980 – Short Report recommends that not only should all births be in hospital with home birth and isolated GP units phased out, but also recommends continuous EFM and a 24 hour epidural service.
Some statistics

1950s – C/S rate 3%, home birth rate 35%
1980s – C/S rate 7% -10%, home birth rate 3%
2000 – C/S rate >20%, home birth rate <1%
2010 – C/S rate 25%, home birth rate <1%
2017 – C/S rate 30%, home birth rate <1%
Working with Women – Reclaiming midwifery

1993 – Changing Childbirth report advocates choice, control and continuity of carer
1994 – Delivering Choice (Northern Ireland) proposes limited choice and not much control for women
2010 – Midwifery 2020
2012 – Maternity Strategy (Northern Ireland)
2016 – Maternity Strategy - Ireland
2000 – first alongside midwife-led unit opens in Northern Ireland
2008 – first alongside midwifery led units open in Ireland
2010 – first free-standing midwife-led unit opens in Northern Ireland
Role of Royal College of Midwives

The Midwives’ Institute changed its name to become the Royal College of Midwives in 1941 receiving a Royal Charter in 1947.

Ulster Midwives Association affiliated to Midwives’ Institute in 1938 and became NI Council of RCM in 1948.

RCM voted to become a trade union in 1976 affiliating to the ICTU in 2017.
Role of RCM

Not much changed since 1881
- To raise the efficiency and improve the status of midwives and to petition Parliament for their recognition
- To establish a Registry for members and a centre of information for the public
- To provide a good Medical Lending Library and Clubroom for friendly meetings
- To arrange courses of Medical lectures and to afford opportunities for discussion on subjects connected with the profession
The next 100 years?

• Continued collaboration within the midwifery profession on the island of Ireland
• Continued collaboration with women to provide services that meet their needs
• Continued collaboration with medical and other colleagues based on mutual respect
• Continued and persistent advocacy, campaigning, and lobbying to retain and improve maternity care for women and their families
• More changes to regulation – a separate regulatory body for midwives?
• The impact of Brexit and possible derogation from EU Directives in UK – Midwifery Associates?
• An ever increasing rise in the C/S rate?
  OR
• A return to care in the community with a rise in the number of women choosing home births or to birth in a freestanding birth centre?