

Maori Nurses.

Since my last report two Maori nurses have passed the State examination, and are registered nurses. One of these has since entered St. Helens Hospital, Christchurch, and obtained her certificate in midwifery. The other has entered St. Helens, Wellington, and will be eligible for her examination in June. It is hoped to utilise the knowledge and experience gained by these young women in any outbreak of disease or epidemic among their own people. Another young Maori girl is training in the Wanganui Hospital at present and one at Napier, and it is hoped to shortly place one, who has completed a year as day pupil at the Napier Hospital, in another training school to finish her course.

We shall shortly be in a position to judge whether the money, care, and trouble expended in training these Maori girls has been well expended.

"THE MIDWIVES ACT, 1908."

During the past year two examinations of pupils trained under the Midwives Act have been held; thirty-three were trained in the State maternity hospitals, three in the Medical School Maternity Hospital, and three in the charitable institutions allowed to train in conjunction with lectures at the State hospitals. Of these, thirty-six passed the examination, and are now registered midwives. The receipts of fees for training and examination were £676; the expenses in examiners' and supervisors' fees, £122. The examiners appointed in 1907 under the Midwives Act have conducted the examinations with great interest, and, by valuable suggestions and criticisms, have aided the teachers in maintaining a high standard of proficiency.

The medical practitioners not connected with the special hospitals have frequently expressed their appreciation of the assistance they receive from the trained midwives, and also of the fact that they can, on application to the St. Helens hospitals, obtain the temporary services of a pupil from there if they are in any difficulty with a private case owing to the non-arrival of the nurse engaged. They are also beginning to realise that the trained midwife or midwifery nurse, which is what the St. Helens pupils aim to become, is the last to wish to act in any way independently of or in opposition to the doctor.

During the year, in each centre, a course of simple lectures was given to the registered but untrained midwives. Women unregistered but working as maternity nurses were also encouraged to attend. The first course was given in Auckland, and as many as sixty women attended some of the lectures, and seemed to very much appreciate their teaching. The lecturer endeavoured to keep them well within the comprehension of the untrained women, and from later observations some good was certainly done by them. In Dunedin not so many attended, but a very fair number of the midwives in or near the town did, and the same was the case in Christchurch and Wellington.

In the country parts an inspection of the midwives has been carried out chiefly by the trained nurse and Midwife Inspector appointed in June, 1908. This Inspector has travelled through the Southland and Otago Districts to all the scattered towns and small country places, and has found out the manner in which these places are supplied with doctors and nurses (by this is meant maternity nurses), and the needs of the settlers in this respect. It is hoped that where there is real need and an opening for trained nurses, some may be induced to settle. The Inspector has also travelled through a great part of the North of Auckland district, and the following extract from her report will be of interest:—

"In some districts in the Auckland Province the settlers are fairly well supplied with untrained registered midwives and maternity nurses. Here and there, however, in large areas where there are many people scattered about, as in Hokianga and Waihopo (north of Auckland), the country between Frankton and Rotorua, and a large part of the King-country, the nursing facilities available are most inadequate. Bad roads make travelling so difficult that women who cannot leave their homes to be nursed and attended must run great risks, being frequently dependent upon the unskilled attentions of their neighbours. Many of the untrained registered midwives are elderly women who have learnt what they know of their work by attending such cases of emergency, their practical knowledge being in many instances very meagre; others, again, seem most capable, having profited by a large experience, and doubtless deserve high tribute for much good work done under most trying conditions. It is gratifying to find that those who have attended the lectures arranged specially for these women by the Department last year in most cases show superior knowledge to those who have not taken advantage of these means for their improvement. These elderly midwives cannot continue to work much longer; many of them are giving up now on account of old age; their places must soon be filled by trained midwives and nurses, and this transition seems to require careful adjustment. Most country midwives have had their own homes in the district, and have not been altogether dependent upon their work for a livelihood. The question of fees is frequently a difficulty to both patients and nurses, and is apt to increase, as the trained nurse is generally dependent entirely upon her work. The scheme for district nursing for the backblocks proposed at the Hospital and Charitable Aid Board Conference will be a good solution of the difficulty. I have frequently been approached on this subject of fees while inspecting the midwives."

There are now 1,081 midwives on the register. Sixty-two have been added during the twelve months since 1st April, 1908. Of these, thirty-eight have been trained and examined under the regulations of the Midwives Act, while the remainder have been admitted on certificates of training from maternity hospitals in other States or from Home. A larger number should be trained in the Dominion this year, as more pupils are being received in the various training schools. In the course of a few years this gradual and sure increase of fully qualified women should make a great difference in dealing with the above conditions. As the numbers increase they will be more inclined to go out into the backblocks, where they are so urgently needed.