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The politics of midwifery education and training in New South Wales during the last decades of the 19th Century

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KEYWORDS

Midwifery; Education; Training; Lay midwives; Births; Maternal mortality; Midwifery nurse; Hospitals; Fees; Asylum **Summary** This paper focuses on the introduction and development of midwifery education and training in Sydney during the last decades of the 19th century. The aim of the training, it is argued, was to displace the lay midwives by trained midwifery nurses who would work under medical control.

The lay midwives were one of the largest occupational groups among women and two-thirds of births in NSW were being delivered by them in the late 19th century. It was a period of professionalisation of medicine and medical men laid claim to midwifery as a legitimate sphere of their practice and saw it as the gateway for establishing a family practice. The lay midwife stood in the way of their claim.

The training programs were established purportedly to control maternal mortality. From the beginning in 1887 medical men were in control of midwifery nurse training. In addition to training at the Benevolent Society Asylum, three more women's hospitals were established in the 1890s in Sydney making it possible to train a stream of midwifery nurses.

The midwifery nurses were charged exorbitant fees for their training; the fees contributed substantially towards running the new hospitals that delivered birth services to the poor and destitute women mostly in their homes. The midwifery nurses worked hard in miserable conditions under the guise of clinical experience required for training.

When a critical mass of poorly trained midwifery nurses were in the offing, a Bill was introduced into the Parliament in 1895, restricting registration to midwifery nurses and this would have eliminated the lay midwife if passed. It took more than two decades to get a Registration Bill passed in the NSW Parliament.

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Introduction

Education and training of midwives in New South Wales (NSW) was introduced during in the last two decades of the 19th

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century in Sydney. First, in the Benevolent Society Asylum in the 1880s and later into three women's hospitals set up in the 1890s. The development of the NSW state economy in the 1880s, along with the depression of the 1890s highlighted the needs of women, particularly at the time of childbirth. The norm for most women at the time of childbirth, especially in the country, was to stay at home and make do with a local untrained lay midwife. ^{1,2} Trained birth attendants were rare, and most women considered them to be a non-essential luxury. Generally, women did not regard childbirth as a medical event requiring supervision of a medical practitioner. ³

Childbirth, though not an illness, required a lying-in period for women up to two or more weeks to recover from the exertion of labour. The attending lay midwife, an independent practitioner assisted with the birth and often provided domestic help for the women during the lying-in period.² Sometimes additional help was given by female friends and relatives and this was known as 'neighbouring'.² Some of the more affluent women, especially in Sydney, who could afford the services of a medical practitioner at childbirth, would hire a monthly nurse who would move into the home prior to the birth and stay for two or more weeks following the birth to care for the woman and family by providing domestic services.^{1,2}

This paper looks at the professional power exercised by medicine over midwifery in the introduction and development of midwifery education and training in NSW during the last two decades of the 19th century. This aspect is not covered in previous published works. Willis, ⁴ in examining medical dominance covers the politics leading to the division of health care and the subordination of midwifery by medicine and Fahy, ⁵ has provided an analysis of the strategies of power used in the subordination of midwifery by medicine. These works have not examined how education and training of midwives was used by medicine as the means to eliminate lay midwives by creating a new class of birth attendant, the midwifery nurse.

Lay midwifery practice

The number of lay midwives grew as population and the pace of urbanization increased during the last decades of the 19th Century. Lay midwifery flourished and there was no restriction placed on entry to the practice of midwifery.^{6,7} From accounts, lay midwives in NSW hardly differed from the 19th century description of midwives in England; they were illiterate, middle aged multiparous women who gathered their experience from observing and helping an established midwife before going into practice themselves.^{8,9} It was a tradition that a midwife was a married woman in midlife or older, had borne children and witnessed friends or neighbours births; personal experience tended to be an essential qualification ^{8,9} The knowledge and skills of lay midwives were learnt in the bedroom and handed down from woman to woman.

The lay midwife came from the working class and many were illiterate as were most working class women of the period. ¹⁰ Some women, who were faced with adversity like widowhood, would resort to lay midwifery to support their family; others would practise to supplement a husband's meagre income. The services of lay midwives were in great

demand; in the country they were highly regarded and known as friends, "rich in common sense, kindness and with skilful hands". A rural doctor in the 1890s during the debate in the NSW Parliament on midwifery training and registration stated that he had no hesitation in leaving childbirth in the hands of the local lay midwife as they were patient and less inclined to interfere in the process. ¹¹

Lay midwives were powerless women without professional organisation. They used the title of 'midwife' which meant 'with woman' at childbirth to describe their occupation and most worked in solo practices. Some of these women are listed in late 19th century Sydney directories. ^{12–14} The midwives and monthly nurses in 1891 numbered 1696 and they formed one of the largest occupational groups among women of the period. Three quarters of the women practising midwifery were more than 45 years old in the 1891 Census report. ^{15,16}

Medical practitioners of the period

In 1891, the number of medical practitioners working in NSW was 673.¹⁶ They were a powerful group and were united through their membership of the Medical Associations. Some were members of the NSW Parliament, others had leadership roles in organisations such as the Benevolent Society through their appointment as medical officers to the Benevolent Society Asylum.

Most of the medical practitioners in NSW during the second half of the 19th century were overseas trained, predominantly from the United Kingdom.¹⁷ Medical education was only introduced in NSW in 1883 with the establishment of a medical school in the University of Sydney.¹⁸ The overseas trained doctors came to NSW in the mid century when there was an oversupply of professional men in the United Kingdom.¹⁷

There were also quack doctors practising, their numbers increased so much that NSW gained the reputation as being a "paradise for quacks" with more than 200 practising by 1890. 19 There was one B. Fawcett who set up a lying-in hospital in Bathurst and appointed himself as the medical officer and accoucheur. 20

In the second half of the 19th century, NSW was sparsely populated and during the closing decades, town and city developed. The sparse population and relatively young people, with four fifths of the population under 44 years of age in 1880, placed little demand on the medical services. Families relied on medical guide books that gave remedies and cures for most common ailments and even contained considerable information on childbirth. The most demand placed on the medical services was during epidemics. During other times doctors depended on surgery and childbirth among the middle class to earn a living, some supplemented their incomes by farming or acting as the local postmaster or doing clerical work at the local courthouse. ¹⁷

Medical practitioners had to compete against quacks and lay midwives to earn a living. While the quacks could be controlled by tightening the rules of the Medical Registration Act, the profession faced the real threat of lay midwives extending their practice among the growing number of middle class women. This was also a period of professionalisation of medicine and doctors were laying claim to midwifery as they believed it to be part of their legitimate sphere of

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