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MADRAS RECORD OFFICE.

Government of Madras.

Public DEPARTMENT.

G.O. No. 1394	Press Mis.
Dated 31-10-1951	1870

Not to be folded or roughly handled

Proceedings of the Madras Government, Public Department,

31st October 1870.

No. 213. Read the following letter from the Officiating Under Secretary to the Government of India, Home Department (Public), to the Chief Secretary to Government, Fort Saint George, dated Simla, 12th October 1870, No. 4664:—

In accordance with the Resolution of the Government of India, No. 1576, dated the 1st of August 1860, I am directed to forward, for the information of the Government of Madras, the accompanying copy of the papers noted on the margin.

Letter from the Government of Bengal, No. 550-T, dated 2nd October 1869, with enclosures.
Do. do, No. 1188, dated 4th April 1870, with enclosures.
Do. do, No. 3078, dated 9th ultimo, do.

From the Secretary to the Government of Bengal, to the Secretary to the Government of India, Home Department, dated Sooree, the 2nd October 1869, No. 550-T.

With reference to your office letter, No. 3152, dated 9th July last, I am directed to forward, for submission to the Government of India, the accompanying copy of a communication, No. 587, dated 13th ultimo, and of its enclosures, from the Inspector-General of Hospitals, submitting a report on the question of training native women as midwives.

2. It will be seen that all the Medical Officers consulted on the subject are of opinion that it is scarcely possible to introduce in any Government school or hospital such a system of instruction as would enable native women to practice midwifery with skill and success.

3. Dr. Charles, Professor of Midwifery at the Medical College, seems to think that, with four schools founded on the model of those at some of the capital cities of Europe, entailing an expenditure of two lakhs of rupees, something might be done to improve a little the class of women who practice as midwives in Bengal, and that even such a costly scheme would lead to very limited results.

4. He says, however, that, should it be decided to make a small tentative experiment at the Medical College, twenty women might be received at the institution maintained there for a period of six months on an allowance of Rupees 5 each per mensem, and placed specially under the tuition of a Bengali woman on a salary of Rupees 15 per mensem; but he strongly objects to the introduction of such an element into the Medical College as quite incompatible with the welfare of the institution, especially as the women to be brought in ought, in his opinion, to be young, so that there may be some prospect of imparting to them even the most elementary instruction. In the opinion of Dr. Charles, the idea of training a native woman who cannot read or write, and of qualifying her, by means of scraps of fragmentary knowledge, to take the place of the medical man, is quite chimerical.

5. Dr. Chevers, Principal of the Medical College, concurs in the opinion expressed by Dr. Charles as to the little prospect there is of obtaining any really important results from any attempt that may be made to train up native women as midwives. Although he does not anticipate any great success from the experiment, he thinks six women might be maintained at the College Hospital to be trained as *nurses* only in midwifery cases for a year. They would then become certificated *dhyes*.

6. Dr. Saunders, holding the same opinion as Drs. Chevers and Charles as to the degree of success to be expected from any scheme, differs little from the proposal of the former.

7. The Inspector-General of Hospitals, admitting that the extent to which professional instruction can be imparted is but very limited, recommends that, as a tentative measure, six good *dhyes* be attached to the hospital on Rupees 6 each per mensem, who should receive a certain amount of practical instruction, and be allowed to practice in the city, calling in medical aid in difficult cases.

8. It seems to the Lieutenant-Governor that no attempt at elaborate instruction in obstetrics is contemplated by the Government of India, or is likely to succeed. His Honour is of opinion that all that is wanted to be done in the existing state of things is to send out into native society as large a body of *dhyes* as can be procured, at a slight cost to the State, better trained than those who now act in that capacity, without any instruction beyond that of personal experience and native tradition.

9. With the view of accomplishing this object, the Lieutenant-Governor would recommend that, at each of the large hospitals in Calcutta, the Medical College Hospital, and the General Hospital, a class of six *dhyes* of middle age, on Rupees 6 each per mensem, be employed, who shall attend in the female ward and receive practical instruction in ordinary obstetrics in such manner as the authorities of the hospital may direct. At the end of six months, if fairly qualified to act as nurses or midwives in simple labour, they should receive a certificate from the College authorities. If any one has not acquired some moderate qualification in that time, she should be sent away, and a fresh one taken in, and, if people of any district choose to send up *dhyes* by public subscription or private charity for instruction, they should also be received at the College Hospital.

10. The Inspector-General of Hospitals has been, in the meantime, requested to inquire and report, whether, at the Mitford Hospital or any other dispensaries or Mofussil hospitals, similar opportunities could not be afforded of instructing the *dhyes*. Pending the submission of this report from the Inspector-General of Hospitals, the Lieutenant-Governor would recommend that the sanction of the Government of India may be accorded to the scheme for instructing *dhyes* in Calcutta.

Six <i>dhyes</i> at Medical College Hospital, at Rs. 6 each...	Rs. 36	11. The expenditure which the present proposition involves is Rupees 72 per mensem, as shown in the margin.
" " at General Hospital, at Rs. 6 each...	36	
Total...	72	

From the Inspector-General of Hospitals, Indian Medical Department, to the Secretary to the Government of Bengal, dated Fort William, the 13th September 1869, No. 587.

In answer to your Memoranda, * No. 1215, dated 20th July, and No. 1655, dated 31st August, returned, in which you enquire whether training native midwives might not be attempted in Bengal, I have the honour to report, for the information of His Honour the Lieutenant-Governor, that I have instituted some inquiries through the Deputy Inspector-General of Hospitals and Principal of the Medical College, of which the answers are appended.

2. The extent to which professional instruction can be imparted is limited, still it would be valuable if it could be practically carried into effect.

3. Dr. Durr, Agency Surgeon at Jypore, has had a class of this description in operation for six or seven years. Several *dhyes* (six, I think) are attached to the Maternity Hospital, to whom he gives lectures with demonstrations on working models. They answer questions intelligently, and he reported favourably of their efficiency, and said they were extensively employed in the city.

4. As a tentative measure, I think a similar plan might be tried with advantage in the Obstetric Hospital at the College. I would recommend that six good *dhyes* should be attached to the hospital with a salary of Rupees 6 a month, and that they should receive instruction from the Surgeon or Sub-Assistant Surgeon, with the assistance of the models used in the Midwifery Class. They should be assigned to the duties of attendance in the wards, and that they should be encouraged to practice in the city, calling on the assistance of the Surgeon or Sub-Assistant Surgeon in cases of difficulty.

5. This will require great tact on the part of the Professor of Midwifery, as these native *dhyes* have a high opinion of their own skill in the management of child-birth, and the people have strong prejudices in favour of ancient customs, and against male interference on this occasion. But I trust Dr. Charles' energy and zeal will prove equal to the occasion.

Please return the enclosures when no longer required.

From the Deputy Inspector-General of Hospitals, Presidency Circle, to the Secretary, Inspector-General of Hospitals, Indian Medical Department, dated Fort William, the 9th September 1869, No. 1765.

With reference to your No. 484-B, of the 22nd of July, and enclosures, I have the honour to forward, for submission to the Inspector-General of Hospitals, a letter, in original, No. 445, of the 3rd instant, from the Principal of the Medical College, as also a brief report from the Professor of

Midwifery (Surgeon Charles) as to the expediency and practicability of introducing a system of instruction in midwifery for native female pupils at a Government School.

2. I am of opinion that it is scarcely possible in any Government Medical School to introduce such a system with a hope of so instructing women as to enable them to practice midwifery with skill and success; but this, I imagine, is not what is aimed at in the proposition submitted with the Home Department letter of the 9th July last, No. 3152. I am under the impression that what is desired in the Bareilly Female School is a plan whereby some of the chief outlines of the art may be imparted to uneducated women so as to fit them for undertaking the post of nurse and midwife on all ordinary occasions, and I am inclined to think that such instruction could be imparted to a class of native midwives at the College Hospital in Calcutta without much difficulty, and that, possibly, the measure would be followed by a certain amount of success, especially if the superior classes of natives would consent to accept the services of these certificated nurses.

3. I do not, however, think that it is advisable, in the present state of native society, to advocate the establishment of a female school of midwifery, or of anything which shall attempt *through instruction*, unless an educated section of the native community would, in the first instance, take an interest in the matter and initiate the first steps of the movement. There can be no doubt that large numbers of women die in child-birth yearly, whose lives would be saved if we could give them skilled assistance. The native mind, however, rejects the physician's aid, as stated so emphatically by the shroff Luchmi Narain, but a great step would be gained could we induce respectable native women of middle age to devote themselves to the study and practice of midwifery.

4. As a tentative measure, I advise that Dr. Charles shall be permitted to give instruction to a limited number of native midwives; such instruction to be confined to a few brief lectures on the structure of the pelvis and of the adjacent soft parts, a demonstration of the mechanism of natural labour, and advice regarding the general conduct of the lying-in room with the after-treatment of the sick, *apart, however, from medical treatment* of which they would, of course, be wholly ignorant, the object being rather to teach the midwife the danger of following her own malpractices, than to fit the female pupil for midwifery practice.

5. All these women should attend the hospital for six months, and receive a certificate from the Professor of Midwifery as a midwife and nurse at the expiration of that time.

From the Principal, Medical College, Calcutta, to the Deputy Inspector-General of Hospitals, Presidency Circle, dated Fort William, the 3rd September 1869, No. 445.

In accordance with the instructions conveyed in your Office Memorandum, No. 1273, of the 26th July, forwarding the documents marginally noted, upon the question of training native women as midwives in this College, I have the honour to submit, in original, a report on the subject by Dr. Charles.

I fully coincide with most of the opinions expressed by Dr. Charles in this document.

I must confess to the greatest possible want of faith in the prospect of obtaining any really important results from a measure of this kind.

The only midwives whose services are of any value are—

1st.—Women, who, having received a sound and thorough medical education, are qualified to take the place of medical men in the lying-in room. I believe that Madame Boivin of Paris, was such an accoucheuse. Europe has not, I apprehend, produced ten others equally well taught and efficient.

2nd.—Women trained in lying-in hospitals as efficient *nurses* in the lying-in room fully qualified to act *only when a medical man* is present, and safe to do no harm in the absence of an accoucheur. Such are the most useful of the women who are certificated as midwives in Europe; they are valuable attendants, good nurses, capable of dealing with minor difficulties, very unlikely to inflict mischief, but quite unequal to act in cases of serious difficulty.

To attempt to introduce into this school, or into any dispensary in the Mofussil, a class of young girls to be instructed as midwives is, I unhesitatingly believe, a thing quite impracticable.

Here and everywhere else the midwife is one of the most obstinate, prejudiced, and unteachable of human beings. I should altogether despair of being able to teach an "experienced" native *dhye* to abandon any of her mischievous practices; but, although I should not anticipate any great success from the experiment, I think it would be well to maintain, in the obstetric wards of this hospital, on a fair salary, a body of women, say six, between 30 and 35 years of age, admitted upon proof that they had worked as professional midwives. For about a year these women should work as nurses, and they might, as Dr. Charles recommends, be specially instructed by a student selected for the purpose.

I think that women of fair intelligence thus trained in our hospital might be somewhat more useful than the present class of native *dhyes*; they might at least be less actively mischievous. Should such an experiment be tried, it would be well to endeavour to convince the leading members of the native community that they ought not to admit into their families any but *dhyes* holding the certificate of this College.

While I feel it to be my duty to submit my undisguised opinion upon this subject, I shall, of course, unhesitatingly devote my best energies to any experiment of the kind with which the Government may think fit to entrust me.

The enclosures are herewith returned.

Brief Report on the education of Native Midwives for Bengal.

Although I have been only asked to report upon the education of native midwives in connexion with the Medical College, I have deemed it right to extend the scope of my remarks, as there are difficulties in the matter having any such training school for women in the Medical College; and, to judge fully regard the matter, it seems right that the Government should have a more extended review of the question placed before them. I have to regret my inability to go fully into the subject in the present report, as this is the last day I shall be in Calcutta, and the importance of the question merits more full consideration than I can enter into in the time at my disposal.

On my return from leave, should the Government have decided on the extent of the measure which they propose to adopt, I shall be prepared to go more fully into details, which, for the present, I must leave unnoticed.

2.—*Educational measures of a similar kind under Continental Governments.*

Most of the Chief European Governments, with the exception of that of Britain, expend large sums of money on training up women to act as midwives, and have large training institutions set apart and supported by the State, at which this class receive instruction.

At Berlin, St. Petersburg, Moscow, Vienna, and Paris, I have gone over those that may be considered the best models on which to found such schools.

In Russia the land-owners select women who are sent to these Government Schools, and provide them with a subsistence allowance while they are being educated, and arrange that they shall return again to their own villages when have been declared fit to practice.

3.—*Arrangements on a large scale for Bengal.*

I calculate that, with four schools of this description, entailing an annual expenditure of two lakhs of rupees and an indefinite but certainly large preliminary expense for buildings and apparatus, that something might be done in the direction of attempting to improve a little the class of women practising as midwives in Bengal.

Believing the Government are not prepared to meet such a large expenditure for a scheme which would lead to only such limited results as those which might be expected to accrue, should such a proposal be adopted, for the present I will not enter into any details with regard to such a scheme.

4.—*Reasons why no training institution on an extended scale should be in any large town.*

It is very advantageous, under ordinary circumstances, that such training schools should be situated in the midst of large centres of population; that an abundant supply of labour cases should be provided for the instruction of the pupils in the practical demonstration of varied circumstances under which their art can be advantageously applied. In India there is so much objection to enter a hospital devoted to the reception of women in labour, that much of the advantage of placing such a school in a town would be practically not attainable. To counterbalance this, a system would require to be organized of imparting to the women under training practical instruction in the houses of the poorer orders, and for this a town does not present so great advantages over a thickly populated rural district as to counterbalance the disadvantages of another kind which are connected principally with towns.

The class of pupils would be chiefly drawn from the very lowest class of midwives in retired villages. This class is found to enter the ranks of prostitution with such fatal facility that, were these institutions placed in towns, the numbers of women leaving their villages to be educated, and preferring never to return to them again, would be so great as to constitute a real difficulty in continuing to carry out the scheme.

5.—*Small tentative experiment at the Medical College.*

Should it be decided on to make an attempt to instruct a few women at the Medical College, I would propose that twenty women should enter the school for a period of six months. They might be allowed a subsistence allowance of Rupees 5 per mensem.

One-half of these allowances might be paid by the Government, and the other half by Zemindars who wished to improve the condition of their villages in respect to the want of trained midwives.

For practical instruction they would be placed in rotation for three hours daily on duty in the hospital, one person during the time being on duty in each ward. The Professor of Midwifery, the House Surgeon, and the Matron of the Hospital, possess only such an elementary acquaintance with Bengalee that the share which they could take in instructing this class would be but a very slight one.

I would propose that the Government should offer a scholarship of Rupees 15 per mensem to the best student in midwifery, to be competed for at the end of the fourth year of study, and that the holder of this prize should go over a short catechism of midwifery with the female pupils for half an hour each day. There should also be attached to the class a Bengalee woman on Rupees 15 a month (and a full hospital ration), who should be a permanent incumbent of the post, and devote herself to going over the subject of the day with the pupils at greater length. Besides this, a sum of Rupees 15 might be provided, so that a stipend of Rupees 5 a month might be given in addition to the subsistence allowance to the three best pupils, who would be used as pupil teachers to assist the more backward pupils in their studies.

So far for this scheme in my capacity of obstetric physician to the hospital. I should fail, however, in my duty as a member of the College Council, did I not point out that the introduction of such an element into this Medical School as the one just described would, in my opinion, be quite incompatible with the welfare of the institution. It is absolutely essential that the women should be young, if we are to succeed in communicating even the most elementary instruction to them.

What would be the result of bringing thus to Calcutta a number of young widows with the limited amount of experience of the world to be derived in a country village, can to a certain extent be safely predicted beforehand; whether yearly a number of these women would not prefer to remain in Calcutta and elect the freedom of life they had here learned to appreciate; whether a very fair proportion of them might not be expected to return to their villages in a condition little likely to enhance their credit for morality, are questions which, to a certain extent, affect the name of the college, and in a much more extended sense deserve the careful consideration of the Government. I feel sure that the mere presence of this highly objectionable element in the school would act injuriously on those of the vernacular classes who are resident on the College premises, and tend to make them take their minds off their studies. The question in this light belongs more specially to the Principal, and I leave its further discussion to him.

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6.—Further tentative experiments at the principal Civil stations.

Even if it is decided to make a trial at the Medical College, it might seem advisable to see what might be done in the same direction at some of the principal civil stations; six of these might be selected for this purpose, Dacca and Pubna being among the number. The Sub-Assistant Surgeons in charge of the dispensaries might get an allowance of Rupees 50 per mensem for teaching such a class, and probably Rupees 100 per mensem, besides such a sum would cover the expenses of dieting patients, &c., required to carry out such instruction, and a subsistence allowance would require to be provided for the pupils.

7.—Elementary nature of the proposed education.

Any education which could be given could only be of the most elementary nature. On mentioning to a native friend that it should be attempted to teach these women to read during the six months they remained under instruction, to enable them to refresh their memories by referring to their catechism, he laughed at the idea as visionary. If the women are really so stupid and so ignorant that in six months they cannot be taught to read a simple pamphlet, the amount of good they can get by being trained must be extremely small. I would propose, therefore, not to aspire to a high standard, and to aim at nothing more than a very fragmentary knowledge of structure, a very general knowledge of natural labour, the means for rousing a child from a state of suspended animation, and for arresting *post partum hæmorrhage* and like matters.

Midwifery only in such a modified and restricted sense should be taught them. The whole domain of obsteric surgery in connexion with difficult labours and that of obstetric medicine in regard to complications of labour should not even be touched on, and to call such women educated midwives would simply be a misnomer.

8.—Limited results so be expected from it

In regarding the account of the proposed experiments being made at Dacca, care must be taken not to be led away by the language into confounding what is an extremely desirable result with one that is likely to be attained to. The mortality among women in child bed is alluded to, and the want of nurses, who shall be capable of saving life when prejudice prevents a medical man from being called in, is brought forward.

A midwife, who has studied for two years in the Maternity Hospital in Paris, is liable to the most severe penalties should she fail in sending for a medical man if she is attending any case which turns out to be one of difficulty or danger, and is not allowed to perform any operation if the services of a medical man are procurable. These midwives are thoroughly able to read and write, and, from their previous education, have been trained to learn; they have been specially trained to their work to as high an extent as they are capable of receiving instruction, and have been exercised in all the usual obstetric operations. As the French Government have been obliged to enact harsh laws with the object of providing that they shall not attempt to usurp the functions of medical men, with which they cannot be safely entrusted, the idea of training a native midwife, who cannot read or write, who has never acquired the power of learning, and who labours besides under many other disadvantages when compared to a French woman, and fitting her by means of scraps of fragmentary knowledge to save life by stepping into the place of a medical man, may safely be regarded as chimerical.

If we are contented with an aim infinitely short of this, and if we succeed in training a woman who can act in the more simple emergencies which may occur, and who under circumstances that she can do no good will abstain from doing the evil which she can be guarded against by no means trivial, advance will be made, and towards the attainment of this end our exertions should be directed.

9.—Proposal to influence the masses of the people by means of a pamphlet.

All that can be done for many years to come in training midwives for Bengal will exercise no appreciable influence on the death-rate caused by child-birth. A great part of the good to be expected to result would depend on what the midwives were taught not to do, their strongest point would be their power of persuading the people to leave off old practices which render the lying-in room so fatal to many.

31st October 1870.

With any numbers of women who could be rendered useful in this way, the masses of the people would remain uninfluenced, as their numbers render it impossible to provide midwives for the masses.

Under these circumstances, I conceive that a brief and concise pamphlet, pointing out the danger they run by employing a *tapdewani*, the discomfort they may avoid by refusing to partake of *jhal*, and the fatal tendency of the close, damp *authoor ghar* now so universally used, and treating of similar kindred subjects, would be of great use in awakening public opinion among masses to see the danger of such old customs, and to lead them to abolish such evil institutions as those which now surrounded a recently delivered woman.

No. 4975.

Copy forwarded, with the papers noted in the margin, to the Financial Department, with a recommendation that the proposal of the Government of Bengal may be sanctioned.

Public Proceedings of 10th July 1869, No. 127. Copy of Office Notes.

(By order of the Governor-General in Council,)

HOME DEPARTMENT, PUBLIC,
SIMLA, the 29th October 1869.

(Signed) J. GEOGHEGAN,

Under Secy. to the Govt. of India.

From the Officiating Junior Secretary to the Government of Bengal, to the Secretary to the Government of India, Home Department, dated Fort William, the 4th April 1870, No. 1188.

In continuation of paragraph 10 of Mr. Eden's letter, No. 550-T, dated the 2nd October 1869, and with reference to your office docket, No. 5286, dated the 3rd December last, communicating the sanction of the Financial Department to the expenditure, experimentally, for twelve months, of Rupees 72 per mensem, for the education of twelve native women in practical midwifery at the General and Medical College Hospitals at Calcutta, I am directed to forward, for submission to the Government of India, the accompanying copy of a letter* from the

* No. 1228, dated 22nd ultimo.

Inspector-General of Hospitals, Indian Medical Department, reporting on the proposed extension of the scheme to the Dacca Mitford Hospital and other Mofussil hospitals and dispensaries. The Lieutenant-Governor agrees with Dr. Murray in thinking that a regular class, such as that sanctioned for the General and Medical College Hospitals, can only be formed at the Mitford Hospital, and recommends, for the sanction of the Government of India, the experimental formation of a class of three *dhyes* for that institution, who should receive a stipend of 5 Rupees each per mensem while undergoing instruction.

2. In regard to Mofussil hospitals and dispensaries, Dr. Murray suggests that, in many places, now that medical pupils are attached to dispensaries, it might be possible to substitute for some part of the establishment a *dhye* on 5 Rupees per mensem, to be paid from the dispensary funds; and, to encourage the attendance of lying-in patients, he proposes that small obstetric wards should be provided, and a subsistence allowance of 2 Annas a day given to each such patient. A circular has this day been issued to all Divisional Commissioners, requesting them to invite Dispensary Committees at the larger stations, or where the Sub-Assistant Surgeon in charge is a man of superior qualifications, to consider this proposal.

From the Inspector-General of Hospitals, Indian Medical Department, to the Secretary to the Government of Bengal, dated Fort William, the 22nd March 1870, No. 1228.

With reference to your letters, as per margin, on the subject of training native women as midwives, I have the honour to report that the main obstacles in the way of the scheme, as regards its introduction into Mofussil hospitals, are—

No. 531, dated 2nd October 1869.
" 2762, " 9th December "

- (1.) The difficulty of obtaining eligible pupils.
- (2.) The reluctance of women to come to a hospital for their confinement.
- (3.) The want of accommodation for lying-in cases.

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2. On a review of the reports of Deputy Inspectors-General of Hospitals and Civil Surgeons, I am of opinion that a regular class, such as that sanctioned for the General and Medical College Hospitals at Calcutta, can only be formed at the Mitford Hospital, in the city of Dacca. To ensure the regular attendance of the women, and to attract intelligent *dhyes*, a stipend of 5 Rupees a month should be allowed to each while undergoing instruction. As, from one or other of the difficulties enumerated, the formation of a regular class in other hospitals seems impracticable; for these a different scheme, cheaper in its working and better adapted for minor hospitals, might be adopted.

3. At every hospital under the immediate charge of a Civil Medical Officer, an intelligent woman might be entertained on a fixed salary of 5 Rupees a month, who should make herself useful as an attendant on the female patients, and receive instruction in midwifery, theoretically from books in the vernacular, such as those of Meer Ashruff Ally and Unnoda Churn Kastogree, and practically as opportunity offers. When sufficiently qualified to earn a living by the practice of her profession, the woman's connexion with the dispensary should cease, and her place be taken by another apprentice nurse. By this system, every large Mofussil town would have attained midwives in two or three years, and fresh accessions to their number would occur periodically. Where a dispensary is sufficiently flourishing to bear the charge, the stipend for the nurse and midwife might be paid from its funds; but, where it would be felt as a burden, a dresser or shop cooly might possibly be dispensed with, seeing that native medical pupils, paid by Government, are now attached to dispensaries.

4. In order to afford facilities for practical instruction, pregnant women of the indigent classes should be induced to resort to hospital for delivery, by the offer of a subsistence allowance of 2 Annas a day during their stay there; success in this direction would be greatly promoted if some of the native gentry at Zillah stations would take an active interest in the matter.

5. Want of accommodation seems general; and, considering the class of women to be educated, success cannot be expected without the means of affording practical demonstration of the mechanism of natural labour, the general conduct of the lying-in room, and the after treatment of the sick. I do not, however, consider this obstacle insurmountable, and, as the objection has been raised generally where the scheme is not favourably regarded, I am of opinion that, in most instances, where no lying-in wards exist, some arrangement can be made without much difficulty by Civil Surgeons and Dispensary Committees, by providing a small room for the reception of obstetric cases.

No. 2088, dated Simla, the 28th April 1870.

Endorsed by the Home Department.

Copy forwarded to the Financial Department for consideration and orders, with reference to its Resolution, No. 2570, dated the 19th November last. Copy of an office note with initial orders accompanies.

From the Secretary to the Government of Bengal, Judicial Department, to the Secretary to the Government of India, Home Department, dated Fort William, the 9th September 1870, No. 3078.

With reference to your letters noted on the margin, and to paragraph 2 of this office letter, No. 1188, of the 4th April 1870, I am directed by the Lieutenant-Governor to forward, herewith, for the information of the Government of India, a copy of a Resolution which has been this day recorded by the Lieutenant-Governor on the subject of extending the scheme for instructing native women in practical midwifery to Mofussil hospitals and dispensaries.

31st October 1870.

Resolution by the Government of Bengal, Judicial Department (Medical), dated Fort William, the 9th September 1870.

Read the Proceedings of this Government, noted on the margin, regarding the sanction of the Government of India to the formation of a class of eight *dhyes*, on Rupees 9 each per mensem, in the Medical College Hospital, and a class of three, on Rupees 5 each, in the Mitford Hospital at Dacca, for practical instruction in the principles of obstetrics, with the view of providing efficient midwives in both towns, in place of the present ignorant class of *dhyes*.

Read also Proceedings in the Medical Department for April 1870, No. 3, requesting all Commissioners of Divisions to invite Dispensary Committees at the larger Sudder stations or towns, where the Sub-Assistant Surgeon in charge is of superior qualifications, to consider the proposal of the Inspector-General of Hospitals for extending the scheme for instructing native women in practical midwifery to Mofussil hospitals and dispensaries, and to provide an obstetric ward in each, and to allow each lying-in patient 2 Annas per diem as subsistence allowance.

The replies of the several Commissioners have been received, and are briefly to the following effect:—

Orissa and Assam Divisions.—Sufficient means or inducements do not exist in these divisions to admit of the proposed scheme being carried out in any of the districts.

Chota Nagpore Division.—The charitable Hospital Committees at Hazareebaugh and Purulia agree to arrange for the instruction of one nurse for each hospital in obstetric practice. They have been advised, however, not to incur any expense for additional buildings to be used as obstetric wards, until it is ascertained beyond doubt that women will resort to the hospitals for attendance in labour.

Patna Division.—The experiment will be tried in the Gya Dispensary. In the Patna Dispensary it has been already commenced, a *dhye* on Rupees 4 per mensem being engaged, and a room set apart as a lying-in ward. At the Sarun Dispensary arrangements are in progress for the employment of a *dhye*. The Arrah Dispensary has a *dhye* on Rupees 5 per mensem, and also accommodation for lying-in patients. At the Buxar Dispensary the scheme will be tried, and at the Mozuffpore Dispensary a *dhye* on Rupees 5 has been engaged. Lying-in patients already resort to this Dispensary.

Cooch Behar Division.—The Committee of the dispensary at Julpigoree have adopted the proposal, and have set apart a room and engaged a *dhye*.

Chittagong Division.—The Civil Medical Officer at Tipperah has found the scheme unsuccessful after a trial for the last seven years. He, therefore, proposes that each district should send two *dhyes* at the municipal expense to be trained at the Mitford Hospital, in order that they may be licensed to practice in their own districts. The Commissioner is of opinion that dispensaries should bear the expense attending this measure, and, in this opinion, the Lieutenant-Governor concurs. If the funds of the dispensary are insufficient for the purpose, the local officers should encourage the people to raise a special subscription.

Dacca Division.—The scheme will be carried out in Burrisaul as soon as a properly trained woman can be got. The Dispensary Committee should not wait for this, but should endeavour to train some intelligent willing woman. The scheme will be tried at the Silchar Dispensary, but no dispensary exists at Furreedpore, but a Mahomedan doubts are expressed as to its success. No dispensary exists at Furreedpore, but a Mahomedan woman has been found ready to go to the Mitford Hospital to be taught. The Commissioner should report how the expense of sending this woman to Dacca, and maintaining her there while training can be met. It is stated that the project cannot be carried out in Mymensing, as the Civil Surgeon is unable to devote any time to the necessary instruction. It is also said that *dhyes* should receive double the proposed wages, as it would be difficult to procure a nurse for the amount, Rupees 5, per mensem. The Commissioner should state why the Civil Surgeon has not the same time for such a purpose as Medical Officers at other and much larger stations. At Sylhet it is found impracticable to carry out the scheme.

Burdwan Division.—At Burdwan the proposal will be tried as soon as the Pilgrim Hospital has been erected; and at Culna the Maharajah of Burdwan has consented to appoint a native midwife.

31st October 1870.

Ooterparah has a pupil dhye and will set apart a room. Serampore has accommodation, and has engaged a dhye. Hooghly has a dhye and two pupils. The experiment will also be tried at Midnapore and Rutagor in Mysadul, the Zemindar of the latter place granting funds for constructing a lying-in hospital.

Rajshahye Division.—The experiment will be tried in the dispensaries at Rajshahye, Meershedabad, Rungpore, and Maldah, in each of which there is ample room for an obstetric ward. At the latter place, however, doubts are entertained as to a sufficiency of funds. If these doubts are well-founded, the proposal for a private subscription should be carried out.

Presidency Division.—Measures are being taken to provide accommodation for lying-in patients at Satkhira and Baraset, in the 24-Pergunnahs. The Krishnagur Dispensary will also give the experiment a trial.

Bhaugulpore Division.—The Dispensary Committees at Bhaugulpore, Monghyr, and Rajmehal have also consented to try the experiment.

The difficulty generally anticipated is that of inducing women to go to the hospitals for confinement.

The Lieutenant-Governor is satisfied that, with careful and judicious management on the part of the local officers, Civil and Medical, and the hearty co-operation of the Dispensary Committees, this attempt to train up a class of more reliable midwives will succeed, and will, by rendering available a class of trained nurses, be attended with very material advantages, and do much to nullify the evil which now exists from the malpraxis of a large number of utterly ignorant women.

His Honour is also disposed to think that, with some encouragement from Commissioners and energy on the part of the local authorities, the measure might be extended to many, if not all, of those dispensaries where the requisite capabilities and means of training women exist, but where obstacles of various descriptions are now said to offer themselves.

The Lieutenant-Governor hopes that every effort will be made at those dispensaries where the experiment has been, or may be, introduced to render it successful by a judicious treatment of the women under training, and a proper care of, and attention to, the women who may resort to the dispensaries and hospitals. The success of the experiment will much depend on the mode in which it is carried out at the commencement, and on the report taken back to their homes by the women who are the first to seek the aid of the dispensaries and their nurses.

The Lieutenant-Governor thinks that these dhyes, when sufficiently qualified, should be allowed to attend women in labour at their own homes, the Dispensary Committee fixing a small fee for all such attendances, and allowing a portion to the dhyes. When a dhye has become qualified, and there is a likelihood of her leaving the dispensary to practice on her own account, an apprentice should be admitted to succeed her if the funds of the dispensary can afford it. Commissioners in whose divisions the experiment is about to be tried, should carefully watch its working, and report the result on the 1st June next.

ORDER.—Ordered that a copy be forwarded to all Commissioners for their information and guidance. That a copy be also forwarded to the Inspector-General of Hospitals for information, with reference to his letter, No. 1228, dated 22nd March 1870. Also, ordered that a copy be submitted to the Government of India, Home Department, for information.

(By order of the Lieutenant-Governor of Bengal.)

(Signed) A. EDEN,

Secy. to the Govt. of Bengal.

No. 214.

ORDER THEREON, 31st October 1870, No. 1394.

Communicated to the Inspector-General, Indian Medical Department.

(True Extract.)

R. S. ELLIS,

Chief Secretary.

To the Inspector-General, Indian Medical Department.

Ed. J. Wright.

Extra-Official.

No. 4664

FROM

The Offg. Under Secy. to the Govt. of India,

TO

The Secy to the Govt. of Port St. George.

Home Dept.
Public.

SIMLA, the 12 October 1870.

SIR,

In accordance with the Resolution of the Government of India, ^{77/1576}
dated the 1st of August 1860, I am directed to forward for the information
of the *Govt. of Madras*

Letter from the Government of Bengal, No. 550 T, dated
2nd October 1869, with enclosures.
Ditto ditto, No. 1188, dated 4th April 1870, with en-
losures.
Ditto ditto, No. 3078, dated 9th ultimo, with enclosures.

the accompanying copy of the papers
noted on the margin.

I have the honor to be,

SIR,

Your most obedient Servant,

W. S. S. S. S.
Offg. Under Secretary to the Govt. of India.

GOVT. OF 1870 30/10/75.

PUBLIC.

To

THE INSPECTOR-GENERAL,
INDIAN MEDICAL DEPARTMENT.

Dated 12/10/70
Recd.

G. P. 31st October 1870, No. 1394.

OCTOBER
Nos. 213-214.

Communicating papers received from the Govern-
ment of India, on the subject of training native
women as midwives.

Proc. 25th April 1894 No 77-76.
" 15th March 1894 " 106-107

Public 1870 Sept.

From

1869: Under Secy. Govt. of India
Home Dept.
Public
No 6664.

J. No 2020
J. No 450 of 1872
17 12 } October 1890.
1921 }

3 Encl +
5 EC of each
+ of letter.

2 No 1808

Forwarding copies of
papers on the subject of
training native women
as midwives.

31st Oct to Dec 1890 No 1394.

Communications to the
Inspector General Indian
Medical Department.

repd 1/11
to Inspector General Indian Medical Department

Public

of Capt. Genl. ind. ind. 24th

12
of 1872

Dated Oct. 20/20	Recd.	1870, No. 24
G. O. 24		

Nos. 213. 214.

... papers received from the
... on the subject of
... native women and
... business.