



NEWSLETTER 5.

September 1961.

Dear Reader,

We are not there yet! The following letter appeared in the Guardian on the 28th August:-

"Not only are hospital buildings and equipment in England out of date and inadequate, but the mode of administration is such that there seems no hope even of improvements permitted by the niggardly means available from the Treasury. The Minister of Health has recently asked for a review of the maternity services from those involved. In two cases I know of the medical and nursing staff have welcomed the opportunity to criticise the conditions their patients suffer, but their comments have been 'toned down' or rejected by the committee responsible for replying to the Minister. One can only assume the committee concerned were afraid of drawing attention to their own inertia....."

So, please address all suggestions for Improvements in the Maternity Services direct to the Minister of Health, London, or send them to your Regional Organiser who will write the letter for you.

People from all parts of Britain continue to join A.I.M.S. and A.I.M.S. will continue to exist for as long as it is needed.

A central theme is beginning to crystalize from the mass of letters and information I receive. It is that women who have had a higher standard of education over the last 30 years (in other countries as well as in Gt. Britain) are demanding mistress-ship of their own physical destinies. They see great strides being taken in many modern fields of medical practice and they want more research into the problems of childbirth. They gain better standards of living (housing, food, cleanliness, etc.) and do not see why they should accept lower standards in such public institutions as hospitals. They have the confidence in themselves which greater knowledge brings and they want an intelligent "say" in the way that they and their babies are treated. A rising birth rate and a shortage of maternity staff have produced inhuman conditions (for staff as well as mothers) in hospitals in many places. A bumbling system of inefficient officialdom which allows for limitless combinations of buck-passing does nothing to ease the difficult task of putting matters right. Women must help themselves in bringing about better conditions by making sure that their views are known and, if necessary, by using their vote to emphasise their point of view and back up their demands for a better standard of care. If the future generations and the family units in this country are considered to be important then, as a nation, we should be ready to find the necessary money to provide the best possible investment in positive health - an intelligently run Maternity Service with adequate facilities to allow it to operate fully, smoothly and economically. There is a cry going up for more woman-power ("Come Back to Teaching" etc. and "Come Back to Midwifery"). If this is to be answered, women as mothers must have the assurance that all help will be given to them to achieve their difficult double-role. Unnecessary mental distress of all kinds must be eliminated. It should be possible to alleviate mental distress at childbirth (and to do with childbirth) with more care and this should, in my opinion, be undertaken as a major priority. I suggest that women must make the effort, even under present unhelpful conditions, to help themselves. (I hope that they will be supported in this by their husbands and encouraged by the growing number of male members of A.I.M.S. who consider that, as husbands, fathers and members of a family, this is their business too. As one father remarked, he was tired of men who get ready to fly out of the window like so many Peter Pans when anyone mentions the word Maternity.). While the shortage of trained staff persists we must help each other. Make the effort to meet other people, to talk to them, to discover what improvements are necessary in your area and to set about achieving them with determination.

Yours sincerely,

Sonia Willington.

News from Home and Abroad.

I am in contact with the National Council on Family Relations, 1219 University Avenue South East, Minneapolis 14, Minnesota. They tell me that Dr. Evelyn M. Duvall of Chicago, who is the chairman of their International Liaison Committee, reports that her committee is exploring the possibility of a World Family Year (paralleling the world wide observations of the geophysical year) The Paris office of the International Union of Family Organisations has been approached. She has seen the Honourable Adlai Stevenson, and has written him a followup at his post as United States Ambassador to the United Nations asking his help in finding proper channels for official backing of such a project. The tentative plan is, upon encouragement through U.N. and/or U.N.E.S.C.O., to invite other internationally interested agencies with a family focus to work to define the scope, design and possible programming of a World Family Year. The International Union of Family Organisations, which recently met in Madrid, has approved this for 1965.

The National Council of Family Relations publish a quarterly journal called "Marriage and Family Living" and they are obviously well organised having representatives throughout the United States. They have too what they call "members at large" which might be a good way to describe the majority of the members of A.I.M.S.

An article in the American magazine Woman's Journal expresses alarm at the rise in infant mortality in the U.S.A. It says - "Surprisingly, America has never ranked high in the protection offered its newborn. Once in 6th place among nations, we have now fallen to 10th. Huge and rich though we are, we do not give all our mothers and babies the care they would receive in (listed by order of achievement) Sweden, Netherlands, Australia, Norway, Switzerland, Great Britain, Denmark, New Zealand or Finland. Not even one state within the United States can manage the low infant mortality rate reported by Sweden." The Editor's comment to this article is as follows:- "The time has come for all of us, Journal readers and Journal editors, to join hands again in a work that is very close to our hearts. Just as together we wrought astounding changes in maternal health, with the result that many hospitals insist that every death must come before a medical board of review, so now we propose additional ways to protect our babies. We believe with Miss Ruth G. Taylor, Chief of the Children's Bureau Nursing Section, that in neighbourhood clinics women could be "delivered in facilities which more nearly incorporate the principles of care associated with rooming-in rather than with care given in acute illness. Such centres might be staffed primarily with maternity nurses, nurse-midwives, and auxiliary workers under the close supervision of the medical centre." Hospital and home health services could be developed so as to reduce the hazards to which early discharge from the hospital exposes a patient. Though most infant deaths occur in the first week of life, the trend has been for hospitals to send mother and baby home after only a few days. Often there is no thought of the conditions to which they must adjust there. In addition to more visiting nurses, we must provide trained women to manage the home until the family homemaker can again take hold. With homemakers available, a woman whose health is threatened by one of the conditions complicating pregnancy might stay home at rest, or she could accept hospitalization if necessary. To reduce danger during the entire maternity cycle, we women must carry our communities forward toward new combinations of doctor-nurse-midwife-homemaker and nursing services. We can do it. According to a group of English teaching doctors who made a study ten years ago, the hypothetical mortality rate if all avoidable deaths were eliminated could be 3.4 per 1000 deliveries. This is an ideal. It is not Sweden's figures, nor The Netherlands', nor Australia's we should be aiming for, but the ideal!"

I am also in contact with New Zealand where there is the Federation of New Zealand Parents Centres (P.O. Box 3685 Wellington). There are 10 centres working under professional guidance of specialists from a number of relevant fields for the sake of happier children, enlightened parenthood and a healthier community. They hold classes for expectant mothers, hold evening meetings, have lecture courses, film evenings and discussion, publish a bulletin which has a wide distribution and goes to all maternity hospitals. They are very interested in preventive mental health.

From Singapore Mrs. Prunella Briance, the Founder of the Natural Childbirth Association, writes sending all encouragement and best wishes to A.I.M.S.

An article about maternity care which appeared in the magazine "Today" for June 3rd, although thought to be over sensational by some, nevertheless brought in many new members from all over the country. "Family Doctor" for June published letters about loneliness in labour from Mrs. Smallwood of Breconshire, Mrs. Holmes of Kent, Mr. Argall of Birmingham and Lt.Col. Fletcher of Surrey. "Woman's Mirror" in

June published two very good articles on the maternity services and asked for letters from readers, describing their experiences in maternity hospitals, which would be forwarded to the Minister of Health. Newspapers in Yorkshire, Cardiff, Cornwall, Scotland, Hampshire and Hertfordshire have all carried articles about A.I.M.S. recently.

Frank Hart, House Governor of Charing Cross Hospital spoke at a meeting of the Rickmansworth Branch of the British Federation of University Women in June on "Humanity in our Hospitals". He is to speak on this same subject on November 2nd at the St. Albans College of Further Education.

Attention has again been drawn to E.B.S. (the Emergency Bed Service) in London in recent articles in the press. The shortage of maternity beds in London is acute and it looks as if conditions in the future are only likely to grow worse. Many mothers who need hospital treatment have to wait until they are actually in labour before the search for a hospital bed for them is started. Often they are taken long distances by ambulance.

On the 8th May I spoke in the series "In My Opinion" on Woman's Hour on what I think is wrong with the present maternity services.

I accompanied Mrs. Ratt to see Lord Balniel, M.P. for Hertford and the present chairman of the Parliamentary Health Committee. He was very sympathetic and suggested that a small deputation from A.I.M.S. should put their point of view to the Health Committee at some date to be arranged in November. When this date is fixed I shall ask all members to write to their M.Ps. asking them to attend the meeting of the Committee.

There is interesting news from:-

Portsmouth where Mrs. Gill appeared on Southern Region Television; Newcastle where Mrs. Norris appeared on Television and has been invited to take a chair at Royal College of Midwives Study Day in October; Cheshire where Mrs. Roberts is now on the house committee of the local maternity hospital; Croydon where Mrs. Campbell hopes to start her scheme for sitters-in with mothers; Cornwall where a lack of incubators for premature babies is being investigated and Scotland where Mrs. Hall of Ross-shire has formed Scottish A.I.M.S. (S.A.I.M.S.)

A recent editorial in the Nursing Mirror expressed the view that more voluntary help in hospitals would have to be accepted in the future.

Has anyone else had wind of a suspected banning of reports in the press about poor hospital conditions? Does anyone know of an area (besides Cornwall) which is inadequately equipped with incubators for premature babies (in hospitals or ambulances)? Has anyone an old filing cabinet that they no longer need?

A well-known publisher hopes to have news soon about the publishing of the book of personal accounts of experiences at childbirth.

A book called "The Patient's Attitude to Nursing Care" (Livingstone, Edinburgh. 10s.6d.) by Mrs. Ann McGhee, is based on interviews with 200 patients in a Scottish hospital and summarises the opinions expressed by them on such matters as noise, food, nursing and medical care and "communication". It is recommended as essential reading for nurses, doctors and all concerned in hospital management.

Being left alone in labour, lack of adequate analgesia and the treatment of the babies in hospitals still remain the three most common complaints from mothers who write to A.I.M.S.

The death in May is regretfully reported of Mrs. Janet Ashbee who was 83 and a staunch A.I.M.S. member.

REGIONAL REPORTS.

Scotland.

Mrs. W. Hall of Altera, Orrinside, Urray, Muir of Ord, Ross-shire., mother of five children, who lives in a croft, has bravely taken on the job with great enthusiasm of organising Scottish A.I.M.S. She has duplicated A.I.M.S. literature so that it has a Scottish bias and what she now needs is support from the scattered members all over Scotland. She writes - "...as a result of publicity, local and national, three letters only. So apathy reigns. It is indicated though that the need is there, it merely has to be organised. Chief hinderances - 1. Scotland has a lower standard of living than England and therefore lower standards. 2. Strong suspicion of anything which interferes with the private life of an individual. 3. A strong feeling that A.I.M.S. is already formed and its work done. 4. Complete lack of confidence in its ability to do anything anyway. I am going to combat the above if at all possible. Any advice? Would someone like to write to a Scottish paper saying how useful the Scottish A.I.M.S. will be."

Mrs. A. McL. Watt of Fife writes - "Mrs. Hall has contacted me and mentions that the Glasgow Herald are doing an article on S.A.I.M.S. Have been posting off leaflets to Births Announced in the local press. So far no response. Disappointing. Have spoken to local doctor who has shown interest. Progress slow."

Mrs. M. Boyd of Angus has moved to Surrey.

Cumberland.

Mrs. Bradbury has been busy, she says:- "I thoroughly enjoyed my home confinement. My husband was able to be present and the district nurse was wonderful. Nothing is too much trouble for her and she is always willing to come out if I need advice."

Northumberland.

Mrs. Norris enjoyed taking part in a N.Television programme. She has moved house to 8, Swinbourne Gardens, Whitley Bay., but nevertheless held a meeting amongst the decorators chaos. A questionnaire for outlying members unable to attend meetings is to be taken out to them and filled in by the visiting members. There seems to be quite a lot of friendly support and co-operation. I hope to go there to talk to a Young Wives meeting. On 28th October the Royal College of Midwives are to hold a Study Day on "Human Relations in the Care of Mother & Child" at Newcastle. Mrs. Norris has been asked to lead a discussion group in the afternoon on "How can the Service be Improved". Any A.I.M.S. members will be welcomed - please apply to Mrs. Norris for "form" before 21.10.61.

Yorkshire.

Mrs. Nicholson writes:- "We had a very good meeting in July - most encouraging. Members came from Horsforth, Halifax, Knaresborough and Ripon, as well as locally, 14 in all. We discussed the general policy for the Yorkshire Group of A.I.M.S. and decided to do the following:- 1. Circularize all local papers (a list can be had from the library) in a drive to get more members. Local organisers in as many towns as possible. We are going to appeal for these in the circular. Two people volunteered to help with the typing - Mrs. Davies of Rawdon and Mrs. Baker of Knaresborough. 2. Correlate information given on the Questionnaires to sum up conditions in the different maternity hospitals in the area. Mrs. Jones of Headingley promised to do this. 3. Send members who were unable to attend a resumé of what went on at the meeting. 4. £2 was collected which is to help to pay the expense of the circular letters. We also thought the subscription should be optionally either 5/-d. or 2/6d. according to what members could afford.

Some members think our literature is too aggressive towards the medical profession and that this deters people from joining. I should be interested to know if any other members agree with this. I have taken the opportunity (while in Preston, Lancs.) of meeting Mrs. Eastham the Preston Regional Organiser, and we had a very interesting and valuable discussion."

Lancashire.

Mrs. Eastham, S.R.N., writes:- "Since holding the meeting in my home on 15th May I have written to the local M.Ps., the Chairman of the H.M.C. and the Minister of Health, the object being an early start on a new hospital (to have 75 maternity beds) which is planned but no date given for commencement. I received polite and interested replies and from the Chairman of the H.M.C. an order to see him the following week! This I did do and was rather taken aback to find myself at the mercy of the Hospital Secretary, the Chairman, Senior Gynaecologist, Matron of the Maternity Hospital and Asst. Matron of the Infirmary. At the beginning I was received with a certain amount of suspicion and hostility, but I am pleased to say that during the following hour and a half I convinced them of A.I.M.S. sincerity and that our criticism was constructive. At the end of the interview the gynaecologist asked me to see him again. I went to see him last night (with a friend who I am hoping will take over the local branch of A.I.M.S. in September). We were very cordially received and given coffee and sherry during the evening! However in spite of our persuasion, his ideas remain very much in the 'old fashioned era'. He cannot see that husbands are any help to wives during labour but would concede that they may want to see their wives immediately after the birth and would not object to this being done! He is very anxious to see that no patient is without the analgesia she may need, and this seems to be something he is very keen to see done, and it is obvious he has had to oppose others about this, as he realises too many women are left in unnecessary pain. Apart from this he feels there is no need for improvement on the medical side, but would like more beds, more space and a bigger clinic. He is due to retire in 18 months, so I feel it is too much to hope we can change him and his ideas in that time! Another disadvantage is he is a bachelor. Over three months ago I had my name taken by the Health Visitor and the Almoner in the local hospital as being a person willing to be a 'child minder' for children of mothers having confinements. Although I was received with enthusiasm by the Sister on the Ante-Natal Clinic who thought it a much needed service, I haven't been contacted at all by the Health Visitor or Almoner. Obviously, some of the welfare services need a jolt, if they feel everything is being satisfactorily dealt with. The trouble is, the women who need the help often struggle alone rather than go to Almoners etc. I feel that the people these organisations help most are social misfits quite often, and would always need help. This seems

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very much the case in the Home Help Service. What we need is a Maternity Aid Bureau where normal families are dealt with without being made to feel that they are asking for charity. The aggravating thing is that the Home Helps are often expensive for the ordinary middle class family, while much of the Home Help assistance is given to 'problem families' free. What with this and the help they give to other classes such as chronic sick and old people there is very little room or patience left for the ordinary expectant mother. I am hoping to hold another meeting shortly to toll members of the replies I received from M.Ps. etc. I have also written a letter to the "Evening Post" which I will send as a follow up to your article."

Mrs. Eastham is moving to Birmingham in September. At a meeting in August she handed over the job of R.O. to Mrs. D. Page, 4 Whitelons Avenue, Lea, Preston, Lancs. Manchester.

Mrs. Wisbey has had to resign for domestic reasons. Mrs. Roberts of 4 School Rd., Rudheath, Northwich, Cheshire. has taken over, and she writes:-
 "The members in the Manchester Area, though enthusiastic do not seem to be able to meet often because the area is so large, and not many of us seem to be within easy reach of each other. The city hospitals which were built in the late 1800's are the ones where most reform is needed, and to this end I have had some correspondence with a senior gynaecologist, and also a Reverend Canon who is on one of the hospital boards. This correspondence is still going on! At the moment there are three complaints in hand. Two from St.Mary's Hospital, and one from Crumpsall. I may be able to get an interview at St.Mary's, but Crumpsall is a little out of my reach, and the fact that we have changed R.Os. has left me rather out of touch. In my own area - mid-Cheshire, there are several quite satisfactory Maternity Homes which, although short-staffed, really do make some kind of an effort to make the mothers comfortable. I have, after persistent agitation managed to get onto the Hospital Committee of one of these maternity homes which is in the course of extension. I am designated "official visitor" for the month of September, so this will give me the opportunity to look at absolutely everything! My husband gave three prizes for a baby show which the Matron there recently organised, as we both wish to encourage the hospital staff to take more interest in the mothers and babies who are in their care. This hospital was our old "isolation hospital" and the Matron feels that people don't know the hospital is there at all until they become pregnant. The local paper gave good publicity and photographs of the hospital and babies, so perhaps it is now "on the map". I have written a few letters to various members and hope that somehow we can narrow the distance between us all and arrange a meeting. My trouble is that I'm 23 miles away from the centre of Manchester, and I feel I should arrange at least a supper or something if I bring people this distance - unfortunately our house just about holds 10 people all standing! We hope to have the house extended next year so maybe I shall be able to have monster coffee evenings or bring and buys or something. There is not very much support for A.I.M.S. locally, because, as I said before, the local hospitals (three of them) are not too bad, but if we could get a foothold in Manchester itself I'm sure it would thrive. Manchester badly needs a new Maternity Hospital and it is up to us to see that we get one!

Leicester.

Mrs. Hill has resigned from the committee of the Leicester and Leicestershire Group of A.I.M.S., due to extreme pressure of work. She says:-
 "Now that the Group is securely established and there are more members able to serve, I felt that now was the right time to step down. I shall, of course, continue as an ordinary member and shall attend the monthly meetings as often as possible - in fact, I shall look forward to them. There is, of course, no need for you to appoint another "Regional Organiser" to take my place, since the function is performed by the committee under the chairmanship of Dr.Kidd. As you know, we owe a great deal to Dr.Kidd's leadership and guidance, and are particularly fortunate in having won the confidence of the Matrons of the local maternity units, and also of the majority of midwives. They are now inclined to give complaints put forward by us, a fair hearing, knowing that we make them without malice, and with due regard to the difficulties under which they work, and to shortage of staff. Some A.I.M.S. ideas with which we disagree - We have no intention of launching a campaign for lay 'sitter-in' in our local maternity units, knowing that there just isn't room for extra bodies, sometimes not even for husbands, even though two matrons here, at least, are now pursuing a policy of letting husbands stay with their wives whenever conditions permit. Also, we do not think that we should raise money to build an ideal Maternity Centre. With a National Health Service, it is the Government's job to build such centres, and we are concerned with seeing that those which are built reach a satisfactory standard. Finally, we feel that the training of male S.R.Ns.

Leicester contd.

as midwives cannot be adopted as an easy way out of the shortage of midwives, since certain problems arise in the tending of women by men, especially in such intimate details as breast-feeding. The relationship between doctor and patient is rather different, and more remote, than that between nurse and patient. Would like to suggest that the policy of all branches of A.I.M.S. should be to draw in the active support of the medical profession, trying to get at least one local doctor as an active member."

Mrs. Hawkins, the Group's Secretary, reports:-

Group discussions and meetings.

- a. Small discussion groups have been held to study the Lamaze and Vellay method of painless childbirth (psychoprophylactic method).
- b. A large meeting was held in April at the chief Leicester Maternity Hospital. Well attended by members, and by the profession - including Leicester's two leading consultants, Matrons, midwives, some G.Ps. and two members of the Hospital Management Committee. Meeting successful - many professional people very much in sympathy with A.I.M.S.'s aims. Told that anything anyone can do to speed the building of a new Maternity Hospital would be useful, and generally encouraged to continue our activities. Suggested by the chief Consultant that when we have 'proved' ourselves there is no reason why we should not sit on the Obstetrical Advisory Committee.
- c. Are holding members meetings at approximately 6 weekly intervals, and members very keen. They are organising a Jumble Sale and Coffee Parties to get funds, and are going to carry out a 'door-to-door' survey of parent's impressions of our Services. In this we hope to gain the help of the Health Visitor Service in selecting homes to visit where a baby has recently been born. In this way, we shall cover both hospital and domiciliary confinements.

Hospitals.

Our visits to Leicester's Hospitals had made us aware of the dire necessity for new accommodation, and we had planned to take this up with our M.Ps. However, Sheffield Regional Hospital Board have told us that five million pounds are to be spent on Leicester's hospitals, including two new Maternity Units of 150 beds each - and one of these is to be given top priority. We have decided to let one year elapse, and if no progress has been made then we shall approach our M.Ps. Both the major Maternity Units here have now adopted the practice of allowing husbands to stay with their wives during labour wherever possible. We have now been shown round the two large and one small National Health Maternity Units in the City, and are going to visit the two Private Homes in the City. County hospitals we have not yet had time to approach, but shall do so.

Questionnaire for Mothers.

This is to be distributed as described above, in a 'door-to-door' survey. Results will be submitted to the Hospital Management Committee for their consideration when planning the new units. We do not anticipate many complaints, as the comments we have so far received have mainly been very complimentary to the 'humanness' of Leicester's services.

Nottingham.

Mrs. Coultate writes:- "The most pressing need in this area is for more beds. Nottingham itself has lowest number of beds available for confinements for its size of population in the country. A survey is being conducted into the physical conditions of hospitals. Progress slow so far, as hospitals declined to give information without our getting permission from Sheffield Regional Hosp. Board. After five weeks delay the R.H.B. has replied apologising for delay and giving permission. Incidentally we had a very pleasant letter from the Board. We now await replies from hospitals and then armed with some details will approach local M.Ps. A second attempt to hold a meeting of local members has failed - members are widely scattered and all have young children. As organiser I have started to visit individual members and one member who helps to run a Young Wives Group has suggested I give a talk to the Group in the Autumn.

Birmingham.

Mrs. Walton writes:- "There has been an increase in members in this area especially since the article on maternity hospitals which appeared in "Today". All new members welcomed. Mrs. Walton visited the Monroe Davis Maternity Home at Tiddington and was given a very friendly reception by the matron and doctor in charge. A short report on this hospital will soon be available. Meanwhile three matters of importance stood out. None of the patients had to ask for analgesia - they were all given some sort of analgesia as soon as the sister noticed the need, and none of the 17 patients questioned felt that they would have liked more analgesia than they received. Only 2 out of the 17 patients would have liked someone with them during

Birmingham contd.

Labour - the most said that they felt "easier on their own". All patients reported that as soon as they rang the bell a friendly and helpful sister immediately appeared. None of the patients (who were in two wards of 6 and 9 respectively) would have liked to have been on their own. They preferred a small group of say 6 where they could all get to know each other. The atmosphere at this home was friendly and happy. Mrs. Wightman and I have been sending out The Times reprint "To Improve the Maternity Services" and the printed A.I.M.S. leaflet to all mothers whose confinements are reported in the Birmingham Post. A member who lives in Lichfield and who is herself a trained nurse is hoping to visit two hospitals in her area in the near future."

Mrs. Merrywrites:- "I have been appointed a member of the committee dealing with the resolution I moved at the Regional Conference of the Labour Party but so far we have not had a meeting. I have been unable to make any other progress as I have been busy. I am still enthusiastic and shall do what I can."

Hereford.

Letter from Minister of Health to Mrs. Maughling as follows:-

The points raised by the Assoc. for Improvements in the Maternity Services at the meeting with representatives of the Herefordshire Hospital Management Comm. have been under consideration by the medical, nursing and administrative representatives concerned. The following action has been taken in the points raised in your letter:-

1. Side ward accommodation has been provided for in the G.P. maternity unit and husbands or other suitable relatives can sit with patients during the first stages of labour.
2. The ante-natal clinic at the County Hospital is now held on Wednesday mornings instead of Wednesday afternoon as hitherto. This action has been taken to obviate the difficulties experienced by patients having to return to their homes by 'bus in the early afternoon. Changes have also been made in the appointments system which should result in a reduction in waiting time. Some waiting is inevitable however, having regard to the number attending and the tests and examinations which have to be carried out. Action is also being taken to effect a re-arrangement of available accommodation in the out-patients dept. which should assist the medical and nursing staff in effecting a smooth and steady flow of patients attending the clinic.
3. As regards the separation of the ante-natal clinic from the ordinary out-patients clinics this is still under review as it presents certain difficulties due to the limited accommodation available.
4. Separate facilities have been provided in the G.P. maternity unit for women who have to spend some weeks in hospital prior to labour because of toxæmia or other conditions, and it is hoped that shortly similar facilities will be provided in the Queen Mary Ward.
5. Analgesic machines are already available in the two maternity units, and the Hosp. Management Comm. have now authorised the purchase of two additional gas/air machines.

The Hosp. Management Comm. are anxious to do all they can to co-operate with the Assocn. for Improvements in the Maternity Services as is shown by the steps that have already been taken.

Breckonshire.

Mrs. Smallwood had a letter published about A.I.M.S. in "Family Doctor" for June, and also one in the Guardian. She feels cut-off geographically, short of subscriptions and support from Welsh members.

Norfolk.

Mrs. Gibbs, a Norwich mother, has suggested improvements in Norfolk & Norwich Hosp. after her confinement there six months ago. She has sent her suggestions to the chairman of the Hosp. Management Comm. She is not an A.I.M.S. member.

Cambridge.

Mrs. Cary says that - Members are in favour of voluntary sitters-in during first stage; home confinements whenever desired and possible; sound-proofed delivery rooms; appointments systems and clean dressing gowns at ante-natal clinics; better pay for staff. Their small group has lively discussions.

Herts. and Beds.

Mrs. Rutt writes:- "I hope to prepare a petition to speed the building of the new Hospital & Maternity Unit for Watford. The need for Hospital has been recognised since 1950, and present building only takes 40% of maternity cases. When petition is complete it will be submitted to all local women's organisations for signature and presented to Minister of Health. I had lunch with Hemel Hempstead M.P. Mr. Allason in July. He was interested in A.I.M.S. and has enquired about Midwives' salaries and will try and speed up building of new Hemel Hempstead Hospital. He is also asking

Herts & Beds. contd.

Miss Pitt, Parliamentary Secretary to Ministry of Health to consider my suggestion of research into French and Dutch Maternity methods, i.e. Lamaze-Vellay method and Nursing Assistants. I also accompanied Mrs. Willington to see Lord Balniel. We raised local question of new Welwyn Hospital where maternity unit is to be on top floor. Apparently there was a plan of Hospital displayed to public at Welwyn Garden City - could members please inform me of such local events? Also the Flying Squad for area, will it be based on Welwyn or Watford? The W.Herts Group Hosp. Management Comm. has considered question of Flying Squad for Hemel Hempstead at my request, but thinks it uneconomic as there were only two calls in 4 years. I have pointed out that there may have been more cases but Doctors knew there was little point in calling unreliable service, and also that a large area of Hertfordshire is inadequately covered. They are now going to do some research into the matter. Am investigating possibility of starting a relaxation class based on Lamaze method, as we have several interested mothers. Will be seeing Divisional Nursing Officer and am contacting Natural Childbirth Trust. Anyone else interested? Library has books on childbirth on shelves and willing to have Obstetric List. Have asked Ministry of Health for same. Do R.Os. know of any cases where there has been a refusal to pay the Home Confinement Grant when the mother is taken into hospital in an emergency and then only kept a few days? (This usually means the expenses for a home confinement and for the lying-in period at home are incurred by the mother and to compensate she may have minimum of hospital treatment.). Could R.Os. ask at local Ministry of Pensions & Nat. Insurance whether any such cases are known."

Mrs. Brown caused a stir in the N.Herts. press with her outright criticisms of maternity services. Heated correspondence followed and local interest was aroused. Mrs. Brown has compiled her own questionnaire for mothers. She would like to know if any one hears of a case where analgesics have been withheld at a home confinement. I spoke at a womens group meeting at Hoddesden in June.

Mrs. White of Luton has moved to the west country.

London.

Mrs. Cheskin writes:- "Very little to report. The East Ham Memorial Hosp. Maternity Unit was closed after all. I wrote to the "Stratford Express", our local paper, complaining and asking for support. The letter was published but no one answered my appeal.

Mrs. Groves writes:- "I have recently returned home from having my second child within two years at Queen Charlotte's Maternity Hospital, Hammersmith, London., and I expect you would like to know about the improvements that I found there since my first 'visit'. I must make it clear that at no time have I had any complaint against Queen Charlottes, my main reason for joining A.I.M.S. was the realisation that the treatment I had received at this hospital when my first baby was born was probably exceptional and I had very strong feelings that this should not be so. I was in hospital for five weeks with hypertension awaiting the birth of my second daughter so you will realise that it is no small thing for me to be able to say that during that entire time I did not experience or witness one incident to which I could have taken exception and this although I was 'on duty' as R.O. for A.I.M.S. Subsequent to leaving hospital I wrote to this effect to the sister of the ward and received a very charming reply in which she told me how very pleased they were to receive letters of this kind and that she had passed on my letter to the Chairman of the Hospital Board because she was certain that I had intended it for a 'wider circle'. Now with regard to positive improvements -

1. The ante-natal clinic has recently introduced staggered appointments every fifteen minutes instead of 'block bookings' where everyone was supposed to be present at the time the clinic was due to start. I cannot say from experience whether or not this cuts down the waiting.
2. When my elder daughter was born my husband visited me in the labour ward only during official visiting hours 7-8 p.m. I was in labour 55 hours and recall it as a time of great loneliness and tedium. This time however my husband came to the hospital as soon as home commitments would permit, was admitted without preamble to the labour ward and remained with me until I requested him to leave. Permission for husbands to be present in the delivery room must be obtained beforehand from the doctor in charge of the case.
3. During my stay in hospital the entire routine of the ward was rearranged following the criticisms revealed in such reports as 'The Pattern of the In-Patients Day' with the result that conditions became a little less like a rat-race both for patients and nurses. In the Ante-Natal Ward we were woken at 7 a.m. instead of 5.15 a.m. (unfortunately this involved the sacrifice of early morning tea for antenatals because it was made at 5.30 a.m. for everyone else).

London contd.

Temperatures were taken once a day instead of three times, blood pressures twice instead of three times, beds were made only once a day (twice before) and all restriction was removed from the times at which baths could be taken. In the old regime thirty women had to use 2 bathrooms mainly before the 10 a.m. feed!

4. There is now a vastly improved system for obtaining and disposing of sanitary towels. The hospital obtain from a central agency towels which are individually wrapped and sealed into a paper bag, the patient helps herself to one of these, also collects at the same time a sealed bag containing four cotton wool swabs. The soiled towel is replaced in the same bag that carried the clean towel and is dropped into a bin, the soiled swabs are flushed into the toilet.
5. During my stay this time, three new extremely comfortable armchairs were installed in each ward for the use of patients who were ambulatory. The ward sister told me that she was agitating for one ward on each floor to be converted into a sitting room for patients but that it was being resisted by the consultants because they were reluctant to forfeit the beds (6 beds per ward).

I need not say that the medical care I received was first class but I would like to emphasise that everyone was exceptionally kind and considerate.

Mrs. J. Hinton of 17 Laurel Way, Totteridge, London, N.20 is a new Regional Organiser.

Mrs. Rhodes of S.E.19 writes:- "Regular meetings of members have been held. Members are rather scattered and are under several Hospital Management Committees. We have visited two local hospitals and been shown round and hope to visit two more before the end of the month. Have offered ideas for improvements to them. I now have some very enthusiastic and helpful members.

Surrey.

Reigate..... Mrs. Taylerson and Mrs. Hulme have just taken over for this area and are going to organise a meeting after the holiday periods are over. Mrs. Hulme wondered whether members would be interested in her compiling a directory of good practising midwives who are willing to do private midwifery. She would be grateful for recommendations from mothers, stating name, address and qualifications of midwife, also what she was willing to do, salary, etc. This to be forwarded to Mrs. Hulme, The Mill Cottage, Wray Common, Reigate, Surrey. She would supply on request any names and addresses that she has collected. Obviously she cannot act as a booking agency.

Mrs. Campbell writes:- "In some correspondence with Miss Wood, Secretary of the Royal College of Midwives about part-time training of midwives, she mentions the large wastage when many leave to raise their families. She said "It would help if our Association could find out from any married midwives we know whether they ever intend returning to midwifery and then let the College know for their records. If any do intend returning, perhaps we could assist them to take the weeks refresher course". It appears that it will take six months for Purley Hosp. to decide whether to accept or reject our lay-sitting scheme! It has been before four committees to date and the authorities have sent out 93 cards asking mothers-to-be booked at the hospital whether they will require a sitter and if they have any other views or comments. We presume the decision will be made accordingly when the results of enquiry are known, this should be during September." (Result: 55 would like lay-sitter; 19 would not like lay-sitter (though 6 of these would like their husbands to be present); 19 did not reply). Mrs. Campbell has had a small "What A.I.M.S. is About" card printed as a local "hand-out". She is organising the printing and distribution of Christmas cards to raise money for A.I.M.S.

Lt. Col. W.J. Fletcher has been working on his "space-suit" at Kingston Hospital. Helped by Mrs. J. Taylor of Hampton and local members he is to hold a public meeting soon in order to form an A.I.M.S. Group in Kingston.

Kent.

Mrs. Bennell of Otford, Nr. Sevenoaks writes:- "This is a newly formed group with only a few members. A district subscription of 2/6d. is being collected. We have given our support to a Women's Sevenoaks Maternity Home (promised for 1962/3) and hope to meet the chairman. We shall hold a coffee morning after the school holidays to attract more members. We have visited two maternity hospitals - at one we were welcomed with cups of tea and at the other we were received with obvious suspicion.

Kent contd.

Mrs. Griggs, S.R.N., writes:- "As a result of my meeting with the Secretary of S.E. Kent Hosp. Management Board and the Matron of Willesbrough Hospital there are now comfortable armchairs for the mothers to sit in and I have heard that there is a far nicer attitude exhibited in the Maternity Wing. Also questionnaires were given to patients for 3 mths. I have had a letter printed in the Family Doctor, and one in the August issue of "Midwives Chronicle", also had an article on A.I.M.S. printed in the Annual Magazine of the Ashford Hospital."

Hampshire.

Mrs. Wolfe writes:- "Our campaign in Hampshire has up to now been directed against the appalling conditions and general lack of humanity existing in the maternity department of St. Mary's Hosp., Portsmouth. Last January (mentioned in the previous Newsletter) Mrs. Gill from Petersfield accompanied by Col. Fletcher met some members of St. Mary's Hosp. Management Comm., as a result of her letter of complaint after her confinement. This letter was discussed in detail and the Management Comm., while acknowledging that the unit was very understaffed and the physical conditions there were poor, stated that they were not responsible for the mothers emotional state, and considerate treatment could only be expected by private patients. Tempers became very heated, and no good came out of the meeting. Several more letters were exchanged. When "Human Relations in Obstetrics" was published, I rang up the local papers, and the Portsmouth Evening News published an article about A.I.M.S. on the Womans Page. We were also mentioned in the Southampton paper. This publicity started off a stream of letters to the Portsmouth paper, supporting and condemning St. Mary's Hosp. The Editor of the local Petersfield paper turned out to be an enthusiastic supporter of A.I.M.S. and printed an enormous front page article about Mrs. Gill and her description of conditions in St. Mary's. Two other local papers did the same, we had a mention in the Daily Express and the Daily Mail featured "Maternity Hospital like Army". Many more readers letters were published and the hospital was forced into holding an enquiry. Members of A.I.M.S. then sent a petition to the hospital, containing a list of suggested improvements. Another enquiry was held, and the whole matter placed before the Wessex Regional Board. Meanwhile, many mothers had written directly to Mrs. Gill and myself giving heartrending accounts of their own experiences in St. Mary's. These letters were sent in confidence to the Regional Board, to give them some idea of the patients point of view. The Wessex Regional Board is directly responsible to the Minister of Health, so I then wrote to four M.P.s. in Portsmouth and Mrs. Gill wrote to her M.P. in Petersfield, to ask for their help. One Portsmouth M.P. was sympathetic and invited me to meet him, and Miss Quennell of Petersfield took up the matter immediately and is at present writing to Miss Edith Pitt, the Parliamentary Secretary to the Minister of Health. (This letter was recently published in "Times", "Telegraph", etc.). The latest news is that fathers are now admitted during the first stage of labour, there are earphones installed in the Rest Ward, and strictly unofficially many of our suggestions have been accepted by the Ministry. Also we are to have a new maternity hospital in Portsmouth." Mrs. Wolfe spoke in a B.B.C. West of England discussion on 22nd June. Mrs. Gill recently appeared on T.V. Mrs. Wolfe would like to see an A.I.M.S. representative on a maternity committee for St. Mary's Hosp. and a questionnaire for mothers confined there in future.

Somerset.

Mrs. Richman and Mrs. Foster report:- One local midwife has been reported for callous treatment of two mothers here in Keynsham. At the moment we are keener on help for mothers before and after the babies have been born, and wish eventually to see formed a free domestic help service on which mothers could call for immediate aid. At present home helps work from 9 am-5 pm only, 3/9d. per hr., and no week end or early morning and late evening help is offered. No sympathy is shown to the mother who copes alone with a 16-17 hr day and a disturbed night for weeks on end; health visitors (usually unmarried) merely pay time-wasting visits and advise one to "leave the house-work....". Doctors advise afternoon rests for pregnant mothers to prevent leg swelling and raised blood pressure. How can one do this when active toddlers work their mischief down below, unattended!!!!!!

Cornwall.

Mrs. Cook and members of her committee have again visited Cornwall's only maternity hosp. at Redruth. This time they were shown the 'extension' where mother's amenities are sparse and the moss is coming through a crack in the sterilising room's floor. It was noted that there are no incubators for premature babies in Cornwall. An incubator costs £255 or may be hired (from Exeter). (Ambulance model is £110). Mrs. Cook is expecting her fourth child (and she is not at all well) and has asked her midwife about the possibility of having Trilene at the birth. A Trilene machine costs £32. Is there no money to equip Cornwall with modern maternity aids? The Cornish Group are to hold an Xmas Draw to raise funds for A.I.M.S.

NOTES.Christmas Cards.

If you would like Christmas Cards which are being sold to raise funds for A.I.M.S. please contact Mrs. P. Campbell, 16 Woodside Road, Purley, Surrey. (Uplands 5016) without delay. Cost: 5d. each including envelope.

Organisation of A.I.M.S.

Mrs. Garside, Dr. Fox-Russell and myself went with the solicitor to take Counsel's advice. The alternative suggestions for the method of running A.I.M.S. (Charitable Trust, Limited Company, Trust, etc.) were put to Counsel (a charming elderly woman) and the solicitor's report of the meeting is as follows:-

1. Counsel was asked to consider the best way of putting A.I.M.S. on a formal basis, having regard to its existing organisation and having regard to its financial resources.
2. Counsel advised that not all the aims and objects of the Association would be held to be charitable. It would not therefore be possible, even if it were desirable, to create a charitable trust to be registered under the Charities Act 1960 without severely limiting the activities of the Association.
3. Having regard to the fact that numerous Groups were already active throughout the country, some with constitutions of their own, Counsel considered that the Groups should be autonomous but affiliated to the Association, whose affairs would then be conducted by a small executive committee who would be responsible to the Annual Meeting of the Association for the production of properly audited accounts.
4. If it were desired at a later date the Association at a General Meeting could decide to create a charitable Trust for certain specific purposes and to appoint trustees. This would leave the Association free to carry out its wider aims through its affiliated Groups while the charitable trust would attract tax free donations for those specific purposes.
5. This form of constitution is inexpensive to set up and comparatively simple and inexpensive to administer without a lot of additional staff. If the resources and commitments of the Association justify it, it can always at a later stage be incorporated into a Company limited by guarantee.

Next Meeting.

It is hoped that a London meeting can be held on Saturday 18th November 1961 at the Norfolk Hotel, South Kensington. This date will be confirmed in a note to R.Os. in October.

Information Please.

Please can accurate information be obtained for the "Information Please" questionnaire. I have too many forms which are incomplete.

Mother & Baby Exhibition.

Some London Area members attended the lectures and films at the Mother & Baby Exhbtn. at Caxton Hall, London, on 12th July. Organised by the National Baby Welfare Council the exhibition was disappointing.

After the last Newsletter.

Apology. The Branch Librarian at Chesham writes:- "With regard to the books on childbirth, when I was appointed to Chesham in January these were kept behind the scenes, but they have been on the open shelves for several months now, and I agree with you that it is a very great mistake to keep this sort of thing locked away. The County Librarian does not agree with this sort of censorship and I think you will find books on childbirth on the open shelves at all the County branch libraries in Buckinghamshire."