MATERNITY AND CHILD WELFARE CENTRES IN THE ALDERSHOT COMMAND.

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At a prize meeting held in 1930 by the National Council for Maternity and Child Welfare, the National Mothercraft Shield and the Rhonda Challenge Shield for England and Wales were both awarded to a Military Centre in the Aldershot Command.

As this was the first occasion, since these competitions were started in 1913, that one Centre had obtained both these awards, the matter aroused some interest. When it became known that this Centre had also gained, on two consecutive years, the Aldershot Command Duncan Welfare Challenge Shield, and that it was the first Military Centre to compete for the National Council's awards, many questions were asked as to the origin and administration of these Military Centres.

To understand the origin of Military Welfare Centres, it is necessary to review the early history of the welfare movement in civilian life, particulars of which are to be found in the Local Government Board and Ministry of Health Annual and Special Reports. An admirable summary of this history was written by Dr. J. E. Lane-Claypon in 1920, of which the following is an epitome:

During the latter part of the Victorian era, public attention was drawn to the relation between the vitality of a nation and the rate of increase of its child population. This increase depends on the excess of births over deaths. In countries such as France, with a practically stationary population, the effect was felt on the numbers available for the conscript army. In other countries where there was still a large excess of births over deaths, this excess was decreasing rapidly from year to year. This decrease chiefly affected the better educated classes, whilst the number of children born to the improvident tended to grow.

Economical considerations rendered large families inadvisable, so methods were sought to preserve the lives of the newly-born. The means adopted varied with localities; a number of enthusiastic ladies in different parts of the country banded themselves together to form committees with this object in view. In some towns they concentrated on home visitation, in others they organized depots for the supply of milk and artificial foods for infants. Some localities established infant consultations, others gave instruction to the mothers in infantile hygiene. In many places the work of these different committees overlapped, and the absence of professional guidance led to inadequate results.

The need for professional assistance at infant consultations and schools for mothers became apparent, as well as the need for paid health visitors. The inevitable result was increased expense.
Maternity and Child Welfare in Aldershot Command

For a time milk and artificial food depots, organized by untrained helpers, were a popular form of activity, but they gradually fell into disuse. Experience showed that they tended to reduce breast-feeding, and that the results obtained in many instances were out of proportion to the expenses incurred.

A few of these voluntary associations closed down for want of funds, but more survived. These were reorganized and worked in co-ordination with the local health authorities; they formed the nucleus of what is known to-day as the Welfare Centre, with its numerous forms of activity in every branch of maternity and infant welfare work. Lay helpers became responsible for the provision of clothing and the social activities of the Welfare Centre, whilst the nurses and trained health visitors were freed for professional work. As regards control, this varied with localities, and depended on the source of the money by which the centre was maintained. Many of the smaller centres are still controlled by voluntary associations who work in co-operation with the health authorities and receive grants-in-aid from the public purse.

The larger centres are worked by committees, which are appointed to act on behalf of the local health authority concerned. Medical supervision is provided, either by local medical practitioners, or by members of the School Medical Service, paid from county or municipal funds. Half the expenses incurred are usually met by Treasury grants, whilst advice and inspection of all State-aided centres is provided by the Ministry of Health.

Military Welfare Centres.

From time immemorial it has been the custom of the Services for an officer to look after the welfare of his men and those dependent on them. Visiting of soldiers' families is usually undertaken by the officer's wife, and material help is given as required from military charitable funds. The Soldiers' and Sailors' Families Association was founded in 1885 to co-ordinate this work. In 1892 a nursing branch was instituted, and in 1894 two district military nurses were appointed to the Aldershot Command. These were maintained by the Families Association; their duties were to attend the wives and children of soldiers on and off the strength, to visit these in their homes and to give advice on matters of health and hygiene. A ladies' local committee was formed in the Aldershot Division to supervise all details connected with their work, under the direction of H.R.H. Duchess of Connaught, President of the Aldershot branch of the Soldiers' and Sailors' Families Association.

The next development of the movement in the Aldershot Command took place during 1899, at the commencement of the South African War, when a number of soldiers' families remained in barracks after the departure of the troops. The need for the formation of a home, where children could be received in the event of their mothers falling ill, led to the foundation of a crèche in an officers' disused quarter on Middle Hill. This was gradually
improved and extended, and an isolation block for the reception of children on admission was constructed in 1911.

Her Majesty the Queen has taken a special interest in this crèche, and authorized it to be called Queen Mary’s Home.

Education in elementary hygiene was the next step. In 1912 classes were organized by Mrs. Guise-Moores, and instruction was given in home nursing and first aid; invalid cooking was also taught by the Serjeant Master Cook at the Connaught Hospital. These classes subsequently expanded and were held at Government House, and later in a hall in Farnborough, where weekly demonstrations were given. During the war these activities were carried on by our civilian colleagues.

In 1919 the need for co-ordination in these activities became apparent; Mrs. Guise-Moores and Brevet Lieutenant-Colonel F. D. G. Howell, R.A.M.C., visited the St. Pancras Welfare Centre and organized one on similar lines in the Stanhope Lines. From the commencement this was a success and, with the active support of Lady Rawlinson, similar welfare centres were opened at Bordon and in other parts of the Aldershot Command.

The Aldershot Division of the Soldiers' and Sailors' and Airmen’s Families Association was reorganized and its present constitution evolved gradually. In 1920-21, quarters in barracks were provided for Soldiers’, Sailors’ and Airmen’s Families Association Nurses in Wellington, Stanhope, and Marlborough Lines, as well as at Bordon, Ewshott and Blackdown; in 1925 a similar centre and nurses’ quarters were provided at Longmoor.

Maternity and Ante-Natal Work.

Since the opening of the Louise Margaret Hospital, wives of soldiers on the married strength have been admitted for their confinement, whilst those off the strength are taken in as accommodation permits.

Pre-natal clinics were first instituted in connection with such cases by Major E. C. Moss in 1923. Cases which cannot be admitted to the Louise Margaret Hospital are dealt with under the County Maternity Scheme; they are attended in their confinement by district midwives, and medical aid when required is provided from an insurance fund.

At Bordon a special midwife was provided for attendance on military maternity cases in their homes in that district in 1915, and this arrangement has been carried on up to date.

Other Forms of Activities.

The usual informal talks and lectures on mothercraft are given in all our Military Centres, a special feature of which is the care of children when proceeding abroad. From time to time special demonstrations are given, films are shown, and various speakers obtained from welfare headquarters. Classes are held for cutting out and making clothes, model garments are
provided and sold at cost price. Milk and infant food are also issued from the centres at wholesale price, when ordered by the medical officer.

**Curative Work.**

The medical officer in charge of the Welfare Centre is responsible for care of the wives and families, and obtains for them specialist's advice if required. Liaison is maintained by him with civil institutions, and special modes of treatment are arranged by him in cases of necessity.

A Baby Week was held at Longmoor Camp in 1930 and was attended by representatives of welfare centres from many parts of the county.

**Constitution and Financial Control.**

The sole financial assistance Military Centres receive from the Treasury is an initial grant of £6 and an annual grant of the same amount. These grants are ear-marked for the purchase of crockery, wall charts and diagrams at the discretion of the medical officer, and cannot be used for other purposes. In addition to this, material assistance is given by the Army Council in permitting its medical and engineer officers to assist the Welfare Committee in a professional capacity and in granting leasehold rights on welfare buildings erected on War Department land. These buildings are built and maintained by the Aldershot Command Trust, of which the official custodian is the United Service Trustee.

The Centres are administered by the Aldershot Division of the Soldiers', Sailor's and Airmen's Families Association, by whom the nurses are appointed, although they are maintained by the Trust. The General Committee of the Division is under the presidency of the wife of the G.O.C., Aldershot Command. There are five area committees, two of which have as vice-presidents the wives of the Divisional Generals, two the wives of Brigade Commanders, and one the wife of the D.D.M.S. of the Command. The members are wives of representative Officers Commanding Units in each area.

A separate Nursing Committee, under the presidency of the head of the General Committee, has been formed, on which is a representative lady from each of the districts in which a Soldiers', Sailors' and Airmen's Families Association nurse is employed. The vice-president of each area committee nominates a lady-in-charge of welfare work in each district, to co-operate with the medical officer, and to direct the nurse's work. The nurse is directly responsible to her for all except purely nursing duties.

The constitution has many advantages. The president and members of the committee have no official status and are thus free from Government interference in their work. At the same time, as wives of heads of military units, they are in direct touch with official opinion, and can easily obtain assistance and advice. On joining these committees, they may or may not have had any previous acquaintance with welfare work. Their
interest and knowledge may date from the time that their husbands obtained higher rank. In practice, however, this is exceptional. The lady-in-charge of the welfare work co-operates in all matters with the medical officer concerned and makes known his views at the meetings of committee. In this way indiscriminate issue of artificial food and unsuitable modes of relief are avoided.

THE FUTURE.

In my opinion the future of the military welfare movement will depend on the continuance of the happy relations and co-operation which have up to now existed between area committees and the Army Medical Staff. Each must respect the autonomy and the province of the other and neither encroach on the other’s sphere of action or initiative. Co-operation is required to maintain efficiency and to secure co-ordination in all practical arrangements, and thus only will the interest of the mother and child be served. As regards further development, efficiency and economy have been secured by affiliation between our Military Centres and the Constituent Societies of the National Council for Maternity and Child Welfare. Further activities, however much needed, mean recurring expense, and this would have to be financed by the Aldershot Trust. In case of mobilization the principal sources of the income will be cut off, so great economy is needed in times of peace, to enable essential services to be carried out in the event of an outbreak of war.

ACKNOWLEDGMENT.

It is impossible in the space at my disposal to mention the names of any but a few of the ladies and officers to whose zeal, tact and energy the success of the Aldershot Military Welfare Movement is due. I can recall Lady Haig, Lady Rawlinson, Lady Duncan, Lady Guise-Moores, Lady Strickland, and more recently, Mrs. Lister, whilst amongst the officers there were Lieutenant-Colonel Howell, Colonel Easton, Lieutenant-Colonel Davy and Lieutenant-Colonel Moss, Major-General Harding-Newman and Major-General Guise-Moores. I owe thanks to Major Sharp, Hon. Secretary of the Aldershot Trust, and to the Secretary of the Soldiers’ and Airmen’s Families Association for information, and also to the D.D.M.S., Aldershot Command, for permission to publish this article. I am indebted to the librarian of the British Medical Association for looking up references.

REFERENCES.