Course Title: History of Midwifery
Credits: 3.0

Course Description: A broad exploration of the history, culture and politics of midwifery in the United States throughout the 19th and 20th centuries. In this course, students look at the changes that took place in early medicine and dominant American culture that created a severe decline in midwifery care and the subsequent effects on childbearing women. Special attention to political topics such as the rise of obstetrics and decline of midwives, issues of licensing and education, medicalization of childbirth, the natural childbirth movement, and the rise of homebirth midwifery help students understand the world they are preparing to practice in today.

Learning Activities:

A. Student reads appropriate sections from the Learning Materials/Resources.

B. Student answers the questions listed in the Learning Objectives by researching the Learning Materials/Resources for the course and correctly cites the sources and page numbers for each of their answers.

C. Student presents answers the questions listed in the Learning Objectives for review by preceptor.

D. Student participates in preceptor elaboration/discussion of Learning Objectives.

E. In the case that the required texts are more than 5 years old, the student must research, prepare & present a summary of current best midwifery care/practices appropriate to a topic covered in this course from a current journal article/study, less than 5 years old.

Learning Materials / Resources:
Please use textbooks less than 5 years old or most recent edition.


11. Additional Optional Resources for Students of History of Midwifery

Resources for all Courses:
MEAC Abbreviated NARM Skills Form:

MEAC Essential Competencies:

Midwives Model of Care®: http://cfmidwifery.org/mmoc/brochures.aspx

Students must find 1 article/study less than 5 years old. Recommended internet links as needed for latest developments in midwifery care:
https://www.midwiferycollege.edu/resources-national-college-of-midwi

Evaluation Tools / Methods:
Minimum passing grade for each course is a cumulative 80% / B-. Students and preceptors are encouraged to work together until the student masters the information.

Final grade for the course is based on preceptor evaluation of the following:

A. Learning Objectives count for 50% of the final grade.
The preceptor evaluates each answer based on three elements:

1. Answers should reflect a thorough review of current literature regarding best current practices in midwifery care.
2. Each answer should be formed in the student’s own words or paraphrased from the text. The answer should be minimal, not a re-write of the entire text, but enough to show appropriate comprehension of the learning objective.

3. Student identification of sources and page numbers for each of the Learning Objectives. (Preceptor should do a random check to determine that sources cited are correctly identified.)

B. Enrichment Activities, including research essays and summaries of articles: 20%
C. Discussions: 15%
D. Tests and Exams: 15%

Course credit:
One Academic credit equals approximately 15 hours of formal time plus 30 hours of additional study or homework. Formal time is defined as the amount of time taken to answer the Learning Objectives to the level of 80% and to complete any learning activities to the preceptor’s satisfaction, including any time spent face to face with the preceptor. Informal time includes any time spent actively reading relevant sources and textbook/s, researching Learning Objectives, and studying for examinations.

Learning Objectives:
A. The student must research, prepare & present a summary of an aspect of current best midwifery care/practices appropriate a topic from this course from a current journal article/study.

B. Student answers the questions below and cites the sources and page numbers.

1. Describe the "usual" care provided during pregnancy and childbirth in colonial America for the first 150 years following English settlement.

2. Cite where and when licensing was first required for midwives and why.

3. Name some of the earliest manuals for midwives; why were these written by men and what kind of information did they contain?

4. Describe the affect of sanitation and nutrition on maternal and infant mortality from colonial times to the present and give your rationale.

5. Describe what happened after 1750 to midwifery and why.

6. Discuss the story of the invention and use of forceps and how this affected midwifery.

7. Describe the fundamental difference between European and American development of the midwife.

8. Discuss why it was difficult for women to obtain medical training in the 1800s.
9. Explain why women began to choose male attendants for childbirth.

10. Explain why more women than ever died in the mid-19th century after delivery.

11. Discuss how the work of Semmelweis contributed to the knowledge of why mothers become infected following birth.

12. Explain the part that Holmes played in reducing the spread of puerperal fever.

13. Describe Louis Pasteur's contribution in 1860 to our understanding of the spread of disease.

14. Describe Lister's contribution to the reduction in the spread of disease.

15. Discuss what cultural fashions increase the pain of childbirth and why.

16. Describe the introduction of anesthesia in childbirth.

17. Explain what is meant by meddlesome midwifery.

18. Describe the development of the lying-in hospital in the 19th century. How did this change in the early 20th century?

19. Explain how the practice of "once a Cesarean always a Cesarean" came about.

20. Discuss how the recognition that gonococcal infections in the mother could cause blindness in the baby affected the increasing use of physicians at normal birth.

21. Discuss when routine interventions for every labor and delivery in order to "prevent trouble" become fashionable and why.

22. Describe how Williams affected the development of medical schools.

23. Discuss how the advent of contraception and bottle-feeding affected attitudes toward bearing and rearing children at the beginning of the 20th century.

24. Explain why pain in childbirth played such a large part in moving delivery from the home to the hospital in the early 1900's.

25. Discuss the role of scopolamine in the early 1900's in pain relief.

26. Discuss why childbirth was recognized as "the women's battleground" after the First World War.

27. Discuss the purpose and significance of the Sheppard-Towner Act.

28. Describe the perception of home vs. hospital in terms of germs in the 1920's.
29. Discuss how the scarcity of domestic servants after World War I affected childbearing practices.

30. Discuss when the American Board of Obstetrics and Gynecology was established and explain its primary purposes.

31. Discuss the conclusions of the study entitled "Maternal Mortality in New York City" and the impact this study had on the hospitalization of birth.

32. Discuss the impact of the report entitled "Fetal, Newborn and Maternal Mortality and Morbidity" on the hospitalization of childbirth.

33. Explain what caused the drop in mortality rates between 1946 and 1955.

34. Discuss when the awareness that hospitalization was not ideal for all births emerged and why.

35. Discuss what was meant by "natural childbirth."

36. Describe the reasons for dissatisfaction with hospital birth and heavy anesthesia that began in the late 1930's.

37. Discuss the components of Grantly Dick Read's method and the rationale for each.

38. Describe what the Lamaze Method, what the components are, and their rationale.

39. Explain how and why the federal government got involved in maternity care and what the significance is of their involvement.

40. Discuss why the AMA opposed the Sheppard-Towner Act and what affect this had.

41. Discuss why women in the early 1900's utilized midwives.

42. Discuss the "midwife problem" in the early 1900s.

43. Explain why it was a not a question of whether midwives should disappear but how rapidly.

44. Name the most vociferous opponents of midwives and why.

45. Discuss why midwives weren't upgraded into professional status in the U.S. the way they were in England.

46. Describe the emergence of the Nurse Midwife and of the Maternity Center Association of New York.
47. Describe the emergence and the service offered by the Frontier Nursing Service of Hayden, Kentucky.

48. Discuss how the repeal of the Sheppard-Towner Act affected midwives.

49. Discuss the difference between the balance of physicians and midwives in the United States and physicians and midwives in most other advanced countries.

50. Explain how the utilization of federal and state funding for maternal and child health affects the utilization of midwives.

For the following questions please refer to Chapter 1 ACNM and MANA: Divergent Histories and Convergent Trends in the book Mainstreaming Midwives.

51. Discuss the view expressed by a Canadian midwife about the conflict between MANA and ACNM about creating a single path to direct-entry midwifery.

52. How has American midwifery served as a “Cautionary Tale” for midwives elsewhere?

53. How does Davis-Floyd state that physician resistance was responsible for the eradication of midwifery from the US health care system?

54. Discuss how the lack of professional organization contributed to the exclusion of midwifery from the US health care system.

55. Discuss how cultural influences on women’s choices contributed to the exclusion of midwifery from the US health care system.

56. Discuss the changes in nurse-midwifery practice the occurred as more nurse-midwives began to practice in the hospital.

57. Discuss the loss of autonomy suffered by nurse-midwives as they began to practice under hospital authority.

58. Discuss the professional organizing done by nurse-midwives to establish standards of both education and practice.

59. Discuss the movements that gave rise to “lay” midwifery in the 60s and 70s.

60. Discuss some of the events that cause nurse-midwives to attempt to distance themselves from the rising popularity of “lay” midwifery practice.

61. What cultural picture was associated with “lay” midwives that was not associated with nurse-midwifery?

62. What was the difference in the type of movement behind “lay” midwifery versus nurse-midwifery?
63. Discuss the acknowledgement of the existence of nurse-midwifery by lay midwives.

64. Discuss the differentiation between types of midwifery in the US versus Canada.

65. Discuss how the initial idea to organize MANA came about.

66. Discuss the “missed” opportunity to form a unified professional midwives organization that occurred in the early ‘80s.

67. Discuss the overlap between the ACNM and MANA since the inception of MANA.

68. What movement continued to fuel MANA despite its relatively small numbers of midwives?

69. Discuss the philosophical divide between the ACNM and MANA that was cemented during the years of the IWG working group.

70. Discuss the value of apprenticeship perceived by MANA members.

71. Discuss the ACNMs conflicting views about education for midwives.

72. Discuss how the Carnegie dialogues ended.

73. Discuss the way that Canadian midwives created a “middle of the road” educational path to midwifery.

74. Discuss the clinical training location of CNMs versus CPMs (DEM).

75. Describe MANA’s trend toward formal direct-entry education in the late 90s and 2000s.

76. Discuss the significance of the Midwifery Education Accreditation Council in this trend.

77. Discuss the changes to the CNM education path that have occurred in a similar time period.

78. Discuss the convergent nature of the trends in both direct-entry and nurse-midwives.

79. Discuss the adoption of the term “direct-entry” in favor of “lay” midwives.

80. Discuss the development of the Certified Professional Midwife (CPM) credential.

81. What is the major criticism of the CPM credential posed by nurse-midwives?

82. Discuss the creation of the portfolio evaluation process (PEP).

83. Discuss the requirements for taking the exam to become a CNM.

84. Discuss the development of a direct-entry midwifery path by the ACNM.
85. What are the primary reasons the ACNM is motivated to develop a direct-entry path?

86. Discuss the acceptance of the Certified Midwife (CM) credential on a national level.

87. Discuss the reaction of many MANA members to the development of the CM credential.

88. Discuss the event between the Seattle Midwifery School and the ACNM’s division of accreditation that was aimed at converging the interests of both midwife groups.

89. Discuss the membership numbers of the ACNM and MANA respectively.

90. Discuss the use of interventive birth technology by DEMs and CNMs.

91. Discuss the formation of the Bridge Club.

92. Discuss the formation of the NACPM (National Association of Certified Professional Midwives).

93. Discuss the ways that MANA and the ACNM have worked together in recent years for the advancement of midwifery.

Please use web resources to answer the following questions:

94. Define Certified Nurse Midwife.

95. Define Direct-Entry Midwife.

96. Discuss how the midwife’s training and certification affect her ability to practice.

97. Discuss how the relationship between direct-entry and nurse-midwives affects the utilization of midwives.

98. Discuss the international definition of midwifery.

99. Discuss the concept of the Midwives Model of Care.

100. Discuss the incorporation of the American College of Nurse Midwives and its purpose. Include the date of incorporation.

101. Discuss the incorporation of the Midwives’ Alliance of North America and its purpose. Include the date of incorporation.

102. Discuss when the registration of births became mandatory in the USA and how this affected the practice of midwifery.
103. Discuss the contribution of the Lobenstein Midwifery Clinic to the practice of midwifery and to maternal child health.

104. Discuss when the concept of family-centered maternity care became articulated; by whom and what the rationale was for each of its tenets.

105. Describe the purpose of the North American Registry of Midwives (NARM) and give the date it was incorporated.

106. Describe the purpose of the Midwifery Education Accreditation Council (MEAC) and give the date it was incorporated.

107. Describe the purpose of Citizens for Midwifery (CFM) and give the date it was incorporated.

108. Describe the purpose of the Coalition for the Improvement of Maternity Care (CIMS) and give the date it was incorporated.

109. Describe the purpose of the Foundation for the Advancement of Midwifery and give the date it was incorporated.

110. Describe the contribution of Ina May Gaskin to midwifery.

111. Describe the contribution of Raven Lang to midwifery.

112. Describe the contribution of Tonya Brooks to midwifery.

113. Describe the contribution of Carla Hartley to midwifery.

114. Describe the contribution of Elizabeth Davis to midwifery.

115. Describe the contribution of Shari Daniels to midwifery.

116. Describe the contribution of David Stewart to midwifery.

117. Describe the contribution of LeBoyer to midwifery.

118. Describe the contribution of Michel Odent to midwifery.

119. Describe the contribution of Helen Varney Burst to midwifery.

120. Describe the contribution of Margaret Myles to midwifery.

121. Describe the contributions of Jesucita Aragon to midwifery.

122. Describe the contributions of Gladys Milton to midwifery.
For the following questions please refer to the Chapter 1 “Western Science and Folk Medicine: White Men’s Forceps and Black Women’s Forces” from Granny Midwives and Black Women Writers.

123. Discuss the author’s statement about how midwifery has been reclaimed by Anglo women but that African American women’s midwifery has been left out of this reclamation.

124. Discuss the statements about women’s capacity to learn and develop intellect held by many doctors in the mid-late 1800s.

125. Discuss how poor outcomes in midwife-attended births were associated with the devil.

126. Discuss some of the contributors to the decline of midwifery stated by the author in this chapter.

127. Discuss why medical “advancements” were not accessible or useful to Black midwives in the south.

128. Discuss how upper-class women were a part in creating the institutionalization of birth.

129. Discuss what the author says about birth as communal event among women.

130. Discuss how the Sheppard-Towner Act negatively impacted Black midwives in rural areas of the south.

131. How have Black midwives been further left out of the second-wave of midwifery reclamation?

132. Who are some of the individuals who have actively sought to continue Black women’s midwifery traditions?

133. Discuss the historical differences between the treatment of midwives in West African societies and in European countries.

134. Discuss how midwifery tradition came to the US with enslaved African women.

135. Discuss the value of Black midwives in the slave trade.

136. Discuss the symbolism the author uses to talk about the hands of Black midwives.

137. Discuss campaigns used against midwives and the topic of cleanliness.
138. Discuss the further degradation of Black midwives that took place in addition to that which was directed to immigrant midwives.

139. Discuss how bodily stereotypes were used to devalue Black midwives.

140. Discuss the purpose of the “lessons for midwives” manuals.

141. Discuss how stigma regarding cleanliness fed stigma of incompetence for Black midwives.

142. Discuss how age played a role in the early 1900s when the County Health Boards wanted to regulate Granny midwives.

143. Discuss the positive relationships between some midwives and their back-up doctors.

144. Discuss the racial segregation that occurred as hospital birth with anesthesia began to become more available.

145. Discuss the significance of the birth bag as midwifery became more regulated.

146. Discuss what additional items midwives might put in their bags as a way of preserving their practices.

147. Discuss transportation for Black midwives during a time where very few had access to a transportation animal or car.

148. Discuss the success of the campaign against granny midwives.

149. Discuss the literary example given at the end of this chapter, how does the author use it to address the perceptions of and practices used by granny midwives?