



## INFANT WELFARE.



AN ADDRESS DELIVERED ON THE 2ND OF  
MARCH, 1924.

AT THE WILBERFORCE MEMORIAL  
HALL.

FREETOWN, SIERRA LEONE.

— BY —

ERNEST JENNER WRIGHT, ESQ., M.B.E.S.  
(ENGLAND) L.D.S.P. (LONDON) D.T.M. (LIVERPOOL)

— ON THE OCCASION OF —

THE FOURTEENTH ANNIVERSARY

— OF THE —

SIERRA LEONE WOMEN'S  
PROGRESSIVE UNION.

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ERNEST J. WRIGHT ESQ. M.B.E.S. ENGLAND (LOND.),  
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SIERRA LEONE WOMEN'S PRO-  
GRESSIVE UNION,

Ladies and Gentlemen,

I have been invited by the Women's Progressive Union on this the occasion of their fourteenth Anniversary to give an address on Infant Welfare.

It gives me great pleasure to have such an opportunity as this to express a few views on this important subject.

Infant Welfare deals with the methods of saving and preserving infant life, and when it is remembered that every child born may be an asset to the community it will be realised how much it is our duty to attend to the welfare of our children.

If the child is carefully attended throughout infancy and childhood there is no reason why it should not become a useful and valuable citizen, but, if not given this attention it is liable to become an expense and burden to the community.

We are at present faced with the problem of how to save our children from early death.

Before making any suggestions I will attempt to give you a rough sketch of how the work of reducing infant mortality was started in England.

Many years ago it was noticed that the infant death

rate was not being reduced as was the general death rate, and, it was further determined after close observation that the cause of this continued high infant death rate was the parents' ignorance of matters of vital importance to the child.

This resulted in the first step in Infant Welfare work being taken and this consisted in house to house visitation, teaching the mothers the ordinary rules of health and the requirements of the baby.

This proved successful so the second step was taken and this consisted in the establishment of Infant Welfare Centres which are primarily schools for mothers where they are taught and given advice in the care of infants and little children.

The chief object of the Infant Welfare Centres is to supervise the healthy child rather than treat the sick, though provision is always made for the treatment of the sick.

After sometime it was noticed that although the mortality rate for the second to twelfth months of infant life was substantially reduced that for the month was not.

It was then that care of the child before birth by treating it through the mother's system was seriously taken up, and this became known as antenatal treatment.

This particular work did not give all the results expected of it, and this fact led to special attention being paid to the mother and child during child-birth, and made the need of a more efficient midwifery service apparent.

Our own statistics show that 40 per cent of the infantile deaths (in Brestown) take place during the first two weeks of life. This clearly shows the need of a more efficient midwifery service here. But such a service will not be forthcoming until a demand for it is created so I most earnestly ask you to do everything in your power to create the demand.

One of the most essential forms of Infant Welfare



work is co-operation by this I mean where the official worker works hand in hand with representatives of the community such as your Union.

In my experience I have noticed that often the official regards the voluntary worker as a meddler without routine and that the voluntary worker thinks the official quite unsuited for the work on account of lack of sympathy. This may be partially correct, but any deficiencies on either side are remedied when the two parties work in unison for, what may be lacking in one would be supplied by the other.

It will at once become obvious to you that for the smooth and efficient working of any scheme there can be only one director, and I think you will agree with me when I say that in our case he should be the Head of our Health Department.

I learnt with great pleasure that one of your objects is to assist the Government to educate the people as to the necessity of co-operating with the Government to remove the cause of Infant Mortality, and feel that I cannot pass over this subject of co-operation without first warning you that in many cases Welfare Schemes have been totally wrecked through attempts to work with more than one director. I take this opportunity of impressing on you the absolute necessity of complete co-operation.

This can only be obtained by your allowing all your efforts to be controlled, and guided, by the Head of the Health Department of this Colony, who, on account of his complete knowledge of the health of this town is best able to direct our work in the most profitable direction.

I will now tell you how we are working at the present time

We have a fully trained maternity nurse well versed in matters concerning mother and child who is informed of every birth that is registered and, as soon as possible after receiving this information makes it her duty to

visit mother and child and if necessary give the mother any advice in her power. Should she find that the mother has a medical practitioner in attendance she naturally does not interfere unless particularly asked to do so.

When she has seen all the new births she seeks out all the new cases that require advice, and, continues to visit the cases she already has on her books.

Her advice is always very simple and refers to such matters as how and often to feed the baby, how to wash and clothe it. She explains the dangers of neglect of the navel string, and the importance of carefully handling the child, points out the need for rest in bed after child birth a matter treated very lightly by many mothers in this country.

If she meet a case which she thinks requires medical treatment she refers it to a doctor.

Once a week on Friday afternoons at two, mothers and babies are invited to attend at the Colonial Hospital in order that the growth of the babies may be recorded and the mothers given any advice that may be considered necessary.

An Infant Welfare Centre will shortly be opened in Campbell Street which will be much more convenient for mothers living in the West Ward of the city. I should explain that the West Ward has been favoured with a Centre of its own before either of the other two Wards because the need of one was considered less urgent in the east as this portion of the town is served by the Princess Christian Mission Hospital and the Central Ward has the Colonial Hospital.

You particularly asked me to tell you in what ways you can help us with our scheme. For the present I think your efforts should be confined to propaganda work, and I therefore propose now to suggest to you a few lines on which to work.

Before it is possible to gauge the health conditions in any place correctly it is essential that accurate statis-



tics should be available. I believe there are many births in Freetown not registered. But all deaths are registered for, as you know, it is impossible for burial to take place without a death certificate from the registrar.

Now, the effect of this is to make our mortality rate appear higher than it actually is, for, if all the deaths are registered and only some of the births it is obvious that the death rate will appear higher than it really is. For example, if 1000 children are born in this town in one year and 50 die, the mortality rate will be 50 because the mortality rate is calculated by the number of deaths per thousand births. You will see then that every birth unregistered makes our infantile mortality rate appear higher. Hence I am asking you to report to us any births that come within your knowledge as you will be helping us to detect at least some of the unregistered births, and, thus enable us to get more accurate statistics, and consequently to judge more accurately the value of the work we are doing. Again at the commencement of such a campaign as this it is essential that those engaged in it should have the confidence of the people so I would ask you to encourage them to make use of the advantages offered them.

As an example of the way in which you can help us I tell you that not long ago a statement was circulated that people were afraid to utilize the service of the Welfareists lest it should mean compulsory treatment in the Colonial Hospital. When I tell you that there is no compulsion in this scheme you will readily understand how you will be helping us by contradicting this rumour, and should any more rumours be spread we will be glad if you will make it your business to ascertain their truth, notify the authorities if they be true and detrimental to the work and contradict them if you find them untrue.

You should advise us of all pregnant women you may meet who are not under qualified medical care so that

we may if they be willing offer appropriate advice for many children are lost through ignorance of the mothers during the period of pregnancy, when a little simple advice could have put matters right.

You should never tire of telling both mothers and expectant mothers that they should feed their children entirely on the breast and that they should seek medical advice should they find themselves unable to do so whatever may be the cause for supplementary feeding is but rarely required and should only be resorted to on medical advice.

To show you how important to the welfare of the baby is breast feeding I tell you that in France it is now a punishable offence for any person to tell a mother to stop suckling if it cannot be proved that the advice was absolutely necessary. This law is in practice irrespective of persons. In Germany the following questions and answers are found in the Primer for school girls :—

How should the little baby be fed ?

Natural feeding is the best for him

How often does the mother nurse her baby

Five or six times a day that is every three or four hours and nothing during the night.

What is to be done if the mothers milk is insufficient ?

The mother must not wean her child but consult the doctor.

I do not intend to give today any information about the methods of artificial or supplementary feeding but feel that as the practice of giving the infant pap is so common here, I should give you some information as to how much the infant's stomach can hold then knowing how much food is frequently given to infants here you will be able to realize how often the child suffers from an overdistended stomach.

I have here an illustration showing the actual size of the infant's stomach at different periods.

You will see that at birth it holds one ounce which is equal to two tablespoonfuls at two weeks it holds two ounces at three months four and a half ounces, and at six months six ounces which is equal to twelve tablespoonfuls. At one year it can accommodate nine ounces.

I think you will get a better idea when I show you this model representing the infant's stomach at birth and this representing it at three months. I trust that you will now fully realize how easily and how often the baby is overfed, especially when the common practice of turning the food with the band into the mouth is adopted. If the child is held up and fed with a spoon or bottle the danger is much less.

I especially ask you to encourage the expectant mother as much as possible and to remove from her all superstitious and silly beliefs for it must be remembered that the well being of the unborn child depends as much on the mental condition of the expectant mother as on her bodily condition.

I said "superstitious and silly beliefs" let me give you a few examples to explain what I mean.

A pregnant woman in this country is afraid lest she see a chameleon, believing, that if she but views this harmless creature her unborn child will eventually suffer from "chameleon sick" a term which she applies to any wasting infantile disease of obscure origin. I mean a disease for which she is unable to find a cause. When I tell you that improper feeding and syphilis in the parents are very common causes of this condition and that they sometimes are difficult to diagnose you will readily understand why you should refuse to believe that every wasting infantile disease is due to the chameleon. I say this because I have seen so many cases of so called "chameleon sick" which were due to one of these causes.

Let us take another example—fits. They are popularly believed to be due to some supernatural influence but when I tell you that they are commonly caused by



such every day ailments as Malaria, with the cause and treatment of which you are all familiar, worms, indigestion, overfeeding, teething, and sometimes tetanus a disease which when found in the new born is almost always caused by careless treatment of the navel string, and that all these conditions are often accompanied by fever you will be well advised to consult a medical practitioner who will be able to tell which of these conditions is responsible.

When a child is taken to a native medicine man it is usually given some native herbs which sometimes give temporary reliefs—the mother is then satisfied only to find after a short while that the fever returns.

I would like to take this opportunity of expressing my appreciation of the way in which many mothers have readily realized the value of quinine to the child and of thanking them on behalf of the children and of asking them to encourage their neighbours to do likewise.

Whilst considering the subject of fever I must tell you that I feel confident that very many children are lost annually through Malaria because their parents and the people who advise them do not take fever seriously enough. I do not wish to imply that all cases of fever are due to Malaria but if fever was taken more seriously and proper advice obtained at least all the malarial cases could be saved.

A word about Tetanus—this disease although very fatal in the newly born is easily preventable. The chief and practically only mode of infection is through the navel string, and this almost invariably through contamination with earth for it is in earth that the germ causing this disease flourishes. Hence if you do not leave the navel string too long when cutting it, and take the greatest care to keep it scrupulously clean you will have gone a long way towards preventing Tetanus in the new born child.

I should point out to you that freshly gathered roots

and herbs are often contaminated with the soil and consequently are often the means of introducing tetanus bacillus into the body when applied to open wounds.

Before leaving the subject of superstitious and silly beliefs I would like to give you an example of what I consider a silly one.

It is quite a common sight to see a baby with a small piece of thread placed over its mould (anterior Fontanelle) and on enquiry one learns that this is placed there to stop the child from hiccoughing, when I tell you that the most common cause of hiccoughs in the infant is too rapid feeding I am sure you will agree with me in calling this practise silly especially as the mother usually does nothing else to relieve the child.

Before bringing this short address to an end I must apologise for some of the expressions I have used but I have only used them in order to impress you with some of the most important points.

Allow me to thank you.—The Women's Progressive Union—for having given me the privilege of addressing you and to thank you my audience for having so patiently listened.





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