

## EDITORIAL:

### Day-To-Day Challenges

No one attending the fifth annual meeting of the American College of Nurse-Midwifery could possibly go home with the complacent feeling that mothers and babies in the United States are enjoying a standard of maternity care that demonstrates the best a free democracy has to offer. Many of the facts on the national needs and resources discussed by Dr. Lesser are every bit as challenging to our generation as were the shocking maternal and infant mortality rates to the generations of the early part of this century. In the present times of rapid transition, when the problems relating to the very survival of mankind are straining the most sagacious minds, it is relatively easy to lose sight of the day-to-day challenges and values inherent in the care of families. This is especially true when our minimum standards of care may be good enough to at least maintain today's status quo in mortality and morbidity rates.

Dr. Lesser's statements are disturbing enough to show us that the standards and programs which were effective in previous decades are not good enough today. Do not his facts represent a loss today in family health and stability comparable to the disruption of families in the past by death and disease? And are not the problems as threatening, in a more insidious way, to our social, moral, and economic structure as any nuclear weapon that may be used against us?

What can those of us who are so closely associated with the beginnings of families *do* about such large-scale and complex problems? The work to be done is equally large-scale and complex, and might therefore seem overwhelming to us. But this work begins with each one of us individually. It begins with what we believe in—with our philosophy of maternity care, which gives us clarity of purpose and the courage of our convictions. It begins with our ability to analyze objectively what we are doing in our day-to-day jobs; with our willingness to seek and use new facts; with our courage to venture into new ways of doing our work when traditional ways are no longer appropriate to changing situations and needs.

Long term, comprehensive planning of services by cooperative action of all professional and related lay groups is essential, certainly. But each one of us can make a start by considering what we can do on a small scale tomorrow or next week—or even today, and then trying it out.

For example, let's look at a question Dr. Lesser asks: "Why is it that after all the progress that has been made in maternal health, we are witnessing a major increase in the percentage of pregnant women who come to term with little or no prenatal care . . . ?" And then let's ponder over one related statement: "The criticism is too often justified that in the care of pregnant women little consideration is given to the patient as a person." If we are involved in any capacity in the care of pregnant women, this is where we can start *now*. How much of this criticism hits home? Are mothers choosing, wisely or not, to run the risk of assuming that they are all right and can dispense with antepartal care, rather than to expose themselves to the dehumanizing experience of clinic care that seems almost designed to undermine their inherent dignity and sense of self-worth, their individuality? If we are alert to little, tangible ways of making even our most overcrowded clinics more acceptable to mothers, it will not solve all our problems, but it can go a long way toward helping mothers to use the care they need and that is available to them.

A re-definition of nursing functions in hospital maternity services is basic to improving the care of mothers and babies. We will have to be realistic enough and courageous enough to step out of the traditional pattern—rut, perhaps—in which we feel most secure, and create more constructive ways of spending professional nursing time with patients. Changes of this kind must be worked out with administrative and medical personnel, but nurses can and should take the initiative in this, and then follow through. This is a difficult job. But it is not too much to expect of professional nursing and nurse-midwifery in 1960. And it offers rewards commensurate with the effort—improved care for mothers and babies, and unlimited challenges and satisfactions for us in our daily work.

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