

55th Annual Women's Australia Day Ceremony

Thursday 21 January 2016

Frances Perry and the Women's Hospital¹

Frances Perry is chiefly remembered today as co-founder and president of the Melbourne Lying-in Hospital, the first maternity hospital for underprivileged women in Australia. The new private wing of the Women's Hospital here in Melbourne carries her name, and prior to this building, Frances Perry House at the former site catered for privately-insured mothers for many decades. But is this the most appropriate way to remember Frances? I feel she would prefer to be remembered for providing care to underprivileged women, not those with the resources to pay.

The treatment received by Frances's successors, Mary Moorhouse and Emma Goe, is even more concerning. Mary has been completely forgotten – this woman who promoted professional training for nurses is simply 'Mrs Moorhouse' in the Women's archives, while the extravagant plaque donated to the hospital following the untimely death of Emma Goe, which once graced the entrance hall of the hospital in recognition of her superb management skills, now lies covered in bubble-wrap, forgotten and unseen. Working at a time when women were not allowed a public profile, these three capable philanthropists provided hands-on leadership and management of the hospital, but representations of their work have tarnished their contributions and diminished the extent of their influence.

In the 1950s, when a male historian wrote a history of the Women's, he presented a fanciful image of Frances Perry, the wife of the Bishop of Melbourne. He wrote of:

the pointed toe of her buttoned boot probing under beds for what might be there; of mittened fingers sliding along window sills for signs of dust; of parasol-poking behind curtains for evidence of domestic sloth or carelessness'.²

This depiction of Frances has been repeatedly quoted over the years and many of you may be familiar with this portrayal of her. But the image of Frances Perry monitoring the marital status of patients and regularly inspecting the wards by boot and mittens does not sit happily with the impression of her that I have gained from reading her letters, the letters of a woman with a genuine interest in people, rather than a desire for respectability.

To quote from Frances: 'It often strikes me that people here wish to have a clergyman for the respectability of the thing and not from any real love for religion'.³ In representing

Frances as more concerned with judging the moral purity of the patients and the physical conditions of the hospital, Sayers and those who have repeated his words, have diminished the role which she faithfully undertook over nineteen years in Victoria.

When visiting impoverished women and noticing how they gave birth in squalid conditions, often without the means of even covering their newborn baby, together with a group of like-minded women, Frances distributed bags of goods such as baby clothes, linen and nutritious food to pregnant women who lacked the means of obtaining these basic necessities.

But Frances realised that more needed to be done. A maternity hospital was desperately needed for poor women who usually bore their children at home, often attended by a dirty and drunken midwife, many women suffering painful death in childbirth or dying of infection. A planning meeting was called in August 1856 and a committee formed under Frances's leadership. The twenty women working with Frances at this time included Alicia Jennings, Jane Macartney, Laura à Beckett, Mary Handfield and her mother, Elizabeth Tripp.

At the same time as these women were meeting, Doctors John Maund and Richard Tracy were in the process of renting a nine-roomed house in Albert Street, East Melbourne as a maternity hospital, but they lacked the finances to secure the property. The newly-formed ladies committee joined forces with them, providing the finances and infrastructure to establish the hospital, so that on 19 August 1856, the first patient was admitted.⁴

But there were tensions in the management of the hospital. The women on the female management committee were hands-on managers, meeting weekly and assuming responsibility for the admission of patients, staff appointments and negotiating contracts with builders and suppliers. They had direct authority over the doctors and the men who comprised a smaller 'gentlemen's committee' and difficulties from this arrangement soon arose at various levels. It was an issue of professionalism versus the voluntary nature of the women's committee, which translated into a gender conflict when the decisions of the doctors were questioned. The women on the management committee had strong evangelical and religious leanings which spilled over into a wider debate in the community, and the newspapers reported heated disagreements over the admission of patients. The gentlemen's and ladies' committees merged in 1870 and changes in legislation, increased secularisation, and developments in science brought new understandings to the management of the hospital.

Frances was president of the hospital's managing committee from its inception until she left Melbourne in 1874 and in an appalling omission, her biographer attributed the founding of the Women's Hospital purely to Drs Maund and Tracey.⁵ And so we have a diminished

image of this highly articulate, educated and spirited woman who, with a strong sense of both private and public duty, gave so much to the foundation of many services for the people of Victoria.

Frances was particularly concerned with the welfare of women and children, and took a leadership role in the Children's Hospital, the Melbourne Orphan Asylum and the Carlton Refuge for Homeless Women, among other services. She read to women prisoners and understood the tensions caused by the explosion of white settlement. Her concern for the detrimental influence of the newcomers on the Indigenous population is reflected in her diary, when she visited Albury and remarked, 'Albury has a character for being very noisy and disorderly, and indeed when we arrived on Friday there was a group of idle, half-intoxicated creatures, both black and white, standing about the inn'.⁶ She had plenty of opportunities to observe Aborigines during her tours throughout Victoria with her husband, the first Anglican Bishop of Melbourne, and appreciated the skills of the native police in guiding them through the nearly-impenetrable Gippsland bush.

Another of her major concerns was the welfare of governesses, especially those who had migrated to the Australian colonies in search of better living conditions than were offered 'at home' in Britain. In November 1863 Frances opened the Melbourne Home, a hostel for governesses and needlewomen, and served as its president from its foundation in 1863 until 1874. So great was her concern for these women, whose roles had been superseded by the Education Act of 1863, that she asked that money raised as a parting gift to her should go into a permanent fund to support the institution. Several years after the Perrys left Melbourne the Governesses' Institute Hostel, as it became known, moved to Caulfield and its building in Lonsdale Street was sold, becoming the Queen Victoria Hospital, entirely staffed by women.⁷

And what of Frances's successors?

Mary Moorhouse, a member of the famous Walker cricketing family, had hard shoes to fill, but when she tried to improve the standard of nursing in Melbourne she was met with deaf ears. Aware of the nursing training offered at London hospitals, when Mary raised the issue with the management committee, she was told 'there was so much prejudice in the colony against nursing sisters that it was useless to speak of it'. It is very difficult for us to imagine that hospital authorities would not support her wish to have nurses properly trained.

Undaunted, Mary wrote to the editor of the *Argus* arguing that formal training would bring to nurses 'better social position, more entire devotion to work, superior technical instruction, improved morality and higher motives of action'.⁸ She was strongly supported by

subsequent letters in the paper, but her ideas were rejected by the newly-merged management committee of the Lying-in Hospital.

Just five months later, her presidency was again challenged when the committee sought the resignation of Matron Harvey, whose poor vision was impacting on her work. The issue resulted in the resignation of both Mary Moorhouse and the committee's vice president, Elizabeth Puckle, wife of the Rev. Edward Puckle of Moonee Ponds and a foundation member of the committee. Mary's resignation letter highlights how unworkable the hospital's committee system had become:

I am reluctantly obliged to resign my position ... I have not taken this step without careful thought, but it appears to me that owing partly to the overbearing conduct of one section of the Committee, and the timidity of another, it is not possible to get business fairly considered ... and it thus becomes necessary for me to retire from a Committee where I am made responsible for measures which I have not the power to get fairly considered.⁹

But it was more than a challenge to her presidency: the gentlemen on the committee considered that the ladies should restrict their activities to admissions and cleanliness issues and not engage with wider issues of hospital management.¹⁰

Mary's successor, Emma Goe, faced similar difficulties. It was a time when women were agitating for the vote, not just for political equality, but for the social reforms that they could achieve with the vote. Emma forged her role within these parameters and drew on the conviction that women had a 'special contribution' to make to public life: she was a council member of the Mission to the Streets and Lanes and so concerned about the need for women's education, she supported the establishment of classes, schools and university hostels to provide educational opportunities for women.

Emma took an active role in the foundation of the Melbourne Girls' Grammar School and the committee of the Trinity College Hostel for Women. Her major philanthropic interest, however, was the Women's Hospital where her leadership was especially valued.

In 1888 Emma was elected to the management committee of the hospital and the following year became president, the annual report noting that she 'conducted the duties of this important office with so much tact and ability that the committee confidently hope she will continue to hold the position which she is so well fitted to occupy'.

Emma was suffering from cancer and she capably led the work of the management committee while her health permitted. When her poor health forced her to resign, it was stated that she had presided over the committee during some of the most troubled years of its

existence and she was judged to have ‘won the esteem and goodwill of everyone ... Her presidency was marked by good temper, sound common sense and patience’.¹¹

When illness forced Emma to resign the presidency of the hospital, in 1901 Janet Lady Clarke was invited to succeed her, the committee hoping that she would ‘worthily sustain the reputation of the chair for wise, patient and just ruling’.¹² Janet Clarke was, of course, the founding President of the National Council of Women of Victoria. During Emma’s long, painful illness, Janet Clarke took on many of Emma’s roles and her proximity to Bishopscourt placed her in an ideal position to assume these positions. With her colonial birth endearing her to Victorians, by the turn of the century Janet Lady Clarke was recognised as the leading social figure in Melbourne and is today remembered for her philanthropy and patronage. In this work, she was following in the footsteps of Emma Goe, indeed, in many of the roles created by Emma.

Today, the Women’s Hospital leads the way in all aspects of women’s health promotion, including advocacy and reproductive rights. Women’s access to health care and education improved due to the efforts of women such as Frances Perry, Mary Moorhouse and Emma Goe. Legislation that promises equal opportunities for women and respect for their human rights has been adopted in many countries and indeed, the National Council of Women of Victoria has a strong commitment to evidence-based policy. Much has been achieved, and there is still much to be done to secure the rights and full potential of women throughout the world.

Liz Rushen
January 2016

¹ This paper is based on research undertaken for my book, *Bishopscourt: Official Residence and Family Home*, Mosaic Publications, Melbourne, 2013.

² C.E. Sayers, *The Women’s, A Social History, to mark the 100th anniversary of the Royal Women’s Hospital, Melbourne 1856-1956*, Renwick Price Pty Ltd, Melbourne, p.7.

³ A. de Q. Robin, *Australian Sketches: the journals & letters of Frances Perry*, Queensberry Hill Press, Victoria, 1983, p.132.

⁴ Royal Women’s Hospital Archives, Box 296, Annual Reports, A1996/10/6-13, Vol. 1: Report of the First Annual Meeting, 1856, p.2.

⁵ Robin, p.11.

⁶ George Goodman, *The Church in Victoria*, Melville, Mullen & Slade, London, 1892, p.126.

⁷ *The Argus*, 29 September 1934.

⁸ 25th Annual Report, for year ending 31 December 1881; *The Argus*, 10, 11, 16 and 22 February 1881, p.7; see also Janet McCalman, *Sex and Suffering: women’s health and a women’s hospital*, MUP, 1998, p.58.

⁹ M. Moorhouse to W. Macredie, 7 July 1881, Melbourne Lying in Hospital, Minutes 1880-81.

¹⁰ W. Macredie to Mrs Puckle, 9 July 1881, Melbourne Lying in Hospital, Minutes 1880-81.

¹¹ Women’s Hospital, 32nd Annual Report, for the year ended 1889 and Minutes of the Ladies’ Committee of the Women’s Hospital, A1991/6/18, Women’s Hospital archives; *The Age*, 25 July 1901, p.5.

¹² Minutes of the Ladies’ Committee of the Women’s Hospital, A1991/6/21 Women’s Hospital archives.