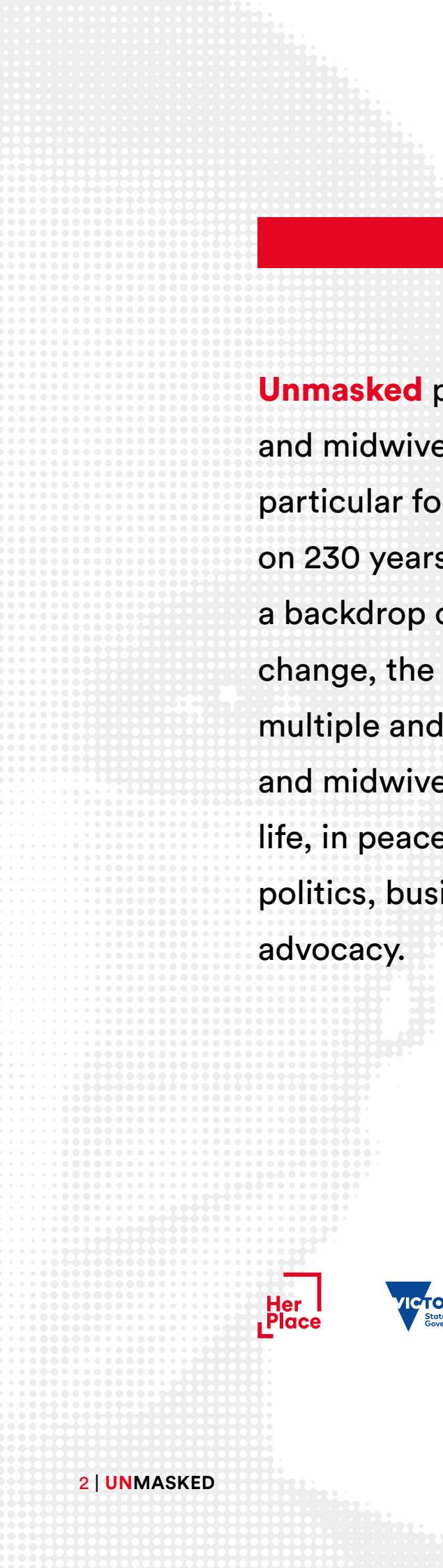


UNMASKED

**Celebrating Nursing and Midwifery,
Victoria and Beyond**



Unmasked pays tribute to the nurses and midwives of Australia, with a particular focus on Victoria. Drawing on 230 years of history and set against a backdrop of social and political change, the exhibition highlights the multiple and diverse roles of nurses and midwives: in civilian and military life, in peacekeeping spheres, practice, politics, business, activism and advocacy.



Nurses and midwives – making a difference for humanity

Dr Madonna Grehan

Unmasked started out as marking a special celebration in Victoria – an exhibition to acknowledge the International Year of the Nurse and the Midwife in 2020. By early 2020, health systems worldwide were responding to the threat of COVID-19. Across Australia, mainstream and social media were filled with health-related talk about ‘flattening the curve’, supply issues, quality of care and, of course, ‘PPE’, otherwise known as personal protective equipment. Celebrations for the International Year of the Nurse and the Midwife, inevitably, were postponed.

Nurses working through the COVID-19 pandemic, Wards 6 and 7 East, Austin Hospital, Melbourne, 2020
Ben Metherell, Austin Hospital



COVID-19’s persistence throughout 2020 delivered an intense focus on nurses and midwives – and what they do, every day, at the proverbial bedside. Large numbers of people may have met a nurse in practice for the first time, as they queued to have COVID-19 swabs collected. Ongoing media coverage of the pandemic has shone a light on nurses at work – in hospitals, intensive care units and mental health clinics, and at pop-up collection sites, including shopping centre car parks. Images of these masked and gowned practitioners have been virtual ‘exhibits’, viewed by us on electronic devices. The pandemic has reminded us just how much we rely on the expertise of nurses and midwives.



**Alfred Hospital, Melbourne,
Meningitis Ward, 1915**

*Reproduced with permission of the
Alfred Hospital Nurses League*



The appearance of this new and lethal virus revived stories of the 1918–1919 influenza pandemic and the Herculean efforts of nurses then, some just back from war service.

**Sister Sarah Waters during a
meningitis epidemic,
Alfred Hospital, 1915**

*Reproduced with permission of the
Alfred Hospital Nurses League*



Today's efforts are no less exceptional. Midwives have explained how physical distancing requirements have affected their delivery of care and support for women and families. Nurses have described the challenges of caring for people with COVID-19 in intensive care and raised concern about potential transmission of the virus to their households. In October 2020, the International Council of Nurses announced a grim death toll – worldwide, 1500 nurses had died after contracting the virus at work.

Mother and baby, Royal Women's Hospital Neonatal Intensive Care Unit, August 2020

Reproduced with permission of Georgia Brown and the Royal Women's Hospital, Melbourne



Nurses and midwives have been called 'angels' and 'heroes' for their roles in the pandemic. They reject such monikers, pointing out that they are educated professionals who strive to make a difference. Yet references to 'heroes' are hard to shift. They go back to the 1850s and nursing's connection to female reformers who were lauded by the media of their day, among them Florence Nightingale. Nightingale is feted as the founder of modern nursing. She is said to have elevated nursing's status worldwide, transforming bedside work from a lowly occupation that was performed by uneducated and disreputable people into a vocation for educated women.



Miss Florence Nightingale
(1820–1910), c. 1880
Everett Collection



Most scholars who have studied Nightingale's enduring dominance in the history of nursing and midwifery agree that she lent a level of respectability to the work of nursing. Her public profile enabled nursing to be seen as an appropriate vocation for single women, one which involved close contact with the body, particularly of men, all in the name of health.

But this is only part of a much larger and surprising history. Women with recognised professional qualifications were engaged in midwifery work in Australia well before Nightingale appeared on the scene. Until recently, their history has been invisible because so little evidence of their work survived. Later generations, unaware of these predecessors, believed and repeated the rhetoric that Nightingale's emissaries to Australia in the late nineteenth century 'cleaned up' nursing and midwifery practice. Over the years, that version of history has been cemented as lore. *Unmasked* is a conscious departure from this well-rehearsed history. It looks beyond the myths to consider roads less travelled and individuals less feted.



Aunty Mawn Young, 1953
Aunty Mawn is a Yuwaalaray woman
born in Dirranbandi, Queensland.
She trained from 1952 to 1956 at
Cairns Base Hospital.

*Reproduced with permission of Aunty
Mawn Young*



For example, an emerging area of nursing and midwifery history featured in *Unmasked* comes from research by Professor Odette Best, a Gorreng Gorreng, Boonthamurra and Yugambeh woman and nurse in Queensland. Best's ground breaking work draws out Indigenous women's tenacity in pursuing nursing and midwifery education despite societal restrictions. Aboriginal and Torres Strait Islander women have been rightly praised for breaking the glass ceiling in the 1950s, gaining admission to hospital training schemes that were readily available to white women. During studies of these pioneers, Best was intrigued to hear that others had preceded them. She subsequently confirmed that some Aboriginal Australian women accessed training as early as 1906. This part of the exhibition highlights the determination of First Nations women who overcame the numerous legislative obstacles that applied to their people in much of Australia. It is possible that as-yet-undocumented examples of other such trailblazers exist in Victoria and elsewhere, hidden from view.

Historically, the modern nurse or midwife working in a hospital was characterised by her uniform. The nurse's and midwife's outfit usually consisted of a dress with collar, cuffs, buttons and studs, an apron, veil or cap, belt, cloak or cape, and sometimes a badge. Some hospitals added a red cross stitched to an armband and worn on a sleeve.

The Nursing Staff of the [Melbourne] Hospital: The Matron (Miss Rathie) and Her 'Sisters', 1895
The Australasian (Melbourne), Saturday 25 May 1895, p. 24

Reproduced with permission of the Royal Melbourne Hospital Archives



The adoption of a uniform by nurses in Australia harks back to the late nineteenth century, when different conventions and expectations of nurses and midwives prevailed. Uniforms had specific purpose – to convey difference. The idea emerged via nursing's aspirations to be recognised as a profession. Governments across Australia at the time were generally unwilling to apply legislative restrictions on who could work as a nurse or midwife. Some people wanted certainty about what being 'qualified' meant and who could claim that status.

Melbourne District Nursing Society Nurses and their transport, 1907

Reproduced with permission of the Royal District Nursing Society – now known as Bolton Clarke



As small cooperatives of trained nurses were established in major Australian cities in the 1880s and 1890s, they agreed that a standardised dress was a way to clearly differentiate them from untrained counterparts. The trained nurse's 'deportment' – her clothing and her behaviours combined – was gradually absorbed more widely. In time, trained nurses and midwives came to be recognised by their dress alone.

Sister Marianne Rawson in military nursing dress, Second Anglo-Boer War, Bulawayo, Africa, c. 1900

Reproduced with permission of Ellen Hayes

Nurses of the Australian Army Nursing Service aboard their sea transport at Melbourne, 1940

State Library Victoria

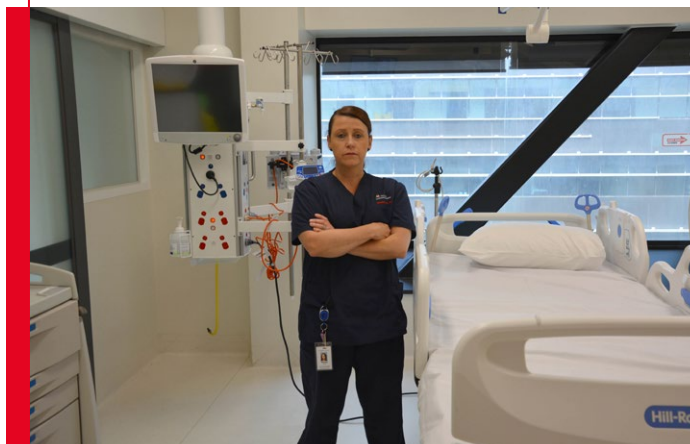


Military nursing adopted an even more standardised dress, although minimal variations were possible, such as the style of watch worn. Taken as a whole, uniforms could not only identify the wearer as a member of a group; for the wearer, the uniform may have generated a feeling of camaraderie and belonging.

Historic snapshots can generate a degree of nostalgia for a consistent neat appearance and the sense of order it conveys. But just as fashions change, early uniforms were regarded as impractical and each generation introduced new versions, and in recent years, the professions fought hard to overcome the long-held idea that dress alone ‘made’ the midwife and nurse. Nurses and midwives today want to be recognised by their expertise and their professional practice, not by what they wear. The now acceptable dress – plain clothes or ‘scrubs’ – is more practical. What is more, comfortable, breathable, easily washed wear is absolutely necessary in complex care settings and the COVID-19 environment where layers of PPE are required even for basic bedside care.

Michelle Spence, Nurse Unit Manager, Intensive Care Unit, The Royal Melbourne Hospital, 2020

Reproduced with permission of Melbourne Health



¹ Australian Government Health Workforce Data Summary Statistics, October 2020, see <https://hwd.health.gov.au/summary.html>

At the last assessment in 2019, there were around 350,000 nurses and midwives registered and employed in Australia, with just over 94,000 in Victoria. Roughly ten per cent are men.¹

Students in nursing lab, 14 May 2009
Reproduced with permission of the ANMF (Vic)



The feminisation of nursing and midwifery was embraced in the late nineteenth century, reflecting a worldwide trend. Women were considered a natural ‘fit’ for the work of caring. Institutions that did retain men as bedside attendants included mental asylums where physical strength was deemed an advantage. For some men, gaining access to training places outside this specific practice arena was a long haul. Only in 1975 was the first male midwife admitted to registration in Victoria.

Matron Martha Farquharson and staff of Bendigo Hospital, 1902
Farquharson was a prominent senior nurse who actively advocated for regulation of the profession in Australia.
Bendigo Health



It’s often been said that the feminisation of nursing delivered a subservient workforce, mere ‘handmaidens’ to medicine. Indeed, Nightingale declared that nurses should be obedient to doctors, although she did not use the term ‘handmaiden’. Clearly, the hierarchical structure of the modern hospital at the turn of the twentieth century was not an environment that encouraged individualism. Many positions within hospitals, if not overtly,

were tacitly controlled by others. Co-operative and compliant workforces were necessary to enable these large and unwieldy institutions to function. Even so, this does not mean that every nurse and midwife who trained in such institutions, or worked in them, was constrained for life, or lacked autonomy and ambition.

For many nurses and midwives, the chance to exercise power came outside institutions, as determined and enlightened women applied their exertions to improving the lot of bedside nurses via professional advocacy.

Even before the 1950s, midwives in the community were able to combine work with marriage and family life, unlike their single professional sisters who opted for administrative careers and silently revelled in the logistics of superintending public hospitals. Why is it that the many nurses and midwives who quietly pursued independent practice as a career option, such as chiropody or physical therapy or maternity care, have gone relatively unacknowledged?

Sister Lizzie Hoare, Sister Aldyth Tonkin, Nurse Mary Jane Hoare, Sister Kitty Hoare with babies at Ivanhoe Private Hospital, Donald, Victoria, c. 1920s

Reproduced with permission of the Donald History and Natural History Group



Laurel Thatcher Ulrich, an American historian, has noted that ‘Well-behaved women seldom make history’.² Perhaps this observation explains something about how we understand the professions’ history in Australia, expressing it simplistically through the prisms of power relationships and lauded individuals.

² Laurel Thatcher Ulrich, *Well-behaved Women Seldom Make History* (New York: Alfred A. Knopf, 2007).



A uniformed trained nurse and possibly a patient, using a foot pedal radio, c. 1930

State Library of South Australia



The history of nursing and midwifery in Australia is replete with resolute, forward thinking, energetic and innovative individuals who exercised agency, sometimes within, and sometimes going beyond, societal expectations. They have cared, educated, invented, advocated, innovated, agitated and mentored. Perhaps, just as the nurses and midwives of today reject the ‘hero’ label, their forebears did not expect to be feted, or even remembered, for their work. For every vocal achiever, and for every quiet achiever, *Unmasked* provides a timely opportunity to recall and celebrate a collective contribution to health care.

Nurses in the delivery of cancer therapy and ongoing research, Olivia Newton-John Cancer Wellness & Research Centre, February 2021

Ben Metherell, Austin Hospital



A defining image of the COVID-19 pandemic is the ubiquitous face mask. In this sense, the exhibition’s title *Unmasked* is an apt metaphor. Masks were already everyday equipment in many areas of nursing and midwifery practice. By unmasking nursing’s and midwifery’s history in Victoria and beyond, it is possible to see this history for its richness and diversity. Some aspects are still behind the mask, yet to be discovered.

At the same time, *Unmasked* acknowledges the reality of the present. The International Year of the Nurse and the Midwife was indelibly marked by a dangerous pandemic during which nurses and midwives continued to undertake their work for our benefit. *Unmasked* is a reminder that modern practitioners of nursing and midwifery, building on the efforts of their predecessors, make an enormous impact on human health. What they share is a desire to make a difference. It remains a fundamental attribute of their professions. This exhibition celebrates their proud history and their continued practice in making a difference for humanity.

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Celebrating Nursing and Midwifery,
Victoria and Beyond

Her Place Women's Museum Australia
2 March – 1 April 2021

Exhibition curator: Dr Madonna Grehan
Curator of Australian Indigenous content: Professor Odette Best
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Dr Madonna Grehan is an independent historian. She worked as a general nurse and midwife before moving into women's health research. She completed a PhD in nursing and midwifery history at the University of Melbourne. Grehan is an interviewer for the National Library of Australia's Oral History and Folklore Collection and immediate Past President of the Australian and New Zealand Society of the History of Medicine.

Professor Odette Best is a woman of the Wakun clan of the Gorreng Gorreng, Boonthamurra and Yugambah Nation. After training as a general nurse, Best moved into academia where she is currently Professor in the School of Nursing and Midwifery at the University of Southern Queensland. One of Best's main research areas is Australian Aboriginal and Torres Strait Islander women who completed recognised training in nursing and/or midwifery before 1950.

Acknowledgements

Her Place Women's Museum Australia respectfully acknowledges the Traditional Owners of the lands on which it works and presents its programs, and pays respect to their Elders past, present and emerging.

Her Place gratefully acknowledges the lenders of works and images to the exhibition. Special thanks to the twelve nurses and their families who have generously made these stories available to the broader community. Thanks also to the Exhibition Project's Steering Committee for their guidance, the Exhibition Team who worked so hard to bring the exhibition together under COVID-19 conditions, and to Dr Madonna Grehan and Professor Odette Best for sharing their specialist knowledge and for their invaluable contributions throughout this project, as well as Her Place's volunteers.

Unmasked is presented by Her Place Women's Museum Australia in partnership with the Department of Health and Human Services and Safer Care Victoria and is supported significantly by the Victorian Branch, Australian Nursing and Midwifery Federation. This exhibition is made possible with funding from the Victorian Government.



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