

STRENGTH *of* MIND

125 Years of Women in Medicine

MEDICAL HISTORY MUSEUM, UNIVERSITY OF MELBOURNE



Women were admitted to Melbourne Medical School in 1887, some 25 years after the course had commenced but 21 years before women were entitled to vote in Victoria. These first seven female medical students were tenacious, resilient and visionary; they challenged the social values of their day and made major contributions to public health in Victoria. Led by Constance Stone, the first woman to register as a doctor in Victoria, in 1890 (she had undertaken her medical education in overseas), they went on to establish the Queen Victoria Hospital in 1896. This was the first hospital established in Australia for the care of women that was managed and staffed by women, and one of only three such hospitals internationally. The attributes of these early women doctors have been the qualities of many women in medicine over the last 125 years, as they have contributed to all aspects of medical practice and research. Women now comprise more than 50% of medical graduates. This publication celebrates the achievements of Melbourne Medical School graduates from 1887 to the present.



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EDITED BY
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MEDICAL HISTORY MUSEUM UNIVERSITY OF MELBOURNE

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In compiling the information in this publication the editors and
contributors have aimed for accuracy. Over the past 125 years of
institutional administration, record-keeping systems at the University
of Melbourne have varied and it is possible that readers will discover
inconsistencies, omissions or inaccuracies herein. Additional
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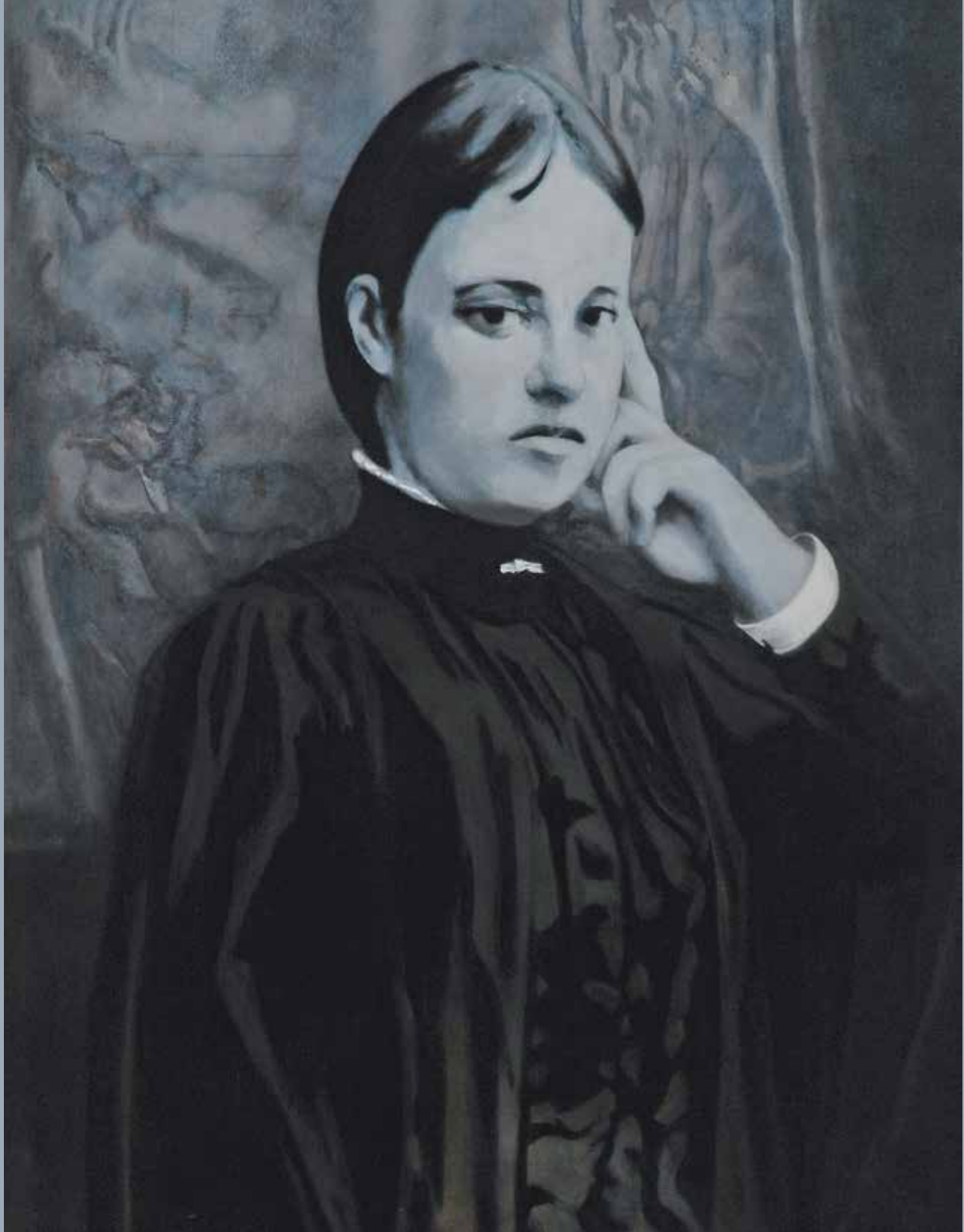
Cat. 67 **Mary De Garis's (1881–1963) graduation hood**, c.1905;
satin and cotton; 95.0 × 90.0 cm (irregular); MHM2013.92

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CONTENTS

FOREWORD Chancellor Elizabeth Alexander	5
PREFACE Professor James D. Best	7
INTRODUCTION Professor Jane Gunn	9
A FEW GOOD WOMEN: PIONEERS IN MEDICINE AT THE UNIVERSITY OF MELBOURNE Dr Marilyn Murnane	15
INNOVATORS AND LEADERS: FROM DR CONSTANCE STONE TO DAME ANNIE JEAN MACNAMARA Dr Heather Sheard	25
WHEN THE ORDINARY IS EXTRAORDINARY Dr Katrina Watson	37
MEDICAL WOMEN: THE CHALLENGES AHEAD Professor Judy Savige and Associate Professor Jill Sewell	45
HIGHLIGHTS: 125 YEARS OF WOMEN IN MEDICINE	50
LIST OF AUTHORS	166
EXHIBITION OVERVIEW Dr Jacqueline Healy	183
LIST OF WORKS	184
INDEX	192



FOREWORD

This year the University of Melbourne commemorates 160 years, with a reputation as a leader in education and research in Australia and overseas. We celebrate our academic achievements as well as the rich diversity of our students and alumni. Yet in 1853, when the University of Melbourne opened its gates to students, women were denied access to a university education. It took a further 26 years for women to be admitted to the University of Melbourne and another eight before their admittance to the Melbourne Medical School in 1887.

Lilian Alexander (1861–1934) was one of the first seven women who commenced medicine in 1887. She was an intrinsic part of the changing educational landscape at the University of Melbourne in the late 19th century, commencing an arts degree in 1883 then completing a Master of Arts. She was also the first female student at Trinity College.

Determined to enter medicine, Alexander and Helen Sexton (1862–1950) sought like-minded women through a letter to the *Age*, published in January 1887. In response to that request they were joined by Clara Stone, Margaret Whyte, Grace Vale and Elizabeth and Annie O’Hara. These women went on to establish the Victorian Medical Women’s Society and the Queen Victoria Hospital under the leadership of Constance Stone. This anniversary of 125 years of women in medicine reminds us of the crucial role that education plays in social change.

Strength of Mind: 125 Years of Women in Medicine (1887–2012) celebrates the contribution of women in the field of medicine. More than 50 individuals and events have been selected to illustrate the achievements, significant changes and diverse experiences of women in the medical profession. Similarly, equally prominent members of the medical profession and medical historians have authored these entries. All medical practitioners featured in the publication and nearly all authors are alumni of the Melbourne Medical School, at the University of Melbourne.

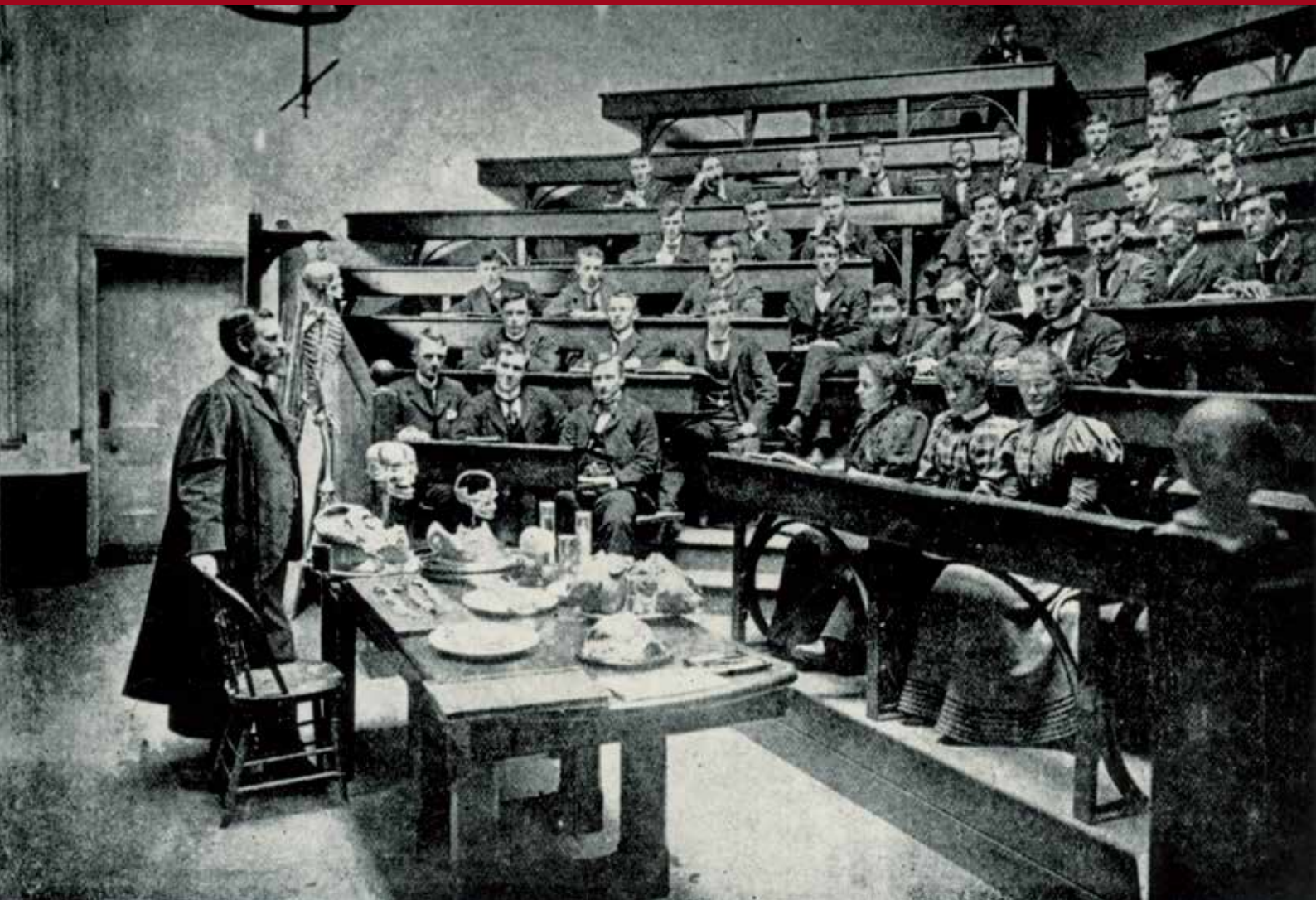
I thank all the subjects and authors for contributing to this significant anniversary publication. I also sincerely thank all the female alumni past and present of the Melbourne Medical School for their contribution to medicine in Victoria, Australia and internationally. Your achievements are inspiring. The legacy of Lilian Alexander continues.

Elizabeth Alexander AM

Chancellor

University of Melbourne

Cat. 155 Caroline Williams, **Lilian Alexander (1861–1934)**, 2005: oil on canvas; 120.0 × 90.0 cm. Trinity College Collection, courtesy of Trinity College; © Caroline Williams/Licensed by Viscopy, 2013



PREFACE

It is impossible to imagine the Melbourne Medical School without its women students, staff and alumni. *Strength of Mind: 125 Years of Women in Medicine* celebrates our female alumni. Women were belatedly admitted to medicine in 1887, 25 years after the establishment of Melbourne Medical School. Yet it was to take another 21 years for women to get the vote in Victoria. The early female students at the University of Melbourne were at the forefront of social change.

When Melbourne Medical School was established in 1862, Vice-Chancellor A.C. Brownless (1817–1897) was determined that the medical program at the University of Melbourne would be a rigorous five-year course, with standards higher than equivalent training in any medical school in Britain. However, Brownless's view of university education did not extend to the inclusion of women; he actively opposed the motion to admit women to the University of Melbourne in 1879, and to admit women to medicine in 1887. By contrast, the first head of the Medical School, Professor G.B. Halford (1824–1910) recommended as early as 1871, while president of the professorial board, that women who passed the relevant examinations sign the matriculation book. These differing opinions echoed views in the broader community about the status of women. Yet change moved rapidly, and in the *Brownless Memorial Supplement* published in 1898 women's participation in the school is clearly evident, illustrated here with Professor Harry Brooks Allen lecturing in anatomy; in the front row sit Effie Stillwell, Helen Shaw and Mary Baldwin. In 2013, half the school's students are women.

This publication brings together the women alumni of Melbourne Medical School from across 125 years, acknowledging the rich diversity of achievement through more than 120 alumni represented as subjects and authors linking the past, present and future. *Strength of Mind* is not just about the women specifically mentioned; it is about all our women alumni. It shares the victories and defines the challenges faced by women in the medical profession. I acknowledge the contribution to medicine and to society of over 4000 women who are alumni of Melbourne Medical School. I thank the steering committee, led by Professor Jane Gunn (MBBS 1987), for connecting our alumni in this important celebration of a major milestone.

Professor James D. Best

Head of Melbourne Medical School
University of Melbourne

Cat. 23 **Lecture Class Anatomy, Brownless Memorial Supplement**, 1898, p. 21; photograph, 12.5 × 18.6 cm; MHM00992. Harry Brookes Allen lecturing. Seated in front row: Effie Stillwell, Helen Shaw, Mary Baldwin



INTRODUCTION

Imagine the planning and determination that went into Lilian Alexander and Helen Sexton's decision to place an advertisement in the Melbourne daily newspaper in January 1887, seeking like-minded women interested in doing medicine at the University of Melbourne. Imagine the courage it required of the five women who replied. These seven women became the first female students in medicine at Melbourne Medical School: Clara Stone, Margaret Whyte, Grace Vale, Elizabeth and Annie O'Hara, Helen Sexton and Lilian Alexander.

These first seven female medical students were tenacious, resilient and visionary, challenging the social values of their day and making major contributions to clinical medicine and public health in Victoria. These women laid the foundation for future women of the Melbourne Medical School. This project brings together alumni of the school to celebrate women in medicine through this major publication and exhibition titled *Strength of Mind: 125 Years of Women in Medicine*, held at the Medical History Museum. We honour the diverse contributions of women doctors in many fields. We also acknowledge their triumphs and challenges.

Today, at least half of the graduates of the Melbourne Medical School are women. Since women were first admitted to the school in 1887, they have contributed and achieved so much. The exhibition and catalogue can only provide a snapshot of our rich and inspiring history. It was easy to know where to begin—with those seven wonderful women—but more difficult to know how to do justice to those over the years that have followed. We called upon alumni to nominate women who had inspired them. The response was magnificent. We spoke with medical historians, and Medical History Museum Curator Jacqueline Healy worked tirelessly with the support of Liz Brentnall and young volunteers to scour every possible archive. This catalogue and the exhibition is the result.¹

We include key historic and contemporary individuals and events that track the changes over 125 years. More than 100 women graduates of the MBBS at Melbourne Medical School have participated in this publication as subjects and authors. Each woman participant, whether subject or author, is here because she is inspiring in her own right. These women also represent over 4000 female graduates of the school. The process for selection relied upon the nominations received from the alumni. The selection criteria required that the woman doctor was a graduate of the Melbourne Medical School and that she had made a contribution to medicine in her discipline, to the role of women in medicine or to the community.

Cat. 160 **St Vincent's Clinical School Graduates**, 2011; photograph; 20.0 × 30.0 cm. St Vincent's Hospital Collection

Every female graduate has faced the challenge of gaining admission to the University of Melbourne to study medicine, but none so great as the challenge faced by the first seven women. Dr Marilyn Murnane's essay explores in meticulous detail the resistance to change in particular by the founder of Melbourne Medical School, A.C. Brownless (1817–1897), who doggedly opposed women's admission. In contrast, the first head of the Medical School, G.B. Halford (1824–1910), was always supportive of women's inclusion. Today, Professor James D. Best leads the Medical School and his support for this celebration stands in stark contrast to the early days of the Medical School.

Being accepted as a woman doctor took time. Heather Sheard's essay deals with ten pioneering women, from the first female medical graduates in 1890s, including Helen Sexton and Constance Ellis, to graduates from the remarkable class of 1922, Kate Campbell and Annie Jean Macnamara. Obstacles were placed in their paths, and ingenuity, determination and lateral thinking were required. The remarkable story of Mary De Garis and 13 other Australian women doctors is highlighted; when the Australian or British armed forces would not employ them, they paid their own way to the front to work in field hospitals. Others, such as Gwen Wisewould, went to the country to run their own practice.

Women continue to create many of their own career opportunities. As highlighted in Katrina Watson's essay, these opportunities are often the result of the special challenges that women confront. Katrina uses the metaphor of a star constellation, the Milky Way, to celebrate the unique perspective that women have in encompassing family and the community. Her essay shows how we are all intrinsically connected and that the sum of our achievement is much more than any single achievement alone.

Judy Savige and Jill Sewell place their own reflections in the context of extensive research undertaken on the status and contribution of women in medicine. This research identifies patterns of achievement in various fields and analyses barriers to increasing opportunities for women in the realms of academia, research and administration.

Finally, more than 50 authors focus on highlights, individuals and events that span the 125 years between 1887 and 2012. The stories of the subjects and the storytellers are of equal value. For example, Magdalena Simonis, President of the Victorian Medical Women's Society, writes about its establishment and the role of Constance Stone. This group was pivotal, as was the Lyceum Club, in enabling women to come together for support and for collective action. Some remarkable individuals emerged. Mary Glowrey, a member of the Lyceum Club, left private practice to work as a missionary in India in the 1920s. She was the first member of any Catholic religious order to be allowed to practise her profession

as a doctor. This overall restriction was not removed until 1936. Sharon Wallace, Director of Anatomical Pathology in Ballarat, writes about Mary Glowrey's passage towards sainthood. Glowrey reached the first stage of canonisation in 2012.

From the establishment of Queen Victoria Hospital in 1895—a hospital run by women, for women—women have played a pivotal role in developing healthcare services for women and children. Dame Mary Ranken Herring was a pioneer in the advancement of women's health. In 1926, she was medical officer at the opening of the first non-hospital prenatal clinic at Prahran Health Centre. Kathleen Hayes, recipient of the Australian Federation of Medical Women (AFMW) Constance Stone Award, examines her contribution. Ida Bell Brodrick became the first woman chief medical officer for the City of Melbourne. Dr June Danks lived next door to her for 20 years and writes about her work.

Initially the Melbourne Hospital² was reluctant to take female residents and resisted until 1896; it was forced to concede because women were consistently receiving the top marks. Janet Greig and Alfreda Gamble were the first female residents at the Melbourne Hospital. It was not until 1947 that Margaret Henderson became the first woman appointed to the staff of the Royal Melbourne Hospital, her story told by Christine Kilpatrick, Chief Executive Officer of the Royal Children's Hospital. In the same year, Lucy Bryce became the first woman elected to the council of the University of Melbourne; Deputy Vice-Chancellor (Engagement) Sue Elliott writes about Bryce's position.

Many early doctors sought work in the country as general practitioners. Carolyn De Poi writes about Annie Bennett, the GP at Mooroopna, and founding its hospital. Carolyn now teaches there. General practice has become a main area of employment for women doctors. Donna Henderson is a GP in development disability—one of the few specialising in this area—motivated by her personal experience of her son, who has cerebral palsy. Professor Susan Sawyer, inaugural Chair of Adolescent Health, University of Melbourne, shares Dr Henderson's work.

The international reach of female graduates of Melbourne Medical School is highlighted in the achievements of our alumni. Professor Doris Young, Professor of General Practice & Assistant Dean (China) in the Faculty of Medicine, Dentistry and Health Sciences, shares the contribution of Frieda Law and her role in the Li Ka Shing Foundation in Guangdong. Nadine Levick, Director of Emergency Medicine, Maimonides Medical Centre in Brooklyn, is linked with Sandra Neate, Director of Emergency Medicine Training at St Vincent's. Dr Georgina Phillips, who has worked extensively in the Solomon Islands and Papua New Guinea, writes of Julie Cliff's contribution in Mozambique. The diverse

backgrounds of our alumni are also acknowledged; Jessica Luong's family were Vietnamese refugees, and Dr Shirley Zaklikowski, also from a family of refugees, writes about her.

Others have sought careers outside their original training: Sharon Keeling was a nurse, then trained to be doctor and now is a practising barrister; Heather Wellington, who has a background in clinical governance, maps this inspiring career. The Honourable Dr Rosemary Crowley was the first South Australian female ALP senator in federal Parliament; internationally renowned renal expert Judith Whitworth tells her story.

Old and new connections have been forged by this publication. Mary Belfrage, Medical Director at the Victorian Aboriginal Health Service Co-op, writes about her friend Dr Shirley Godwin, one of our first female Indigenous graduates; while Alice McNamara's sporting achievements have inspired Mary Anne McLean, GP Liaison Officer at the Mercy for Women, establishing a new friendship.

Finally two current Indigenous students, Ngaree Blow and Louise Richardson, write about their sources of inspiration for becoming doctors. They share with us what it is like to be a student now.

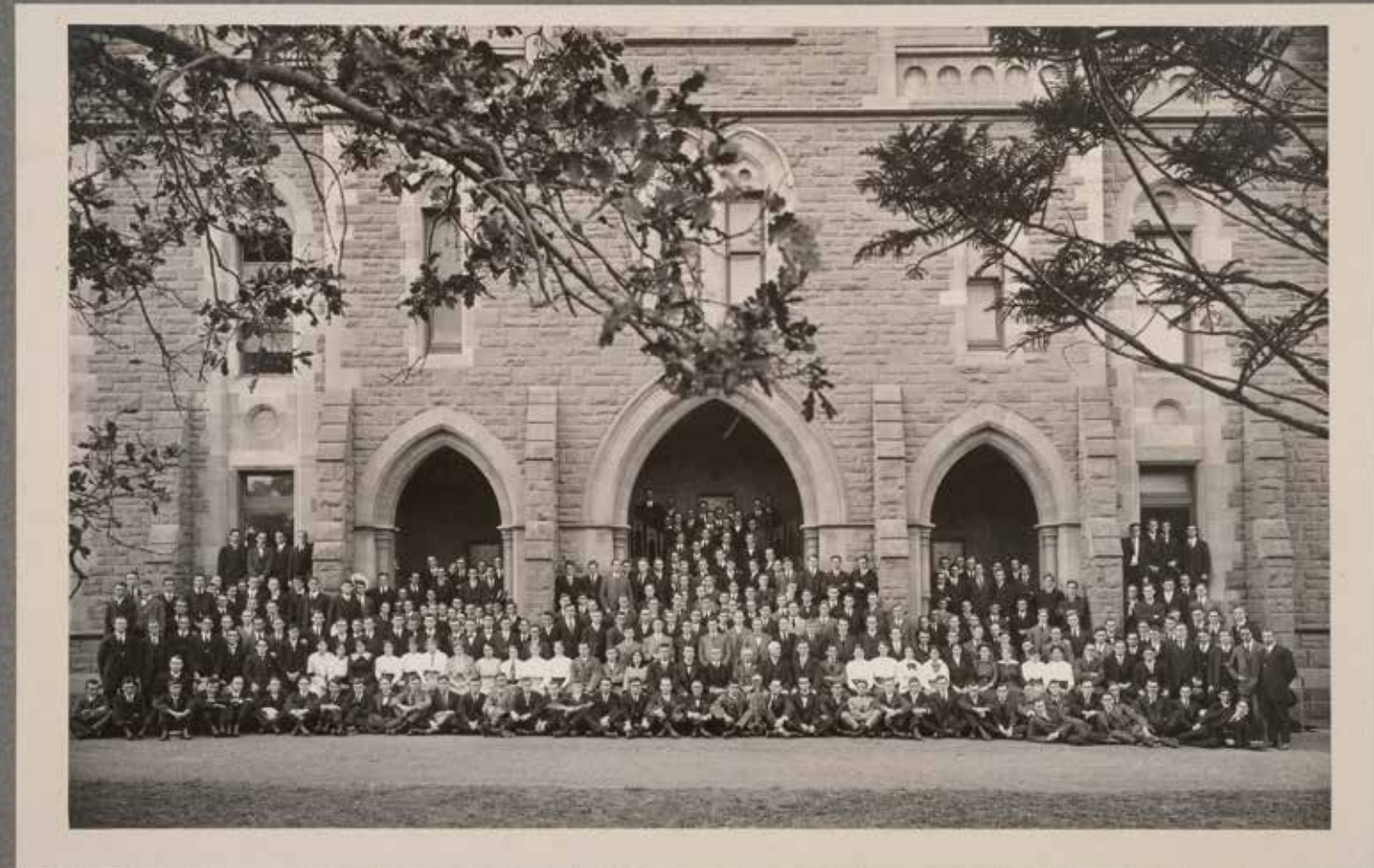
If the first seven female students could meet the storytellers and could read the stories contained within this catalogue I am sure they would be impressed with the achievements made over the past 125 years. No doubt they would remain critical about lost opportunity and barriers that still surface and limit the reach and potential of women doctors. Yet, I suspect that they would say to us, it is within our power to shape the future in a manner that serves to enhance the contribution that we make. All we need is the strength of mind to achieve this.

Professor Jane Gunn

Chair, 125 Years of Women in Medicine Steering Committee
MBBS 1987

- 1 A steering committee was established early 2013, chaired by Prof Jane Gunn (Chair Primary Care Research, Head, General Practice and Primary Health Care Academic Centre, Melbourne Medical School), to determine the framework of the publication. Other members included Prof Judy Savage, A/Prof Katrina Watson, Dr Lorraine Baker and Melissa Lee (President, University of Melbourne Medical Students' Society), Sue Sleep, (Director, Policy and Planning Melbourne Medical School) and Liz Brentnall (Advancement and Communications, Faculty of Medicine, Dentistry and Health Sciences). Jacqueline Healy, Curator, Medical History Museum was the project manager responsible for the exhibition and catalogue.
- 2 Editor's note: Royal assent has been received by some of Melbourne's major hospitals over the years: the Royal Melbourne Hospital in 1935, Royal Children's Hospital in 1953, Royal Women's Hospital in 1954 and Royal Victorian Eye and Ear Hospital in 1961. The names given in publication reflect those in use during the period described.

Cat. 9 **Medical Students at Melbourne University, Jubilee Year, April 1914**, 1914; photograph, cardboard, wood, paint; 36.0 x 55.0 cm; frame: 71.5 x 91.7 cm; MHM00448



The Seats Studio,

Melbourne.

MEDICAL STUDENTS at MELBOURNE UNIVERSITY
Jubilee Year, April 1914



HELEN SEXTON



LILIAN ALEXANDER



CLARA STONE



MARGARET WHYTE



ANNIE O'HARA



GRACE VALE



ELIZABETH O'HARA

A FEW GOOD WOMEN: PIONEERS IN MEDICINE AT THE UNIVERSITY OF MELBOURNE

In the 19th century in Australia, women began attempting in earnest to enter university to study medicine. Angry because they were denied the right to higher education, they closely watched the women's movement in England, where their peers fought for the right to education at university level.

Several exclusive girls' schools in Melbourne had a good curriculum, and at Tarrington House, in East Melbourne, principal Mr G.A. Samson worked hard for girls to sit the university matriculation examination, enabling them to attend university. He wrote to the University of Melbourne in 1871, requesting the admission of female students to the university. The council replied on 30 October 1871: 'That in the opinion of this Council the Act of Incorporation of the University and the Statutes do not authorise the matriculation of females'. A second resolution passed to clarify the situation stated: 'In the opinion of this Council females may be admitted to the matriculation examination although such females are precluded from matriculation.' This meant that women could matriculate but would not be admitted into the university to obtain a degree. The example of Dr Elizabeth Garrett Anderson in England, who had fought to enter medical school and later to obtain her medical degree, was foremost in the minds of women attempting to enter university in Australia. The reason for refusing women university degrees appears to have been the fear that academic qualifications would threaten men in many academic fields.

The question was debated at length during the next two years until finally, on 21 May 1873, Dr John Madden moved at a university senate meeting that: '... having regard to the general policy of the Act of Incorporation there is no sufficient reason why females should be excluded from the educational advantages and corporate privileges of the university'. Reverend T.C. Cole seconded this motion. Dr Madden's resolution was accepted and passed onto the university council. One member, the Hon. R.S. Anderson, moved that a committee be set up to look fully into the matter, '... which has induced certain British and foreign universities to admit females to ordinary and special degrees and to report to Council whether any, and if so what, facilities should be afforded to females to prosecute their studies beyond the matriculation examination'. It was suggested that the Act of Incorporation be amended to enable these recommendations. This being such a radical change, the council, supported by the university senate, decided to shelve the issue.

Cat. 21 **First women students at the University of Melbourne School of Medicine, 1887** (details); photograph; 28.0 x 33.0 cm; MHM02037

It was not until 1877 that eminent Oxonian scholar Dr Charles Pearson arrived in Victoria from England. He had been elected to the Victorian Legislative Council and had given active support in England to the women's movement, resulting in the University of London admitting women for the first time in 1877. Pearson was determined to give women the same status as male students here, and introduced the University Reform Bill, which would give women equal access to degrees. He proposed the Bill in 1877 but it did not progress past the first reading in the Assembly. However, it forced the university council to think about the women's demands, and it was discovered there was nothing in the *University Act* forbidding their admission; the university had the power to confer degrees upon any *person*, and it did not specify male or female. On 20 October 1879, Pearson proposed '... that public notice be given that on and after the March 22, 1880 females be admitted to all the corporate facilities of the University, except that, until special provisions be made, they be restricted from proceeding to medicine'.

The Bill's progress through the Assembly was delayed because of a petition; Vice-Chancellor Sir Anthony Brownless and the university council requested the Upper House not pass the Bill. The members of the university senate, however, were in favour of the amendment. It is not clear why the Vice-Chancellor opposed the Bill, as well as a later motion in 1887 to admit women to the Faculty of Medicine, although it appears he simply objected strongly to women entering the medical profession.

At the beginning of the Legislative Assembly session of 1880, Pearson reintroduced his University Reform Bill under the title of the *University Constitution Amendment Act*. This Act passed all stages in both Houses and became law at the end of the 1881 parliamentary session. Despite determined opposition by certain members of the university council, the first Australian woman was admitted to the University of Melbourne: Miss Bell Guerin went on to complete her Bachelor of Arts degree in 1883 and her Masters degree in 1885.

It was seven years after the University of Melbourne began accepting women as undergraduates (and two years after Sydney had opened its doors to women) that, in 1887, the university received applications from women wanting to study medicine. This was particularly due to the persistence of two women, Misses Lilian Alexander and Helen Sexton. Lilian had obtained a Master of Arts degree in 1886, and Helen was planning to go to England to study medicine. (Her uncle, Dr Cuthmore Furnell, principal of the Madras Medical School in India, also encouraged her to study with him in India but she was not anxious to leave Australia.) Lilian planned to force the council to admit women into the



Cat. 24 **Dr Wilkinson lecturing a first year physiology class**, 1902; photograph; 19.0 × 23.5 cm; MHM00412

Faculty of Medicine in Melbourne. Realising the application of several women would carry more weight than hers alone, she inserted an advertisement in the newspaper asking other women interested in studying medicine to contact her. She received replies from the Misses Anna Higgins, Elizabeth and Annie O'Hara, Clara Stone, Grace Vale and Margaret Whyte, all of whom had been previously refused admission in Melbourne. The applicants belonged to families of high academic standard, and many knew members of the university council.

The next step was to get public support, so they approached Mr David Syme of the *Age* newspaper. In January 1887, newspaper articles began to appear supporting the entrance of women into the Faculty of Medicine, at the same time revealing the prejudice they would have to overcome. One article in the *Age*, dated 22 January 1887, read:

Some time ago the University authorities resolved that it was not in the interest of the University that women should be admitted to the medical course ... that decision can only be acquiesced in until the moment comes for disputing it with fact, for it is understood that a number of young lady students have entered into an agreement to test the validity by offering the usual entrance fees and daring the council to close the door of the Medical School against them. Whether they succeed or not remains to be seen, but in the meantime the attempt is a spirited one.

The father of Elizabeth and Annie O'Hara wrote to the university, stating that his daughters wished to study medicine. He also made enquiries at the universities of Sydney, Adelaide and Edinburgh, though his preference was that they studied in Melbourne. Meanwhile, Lilian Alexander and Helen Sexton were pursuing their cause by personally interviewing every member of the council about obtaining entrance to Melbourne Medical School. Two new professors had recently been appointed to the Faculty of Medicine, Professors Baldwin Spencer and Mason. Both added their support to the application. They were younger men, accustomed to the idea of women attending English universities. Mr W.M. Whyte, who was a senator, advised his daughter Margaret that if she simply applied to do medicine she would not be admitted, but if she paid the fees she would have to be admitted. Helen Sexton followed this advice, and went to the university and paid her fees.

At a meeting of the university council on 21 February 1887, Dr Alexander Morrison moved that the 'Council approve of the admission of ladies to degrees in medicine'. Seconded by Dr John Madden, the motion was carried by ten votes to three.

Cat. 113 **Dr Mary Glowrey (1887–1957) in the Out Patients Department at St Vincent's Hospital**, c.1914–16; photograph; 15.0 × 20.1 cm. The Glowrey Papers



Again, the dissidents included Vice-Chancellor Sir Anthony Brownless! The Faculty of Medicine accepted the council decision, and four women had already applied to enrol in the medical course. Interestingly, at this time, English universities, such as Oxford and Cambridge, had refused to admit women into medical degrees.

The council asked the faculty to design a school where separate lectures could be delivered to women students in those subjects ‘to which it was undesirable on the grounds of decency that the lectures should be attended by both sexes in common’. Professor Anderson Stuart of the Faculty of Medicine at Sydney University was asked for his opinion. He replied that the presence of the one woman student in commerce, Dagmar Berne, who had been there for two years, had neither ‘inconvenienced nor embarrassed other male students or teaching staff, and the young lady was as gentle and modest a lady as I have ever seen’.

The seven women who entered the University of Melbourne’s Faculty of Medicine in 1887 were Misses Lilian Alexander MA, Elizabeth and Annie O’Hara, Helen Sexton, Grace Clara Stone (called Clara), Grace Vale and Margaret Whyte. The women entered the school at the same time, but they did not graduate together. None were deliberately failed, but some had to miss a year through illness—one being Lilian Alexander, who commented, ‘I’ve studied so long that I am too tired to go on, I simply must have a rest before I continue with my medical work’. Dr Clara Stone and Dr Margaret Whyte were the first graduates, in 1891, followed by Dr Helen Sexton and Dr Elizabeth O’Hara in 1892. Dr Alexander graduated in 1893, and Dr Annie O’Hara and Dr Grace Vale in 1894. Two other women joined the course—Misses Amy de Castilla and Emily Mary Page Stone, a cousin of Constance and Clara Stone—who graduated in 1893. Dr Clara Stone recalled:

We knew that when we entered the medical course that we were not wanted. The staff were always most courteous and some of them went out of their way to help us. But the boys did not want us there as their attitude showed quite clearly, they were never actually rude or obstructed us but we suffered from their disapproval during our student days.

When the final results appeared, Dr Margaret Whyte had done brilliantly, winning both prizes and two scholarships valued at £70, a lot of money in those days. She said: ‘The men were furious and were extremely rude’. Her student career fully justified the fact that she should have the opportunity to compete with men. But there was evidence of

Cat. 1 **Fifth Year Medical Students 1893**, 1893; photograph; 54.2 × 64.6 cm; MHM00511. Women medical students, left to right: Miss E.M.P. Stone, Miss A. de Castilla



jealousy at her success among the men. An extract from the official records of the University of Melbourne shows that she had commenced an arts course in 1886 and taken second-class honours in the year as a whole. In 1887, she commenced her medical course, obtaining honours each year and graduating with a Bachelor of Medicine in October 1891, as the top student of her year. On completing her medical degree, she obtained second-class honours, first place and a scholarship in medicine, forensic medicine and psychological medicine; she also gained second-class honours, first place and a scholarship in surgery, obstetric medicine and diseases of women and children.

When the day of graduation arrived for Dr Clara Stone and Dr Margaret Whyte there was great excitement at the university, with many members of the Australian women's movement present. The chancellor, who presided at the graduation ceremony, was none other than the man who opposed the admission of women to the Faculty of Medicine, Sir Anthony Brownless. When the women were given their degrees they received a very enthusiastic reception. The *Argus* report on 7 November 1891 stated:

The lady doctor had become an institution in Victoria. Two ladies at least, holding foreign diplomas are already at work in Melbourne as 'legally qualified practitioners,' and yesterday for the first time ladies were admitted to the 'ranks & privileges of Bachelor of Medicine in the University of Melbourne. Miss Grace Stone and Miss Margaret Whyte have completed the 5 years course of studies, have walked the hospitals, and passed all the required tests ... More than a dozen girls are following in the footsteps of Miss Whyte and Miss Stone in the Medical School.

Nonetheless, it would continue to be an uphill battle for women entering a predominantly male field, attaining recognition in the field of medicine. So it is worth noting here, that women held this prestigious status in Greece and Egypt from the very early days of medicine.

Dr Merrilyn Murnane AM

MBBS 1960

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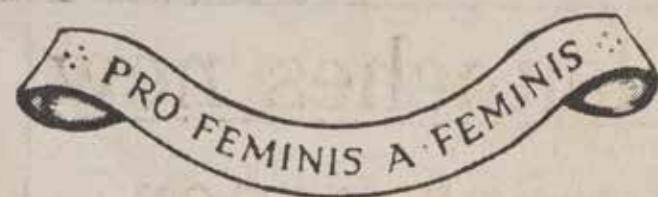
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Cat. 28 **Ellen Maud Balaam (1892–1985) studying with other students in the students' room at the Melbourne Hospital**, 1916; photograph; 8.3 × 12.6 cm; MHM05918





The Queen Victoria Hospital motto.

Great doctors of the Queen Vic

Constance Stone

AUSTRALIA'S first woman doctor was Constance Stone. She left Melbourne in 1884 to study medicine in Philadelphia, then took out a British degree and went to the New Hospital for Women in London where she worked with Dr Elizabeth Garrett Anderson.

Back in Melbourne in 1889 she set up a practice in Collins Street. Once a week, she worked unpaid at Dr Singleton's Mission in Collingwood, where more than 16,000 patients were treated a year. Her sister Clara joined her there as soon as she graduated. They saw fifty to a hundred women in every session, and became convinced of the urgent need for a hospital run by women, for women.

In 1896 10 women graduates gathered at Constance Stone's home to make plans for setting up a hospital. Her husband, Dr Egryn Jones, offered use of the Welsh Church hall in La Trobe Street, then a poor, crowded area. Dr Clara Stone had a £2 donation



from a private patient. They decided to go ahead with it: the Victoria Hospital (later the Queen Victoria), the third hospital in the world run by women for women, was born.

Constance Stone became ill in 1900, a year after the Queen Victoria Hospital opened. She died in 1902, her life's ambition achieved.

INNOVATORS AND LEADERS: FROM DR CONSTANCE STONE TO DAME ANNIE JEAN MACNAMARA

'A life to become part of.' — Gweneth Wisewould, *Outpost: A Doctor on the Divide*, 1971

Banking on strength in numbers, 25-year-old Helen Sexton and Master of Arts graduate Lilian Alexander placed an advertisement in Melbourne's daily papers in January 1887.¹ They asked for like-minded women to join them in their attempt to become the first female students to enrol in medicine at the University of Melbourne.² Five years later Margaret Whyte and Clara Stone became the first women to graduate with an MB ChB. By the start of the Great War, a little over two decades later, nearly 130 women were registered medical practitioners in Australia. Why did the first generations of women doctors need strength of mind, strength of character and the strength of their female peer relationships to pursue a medical career?

Tertiary education at the turn of the century was considered unfeminine and was thought to cause 'the degradation [of] the sex' and encourage low marriage and birth rates among women graduates.³ The propriety of women practising as doctors was also in question, unless they practised within the confines of women's and children's health. Middle-class women were not expected to be in paid employment, and medicine was an overtly public way of earning both a living and opprobrium.⁴ Social attitudes to women in medicine were reflected in the inequalities the women faced in professional areas. From the earliest graduates in the 1890s—such as Helen Sexton, Constance (Connie) Ellis and Constance Stone—to the 1920s—Kate Campbell and Annie Jean Macnamara—women doctors employed spirit and lateral thinking, and they dispensed collegial encouragement.

Dr Constance Stone was the first woman registered to practise medicine in Australia.⁵ Enrolment in university medical courses was not permitted for women in until the late 1880s, so Constance travelled to America, Canada and England to achieve her qualifications. She took a degree in medicine with first-class honours from the Women's Medical College of Pennsylvania, an MD at the University of Toronto in 1888, and became a Licentiate of the Society of Apothecaries in London two years later.⁶ Returning to Australia in 1890, after at least six years of travel and study, Dr Stone was pivotal in the initiation of two institutions that would prove vital to women doctors. Having worked for a time at the New Hospital for Women in London, her vision was for a hospital staffed by women doctors to aid women who did not have the income to access medical treatment.⁷ The hospital would also provide valuable clinical experience for women doctors, who faced limited access to positions as hospital resident medical officers.

Cat. 39 **Constance Stone (1856–1902)**, 'End of a hospital run by women', *Age*, 16 July 1986, p. 20; print on paper; MHM2013.93

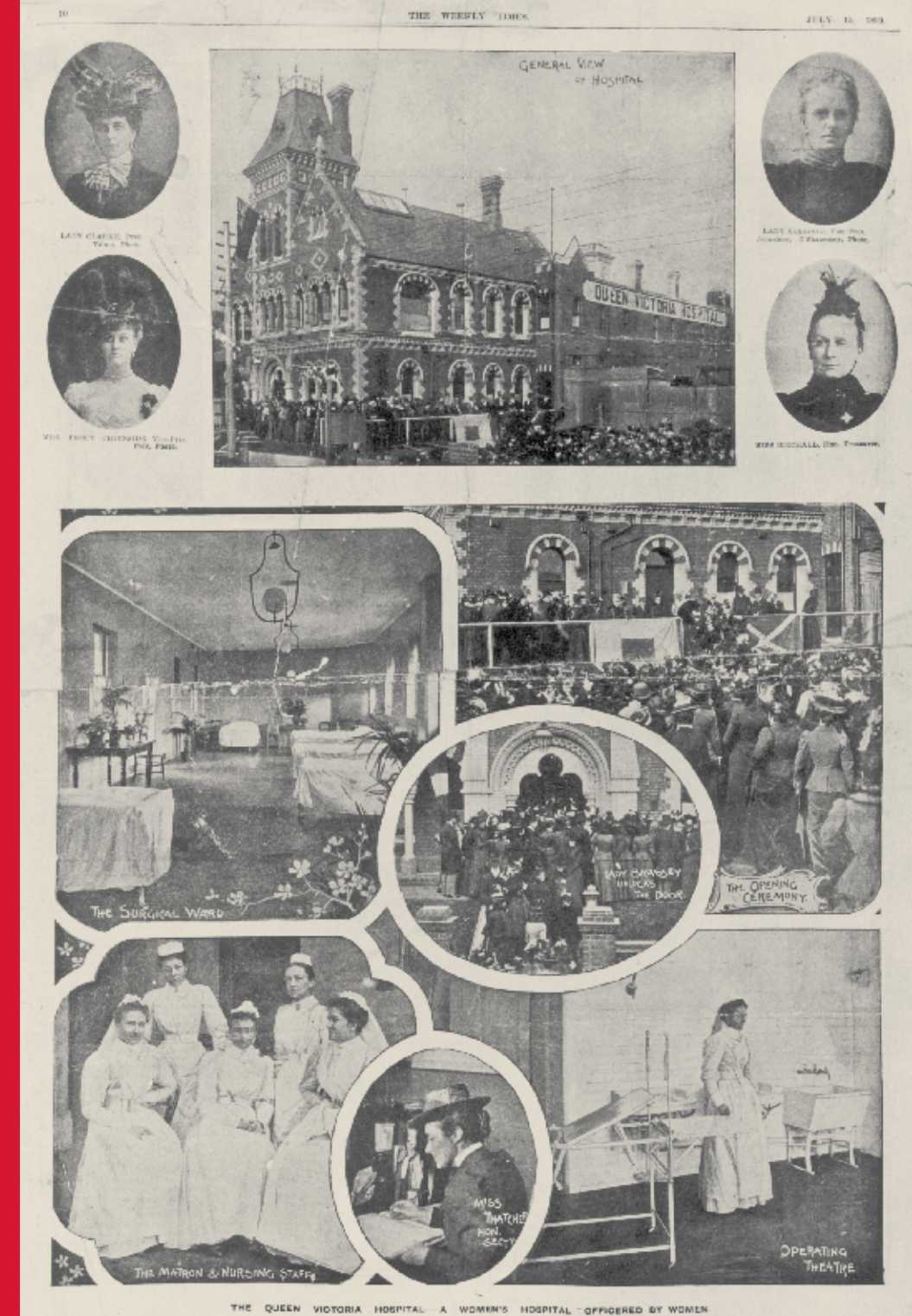
Her vision was realised with the opening of Melbourne's Queen Victoria Memorial Hospital (QVH) in 1896, by which time the founding meeting of the Victorian Medical Women's Society (VMWS) had taken place in her home. The QVH and VMWS were central to early women doctors developing professional networks and professional confidence, and Constance Stone's leadership in this is evident. Constance Stone Lane, which leads into what is now known as QV Melbourne, is a visible commemoration of her work.

In 1892, Dr Helen Sexton became the third woman to graduate in medicine from the University of Melbourne, and the first to be appointed an honorary position at a Melbourne hospital.⁸ Like other women doctors who offered their services at the outbreak of World War I and were rebuffed, Dr Sexton ignored officialdom and travelled to France to create her own hospital. With four friends, she funded and established a 25-bed military hospital at Auteuil in the 16th Arrondissement of Paris.⁹ The French rewarded her with the rank of Medecin Aide-Majeure 1st Classe.¹⁰ Following her work with wounded soldiers from the battlefields, Dr Sexton worked at the Val-de-Grace Military Hospital in central Paris, the main maxillofacial surgical centre in France.¹¹ Not a place for the faint-hearted.

The professional support provided by the VMWS, which Dr Sexton had helped found, was reinforced socially by the Lyceum Club, established in Melbourne in 1912 for women graduates. It was a regular meeting place and sanctuary for women doctors.¹² Dr Constance (Connie) Ellis had been a founding member of the Lyceum Club and the first woman to graduate with an MD (the early equivalent of PhD) from the University of Melbourne in 1904.¹³ Besides being an accomplished violinist, Dr Ellis was a brilliant pathologist and the first woman to lecture in pathology at the University of Melbourne.¹⁴ Through her membership of the Lyceum Club, the VMWS, the Victorian Women Students Medical Society and the Victorian Baby Health Centre Association (VBHCA), she supported female students and younger doctors joining the profession.

Born in the same year as Connie Ellis, Jane Stocks (Jean) Greig graduated with an MB, ChB in 1895 and became a leader in the provision of public health services to children in Victorian schools.¹⁵ The first woman to gain a Diploma of Public Health in Victoria, in 1910, she pioneered the school visiting dental scheme in her role as medical officer (MO) for the Victorian Education Department. Her status in public health was recognised in 1925 when the Commonwealth government appointed her a commissioner for the 1925 Royal Commission on Health, for which she travelled throughout Australia.¹⁶

The Queen Victoria Hospital opens its first building in 1897; the first real home of eight beds and an operating theatre—a humble beginning to a great enterprise, *The Weekly Times*, 13 July 1899, p. 10. Reproduced in Queen Victoria Hospital Annual Report 1969, courtesy of Monash Health Historical Collections Archive



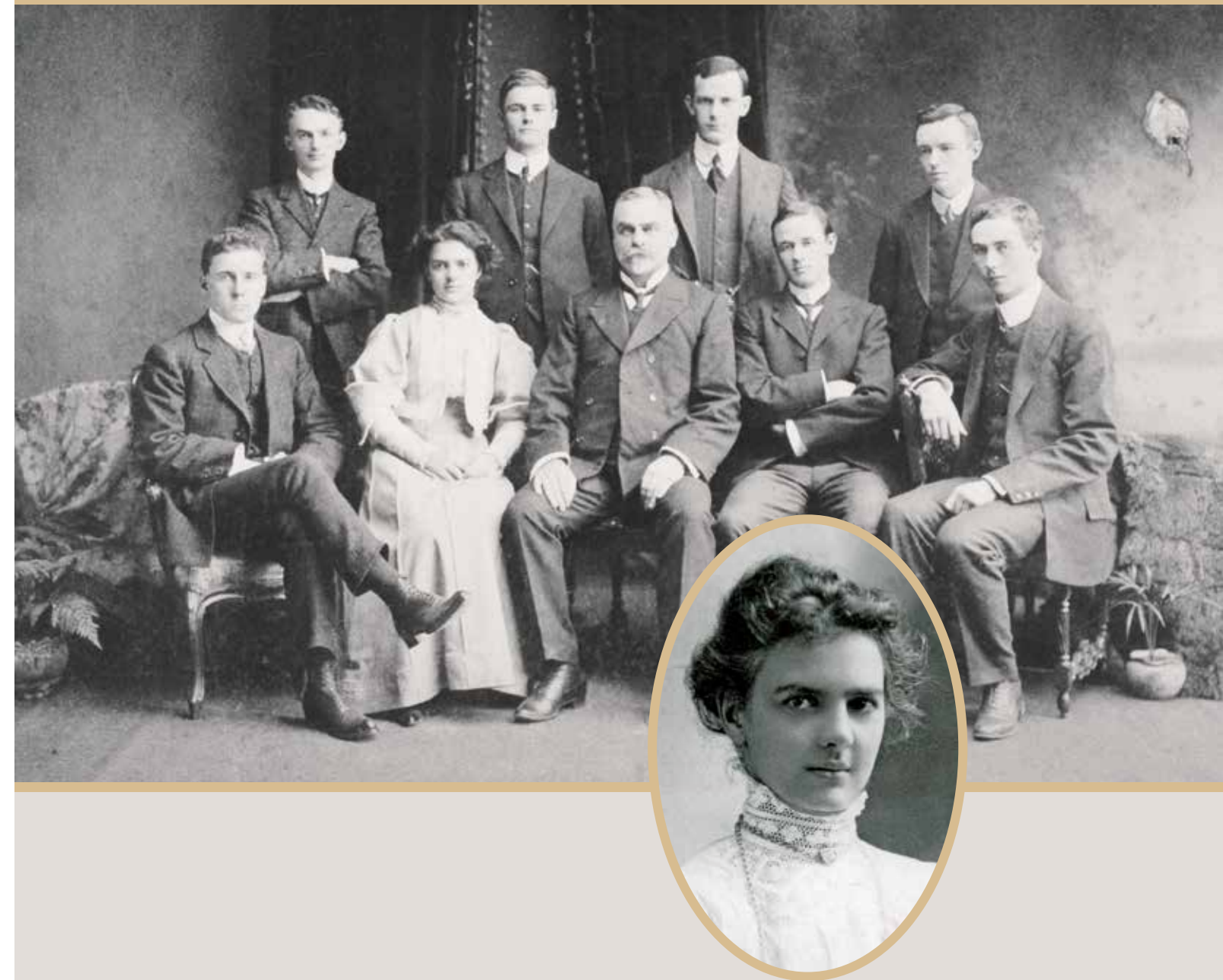
By 1929, she was the Education Department's chief medical officer. Dr Greig was a founding member of the QVH, the VMWS and the Lyceum Club, which had 145 members by 1915. She was a leader in every organisation that supported medical women and, additionally, president of the Victorian Women Graduates' Association.

Mary De Garis was dux of the Methodist Ladies College in 1898, won honours in her medical degree and was the second woman to be awarded a Doctorate of Medicine in 1907.¹⁷ In 1908–1909, Dr De Garis worked in the tiny grazing town of Muttaborra, in central Queensland's Barcaldine region, and from 1911 to 1915 in Tibbooburra, New South Wales' most isolated town, 335 kilometres north of Broken Hill. Her extraordinary determination, courage and sense of duty and adventure were demonstrated during World War I. She departed for Europe in June 1916, with her revolver packed. After the death of her fiancé in France, she joined the 4th Serbian unit of Dr Elsie Inglis' Scottish Women's Hospital, operating in Ostrovo, Macedonia, and in September 1917 she took over as chief medical officer from fellow Australian Dr Agnes Bennett, who was ill with malaria.¹⁸ Dr De Garis' was awarded the Serbian Order of St Sava, III Class, as well as British medals for her extraordinary contribution in a place of peril and medical urgency.

Like many women doctors in the first half of the 20th century, Gwen Wisewould found it exceptionally difficult to establish a financially viable medical practice in Melbourne.¹⁹ Women doctors were unconventional at the time, but Dr Wisewould was even more so. She owned a motorbike, drove a car, and wore trousers and a greatcoat for their practicality. Practicality was important when she faced tasks such as pushing a man up a hill in a wheelbarrow to get him to her car or acting as a veterinary surgeon.²⁰ Dr Wisewould established a practice in Trentham, 104 kilometres north-west of Melbourne, in September 1938. For the next 34 years she worked with 'townspeople, foundry-workers, timber-getters, farmers, graziers and itinerant potato diggers' throughout the region, and at any time day or night.²¹ Her funeral was attended by more than 1000 people, 'most of whom she [had] delivered and cared for' as the town's only doctor.²²

Cat. 26 **Mary De Garis (1881–1963) and other Melbourne Hospital residents**, 1905–1906; photograph; 31.5 × 36.8 cm; MHM04368

Cat. 41 **Mary De Garis (1881–1963)**, c.1911; photograph; 11.4 × 17.1 cm; on reverse: 'To Robbie [A]lexander/from Auntie Doc/April 1911/Dr. Mary C. De Garis'; MHM04369



Isabella Younger Ross OBE, Vera Scantlebury Brown OBE and Kate Campbell DBE led the foundation of Victoria’s free, non-denominational and universal child healthcare services, still provided today in maternal and child health centres throughout the state. Dr Younger Ross established Victoria’s first baby health centre in Richmond in 1917, in response to infant mortality rates. In the year the Great War began (1914), the deaths of 2835 babies were officially recorded in Victoria, and although the rate had been declining it remained as high as 18% in poorer suburbs.²³ Dr Greig and Dr Ellis worked with Dr Younger Ross to form the Victorian Baby Health Centres Association, which was operating 62 centres by 1926; 43 were in Melbourne and 19 in country Victoria.²⁴ This innovative approach to the health of women and children led to the appointment of Dr Vera Scantlebury Brown in that year as the pioneer director of the new Department of Infant Welfare, the first woman to head a government department in Victoria.²⁵ Dr Scantlebury Brown had served for two years as a surgeon at the Endell Street Military Hospital in London, founded by suffragists Dr (Colonel) Louisa Garrett Anderson and Dr (Lieutenant Colonel) Flora Murray. She experienced their medical and administrative leadership in running a 560-bed military hospital, with more than 180 staff, and developed her own inspirational directorship. She left behind almost 260 baby health centres statewide and four mobile units when she died, in 1946.²⁶

Dr Scantlebury Brown and Dr (Dame) Kate Campbell had studied together for their MDs in 1924, but neither had been able to break into the field of paediatrics through the conventional method of hospital consultancy and private practice. However, both made extraordinary contributions to the health of babies and children. In 1929, Dr Campbell was appointed the first lecturer in neonatal paediatrics at the University of Melbourne, a position she held until 1965, educating hundreds of medical students ‘in the intricate medicine of the newborn and their “vocabulary”, imitating their squeaks, snuffles and grimaces—all of which told her what the baby was feeling’.²⁷ In 1964, she shared the first Encyclopaedia Britannica Award for Medicine for her discovery of the relationship between blindness in premature babies and the overuse of oxygen.²⁸ Dr Campbell graduated in 1922 with Dr (Dame) Annie Jean Macnamara, who had won exhibitions in surgery and anatomy, as well as the Beaney Scholarship in Surgery in her final year. It is her lifelong work on polio, on polio viruses and treatment innovations for the disease in children, for which she is remembered. However, she applied her brilliant talent to a range of interests, including cerebral palsy, lead poisoning and the effective eradication of rabbits.²⁹

Cat. 47 Winifred McCubbin (1893–1967), **Vera Scantlebury Brown (1889–1946)**, 1943; oil on canvas; 49.0 × 37.0 cm. Gift of Catherine James Bassett, daughter of Vera Scantlebury Brown 2013, MHM2013.90



Women medical graduates from 1892 to 1922—the first 30 years since their admission to the University of Melbourne Medical School—understood that the achievement of professional equality with male doctors would be a long haul. Even the participation of at least six of these women as surgeons during World War I failed to improve their access to the wider professional prizes on offer in the 1920s as medical specialisation blossomed. However, this did not diminish the exceptional work of many early woman doctors, and as Dr Helen Sexton said: ‘Body, brain and spirit were put into our efforts ... the joy was as great as the work’.³⁰ Although the gender of Victoria’s early women doctors meant that their professional paths did not always lead in the direction they had hoped, they nevertheless explored and developed new professional authority and competencies. The joy they found in their work is patent in the extensive list of their achievements and their legacy—all is evidence of their strength of mind.

Dr Heather Sheard

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Cat. 157 Aileen Dent (1890–1979), **Dame Kate Campbell (1899–1986)**, c.1970; oil on canvas; 100.0 × 80.0 cm.
Royal Women’s Hospital Collection



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Cat. 54 **Dame Annie Jean Macnamara (1899–1968), Professor Paton and Dame Kate Isabel Campbell (1899–1986)**, c.1971; photograph; 12.2 × 16.8 cm; MHM02198



WHEN THE ORDINARY IS EXTRAORDINARY

Looking back at 125 years of women in medicine is a bit like looking at the Milky Way. Some stars stand out because they are brighter, younger or on their own. But if we gaze closer and deeper we can see that all the haziness in the background is due to individual stars, each of them a massive ball of energy. If we take the analogy further we can see the Seven Sisters — those first seven women described in this volume. We have to search to find this little group, and then peer for a few seconds to realise there are actually seven twinkling stars.

But what I find most fascinating about the galaxy is those stars that make up the broad milky sweep. We cannot catalogue all those stars, but as we look, more and more closely, we realise that each is extraordinary, even if it is not recognised by a name, an honour an award or a prize. Each of these stars is brilliant, and together they make a coruscating display.

Many of the doctors in this catalogue would not make a usual ‘A list’ of star graduates. They would probably miss out on the medals ‘for conspicuous service’. But the committee has made a point of selecting ‘for difference’, rather than ‘for fame’. Furthermore, many of the stellar doctors in this catalogue are but one among myriad other female doctors who have contributed in similar ways—they each represent a constellation of similar doctors.

Let me tell you about one of our stars. We’ll call her Dr Alpha Centauri. She is a seemingly ordinary GP in inner-suburban Melbourne. She seems to attract complex and challenging patients. When I was in specialist private practice she would sometimes refer me such patients. Her referrals were clearly written, concise but comprehensive, and caring. The voice that sang out from the referral letter was not only that of a highly professional doctor but also an advocate for, even a friend to, her patients. Dr Centauri would almost always call me ahead of time to give me a bit of social context, or sometimes to prepare me and apologise for what could be a lengthy consultation. Her patients adored her. I remember one woman who had been a jeweller, but now had a terrible neurologic condition and could hardly move her fingers. She told me she was nevertheless determined to make Dr C some earrings, even if it took her months. A few years ago one of my friends was diagnosed with advanced bowel cancer. Her usual GP was not the sort to take on pain management and palliative care, which my friend was going to need. I thought of Dr C; she was so busy, could I ask her to take on a dying woman? Someone who would need lots of time and home visits? I called Dr C and I could not detect even a moment’s hesitation. Yes, she’d be delighted. She cared for my friend unstintingly until her death, even giving my friend her home number and telling her to call day or night.

Norah Napaljarri Nelson, **Yiwarra Jukurrpa (The Milky Way Dreaming)**, 1990–91; acrylic on linen; 182.0 × 182.0 cm. Reproduced by kind permission from the Supreme Court of the Northern Territory

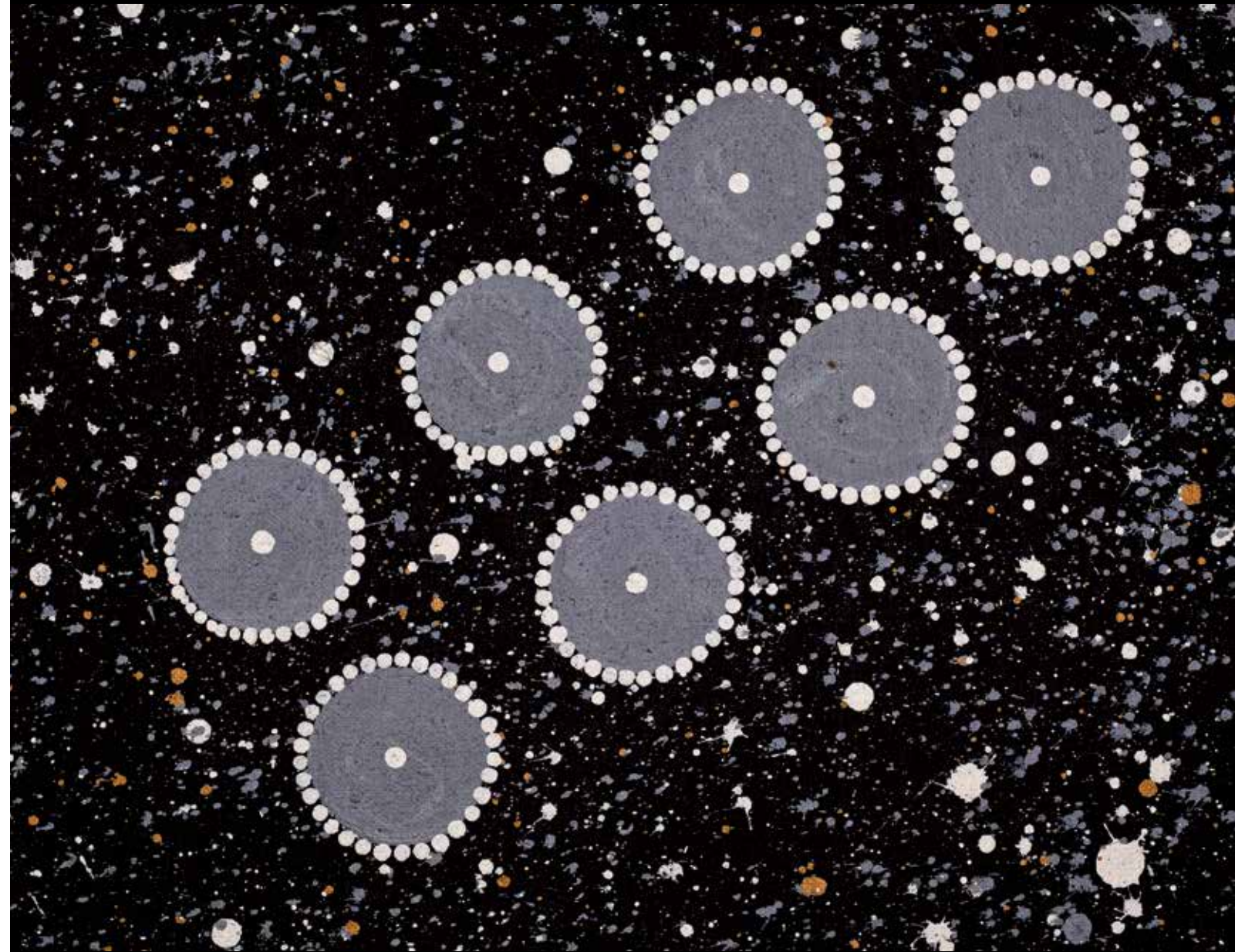
Scan the galaxy further and you'll see Dr Alpha Geminorum. She is another seemingly ordinary doctor. Dr G is a mother of three, and as well as being a busy GP, she is the police doctor in her provincial city. She often has to drop everything to attend a case of sexual abuse or to examine someone in custody. If the call comes during the afternoon, as it always seems to, there is no-one to pick up her kids from school. The police then help out by sending a divvy van to school to collect the kids. They love it (the kids and police). Dr G is kind, gentle, experienced and reassuring. After attending to an often distressing and depressing case, this ordinary doctor writes up her notes with extraordinary care, then drives home to get tea ready.

Here is Dr Omega Hercules, who works in an outer suburb. Dr H is one of only three female doctors in a large group practice, and has a huge waiting list of 'smears and tears'. She, too, is kind and caring. When she asks the question 'And how *are you?*' you might think she actually wants to know. In fact she does.

Some years ago I was asked to give a talk on women in medicine and I took with me some figures on the different and possibly unacknowledged ways in which women doctors contribute. I discovered that relatively more women than men worked in Indigenous health (compared with the percentage of females in the medical workforce). More women had worked in overseas volunteer capacities than should have been the case. I tried to ascertain what percentage of complaints to the medical board, and medical negligence actions, involved female doctors. It was almost impossible to get accurate figures, but available evidence confirmed what we already knew: females were markedly under-represented. Females were over-represented, however, in the lower earning specialties—general practice in particular, and grossly under-represented in some high-earning specialties such as orthopaedics and urology. My conclusions at that time were that women in medicine were punching far above their weight in terms of net contribution to—rather than extraction from—civil society.

In what other ways do these female stars differ from their male counterparts? Well, they do tend to aggregate—like the Seven Sisters. Women have a leadership style that is more inclusive, and less hierarchical. Women work well in group practices. Women often 'bring someone up'. So we may find a cluster of haematologists in one institution or a constellation of female gastroenterologists in another. It doesn't always work that way.

Norah Napaljarri Nelson, **Yiwarra Jukurrpa (The Milky Way Dreaming)**, 1990–91 (detail); acrylic on linen; 182.0 × 182.0 cm. Reproduced by kind permission from the Supreme Court of the Northern Territory



Sometimes the only way a certain woman has been able to claw her way to the top is by adopting traditional male characteristics—by autocratic behaviours and competitiveness. These women need to learn from female role models. To misquote Henry Higgins, in *My Fair Lady*, ‘Why can’t a woman be more like a woman?’.

An unspoken attribute that many female doctors have is the gift of children. Many years ago I was despairing after the birth of my first child: things would never be the same again; I felt completely out of control; I would never get back to work; and so on. My mother listened, and then remarked calmly: ‘Having children makes you a better person’. That is not to say that a doctor without children is any the less accomplished than one with. But I think my mother meant that the negative impact having a baby might have on one’s career is amply compensated by the tolerance one learns as a parent. Many of our pioneer doctors had no children and probably were able to contribute in a more sustained way, and keep pace with the men in their careers of research, or administration, or public health, or surgery, because of an uninterrupted career. In those days the only way for medical women to gain employment was to remain childless and unmarried, or to happen to be around during a world war. But the twists and turns in career paths related to child-bearing for a modern female graduate can help to mould her, and after a sometimes painful extrusion process she ends up as an even wiser and even more approachable doctor.

Back to our stargazing. See that dark patch in the sky? There were once three stars there. Each was the sort of doctor who gave a bit extra, who wasn’t scared of taking on patients with major social or psychiatric problems, who would act as an advocate, who would go the extra mile. Each of the three has been the victim of violent, angry patients. One of these, Dr Margaret Tobin, one of our Melbourne Medical School graduates, is described elsewhere in this catalogue. The other two were also Victorian female doctors. One was stabbed to death by an angry and probably psychotic patient, who was purportedly upset about medical decisions made in a large institution and decided to take his anger out on his kind referring GP. The other much-loved female GP was deliberately run over as she was riding home on her bike in the country—once again by an angry disturbed patient. She is now significantly disabled. These three stars are twinkling very faintly now, if at all.

Cat. 34 **Resident medical officers, Women’s Hospital**, c.1929–1930; photograph; 25.0 × 31.0 × 0.15 cm; MHM04309. Women medical officers, left to right: Bessie Pitcaithley Darling, Winifred Barbara Cameron, Barbara Grendon Wood, Vera Scantlebury, Agnes Donaldson



Betty P. Darling W. B. Cameron B. G. Wood
 Agnes Donaldson
 Hebblebury
 ? to Burrell

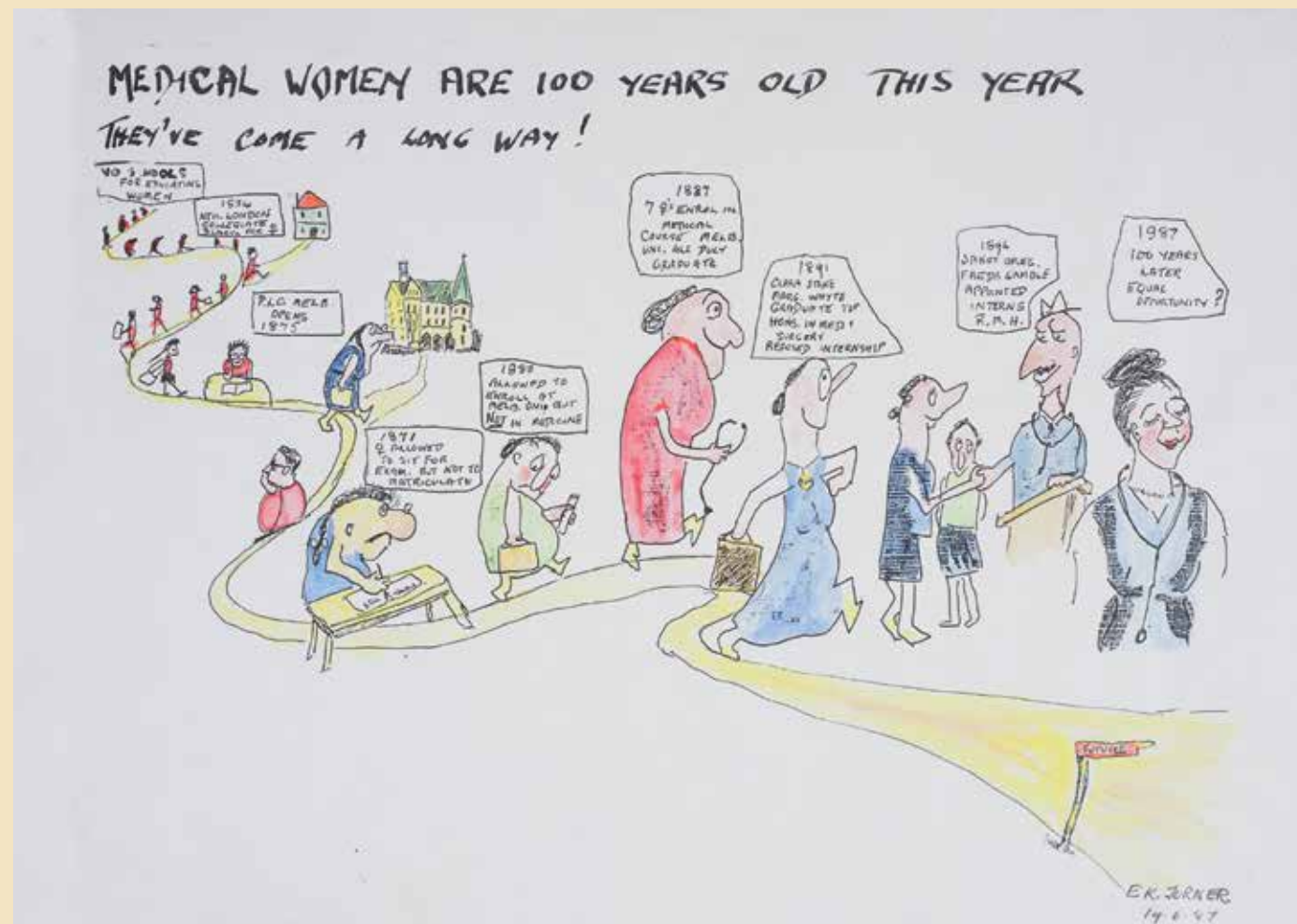
And now we come to Dr Melba Alumna. Dr Melba Alumna graduated somewhere between 1887 and 2013. She has thus been contributing to the global and local community for 125 years. She has worked in rural Victoria, in city practices, in developing countries and Indigenous communities. She is known for her caring, empathic, non-judgemental attitude, and for her wisdom, maturity and common sense. Melba is honest and has the highest ethical standards. She also has extraordinarily good communication skills. She is dedicated to her patients, and has been a staunch advocate for them. Melba has a family of her own—with 2.8 children—and this has given her even more tolerance and understanding. It has also helped her become very efficient. Unlike many of her male colleagues, she has been able to maintain a healthy life-work balance, and she brings that skill to her practice. She has taught medical students and trainee doctors with generosity and self-deprecating humour. She has also contributed extensively to her community, having served on innumerable boards and committees of local hospitals and schools; having been a member of service clubs and charitable bodies; and having raised awareness and funds for many causes. Melba has not received an Order of Australia, or major awards or prizes. She hasn't gained a PhD or MD, and is unknown in academic circles. Occasionally she reads of former friends from her medical school days who have gone on to become famous professors, and thinks: 'I could have done that, but I chose not to'. However, while she may not be a top researcher, Melba knows that her professionalism and clinical skills are due to the excellent education she had at Melbourne Medical School. She knows that this education has helped her make a real difference to people's lives. Even doctors who are unwell will seek out Melba, when they realise they need a 'good GP'. Melba is the consummate doctors' doctor.

Melba is up there. She is actually composed of over 4000 individual stars. A few stars become extinguished every year, but there are always more appearing. The brilliance of our great galaxy of ordinary stars is truly extraordinary.

Dr Katrina Watson
MBBS 1977

As Professor and Chair of General Practice and Associate Dean, Academic of the Faculty of Medicine, Dentistry and Health Sciences, Doris Young still draws great satisfaction from clinical practice and teaching, 2013; photograph. Courtesy of Advancement and Alumni, Faculty, Medicine, Dentistry and Health Sciences





MELBOURNE MEDICAL WOMEN 100 YEARS

FRIDAY 27 NOVEMBER 1987 - 4:00-6:00pm
SUNDERLAND THEATRE

MEDICAL WOMEN: THE CHALLENGES AHEAD

Opportunities for women doctors have increased greatly since the first seven female students were admitted 126 years ago to the University of Melbourne Medical School.

In many ways, Australia has had a progressive attitude to the status of women. Ours was one of the first countries in the world to allow women to vote and stand for Parliament. In contrast, women were only allowed to graduate with medical degrees from Oxford and Cambridge in 1920, and many US medical schools had quotas of 5% on female entry until 1941. Harvard did not admit women until 1945. However, even after graduation, the first female doctors from the Melbourne Medical School had a difficult time, and they established one of the three early hospitals 'for women, by women' here, at what became the Queen Vic.

We have seen enormous progress for women since our own days as medical students. In 1971, married women were first allowed to work full-time in the Victorian public service. Until then, they were paid less than men for the same work. In 1977, one of us was refused a home loan because she was not married. In 1978, the Victorian Equal Opportunity Board heard its first sex discrimination case, that of Deborah Wardley, who was rejected as a trainee pilot based on gender. Few hospital units, other than those at the Queen Vic, were led by a woman and there were almost no senior female academics in the Melbourne Faculty of Medicine, but there were still exceptional women, such as Priscilla Kincaid-Smith, director of the Department of Nephrology at the Royal Melbourne Hospital, who, in 1986, was elected the first female president of the Royal Australasian College of Physicians.

But now, in 2013, we have had a female chief medical officer of Australia, and, in Victoria we currently have a female chief medical officer, two medical women are CEOs of major metropolitan health services, and women have led two of our prestigious research institutes. Most of the professional medical colleges in Australia have had at least one female president, and in the past 15 years many women have been appointed to professorial level within our universities. Two of the 17 current deans of Australian medical schools are female, including Christina Mitchell, a Melbourne Medical School graduate.

However, health services and universities are complex structures and the influx of women into medical schools has not been accompanied by equality. Women are still under-represented at senior levels throughout the profession, as well as in surgery and academic medicine. There are still very few female heads of department or laboratories in our public hospitals, universities and research institutes. There seems to be no monitoring of these positions in Australia, but in 2008, in the UK, one in five medical schools did not have a female professor at all, only two of the 33 deans (6%) were female, while 11% of the clinical

Cat. 92 Elizabeth Kathleen Turner (1914-1999), '100 Years Ago ...' poster for women's centenary, 1987; ink, paint on paper; 45.5 x 65.0 cm; MHM02501

academics were women. The figures were similar in the US, and females are also less likely to be presidents of international special societies, editors of prestigious medical journals, invited speakers at conferences or medal winners. The ‘pipeline’ theory that female medical graduates would eventually filter up to leadership roles has not occurred. There is a strong case for using the talents of medical women, since they represent ‘half our genetic pool of intelligence, creativity and critical insights and experience’.¹ Women also often have a broader vision and different leadership styles.

The barriers that prevent women from reaching their full potential are sometimes described as the ‘glass ceiling’, or ‘sticky floor’. The lack of women in senior positions is not because women do not seek promotion. A study of 4578 full-time faculty at US universities found that women are just as ambitious as men, and that men and women have equal leadership aspirations and are equally engaged in their work.² Furthermore, women are equally qualified for leadership positions and are as good as men or more effective at leadership tasks.³ Nevertheless, medical women are promoted more slowly and later than men, and then spend less time at senior levels.⁴ The sticky floor is not limited to the difficulty that women have in obtaining senior appointments and research grants.⁵ It also extends to difficulty with accessing office and laboratory space, equipment, secretarial and administrative support, computers, statistical help, ‘soft money’ and other resources.⁶

Female doctors earn less than their male counterparts. In the US, there are gender differences for pay for mid-career hospital doctors, even after adjusting for differences in speciality, institutional characteristics, academic productivity, rank, working hours and other factors.⁷ Salaries are also less for female surgeons.⁸ The ‘Medicine in Australia: Balancing Employment and Life’ survey found that female GPs earned 54% less than their male colleagues.

Female researchers are awarded fewer grants than men. In 1997, the Swedish Medical Research Council demonstrated that women had to be 2.5 times more productive than men to be awarded the same ranking for grants.⁹ This represented three extra papers in a journal of the quality of *Nature* or *Science*, and was the first clear indication anywhere of discrimination in research funding. Similarly, female career-development-award recipients have a lower success rate for National Institute of Health grants compared with men.¹⁰

The results from the National Health and Medical Research Council project grants are also interesting.¹¹ Overall, in 2012, female chief investigators were less likely to obtain funding than males (243/1339, 18.1% versus 488/2231, 21.9%). They had lower funding rates for all categories of grants: basic science (21.2% versus 23.5%), clinical science (14.4% versus 19.2%), public health (15.7% versus 20.9%) and health services research

(22.5% versus 24.4%). Why does this happen? The Swedish study quoted reports that both women and men rated the quality of men’s work higher than that of women when they knew the gender of that person, but not otherwise.¹²

Generally women have fewer publications, fewer first author publications and fewer publications in high-ranking journals than men. Even where a woman submits a manuscript as first author, it is less likely to be accepted than if the author is male. Two recent surveys have found that women are invited disproportionately less often than men to write ‘News and Views’, ‘Perspectives in Science’ and ‘Insights’ in the prestigious journal *Nature*.¹³

Regrettably, sexual harassment continues. Recently in a Melbourne hospital, a female surgical trainee was sexually harassed by one of her consultants. She complained to her hospital HR department, which dismissed the complaint. She then took the matter to court, which found in her favour. The defence did what it could to discredit her surgical skills, and while the male surgeon is still employed, the woman has been unable to obtain a public hospital appointment.

What is holding women back? Medical women are almost always the primary carers for children and aged relatives, and have responsibility for household tasks. We have fewer role models and are less likely to have mentors or a network of powerful people to support us. We have different career routes with more fragmented paths than men. We are less mobile because of family responsibilities. We may be more sensitive to unjust treatment because we are more relationship-oriented.

It is timely in this anniversary publication to consider how we as medical women can actively bring about change. We must acknowledge that not all medical women want the same careers, but the barriers that limit our ability to reach our potential simply because we are women are unjust and must be removed. We can start by being more supportive towards other women. We can keep mental lists of capable women for when we are asked to nominate someone for a prestigious role. We can scan lists of speakers proposed for conferences and ensure they include appropriate numbers of excellent female speakers. We can lobby for more female leaders and ensure they are accorded the same status and resources as men. We can make sure that female leaders are formally mentored, trained in management and coached in survival skills. (The European Union maintains that to achieve cultural change, women must occupy 30% of leadership positions. This could be achieved if head of department positions were of limited duration, say five years, and rotated, enabling a diversity of leaders and benefitting both women and men.) We can be aware, as women, how our careers are different from those of men and how this might disadvantage us. We can

volunteer more often, and make an effort to network and collaborate more widely. We can continue to point out to journal editors and international specialist societies that women are under-represented as senior authors and office bearers.

We need to ensure there is monitoring of the inequalities women face, and data showing the gaps and progress. The Association of American Medical Colleges publishes data annually on gender distributions of each medical faculty by level, tenure status and department. UK hospitals and universities seeking research funds must demonstrate their commitment to the inclusion of women by having at least a silver Athena SWAN Charter of Women in Science award, which ‘recognises and celebrates good practice in recruiting, retaining and promoting women’. In Australia, how does medical women’s pay compare with men’s? Why is government funding awarded disproportionately to men? Do women in individual hospital and university departments get the same resources and support as men? Are women able to speak up about these inequalities or is this seen as ‘not fitting in’ or being troublemakers? There have been enormous advances in the status of medical women in Australia in the past 25 years. Our challenge for the future is to identify and monitor inequities, and to inspire each other, women and men, to change our workplace culture for the benefit of all.

Professor Judy Savage and Associate Professor Jill Sewell AM
MBBS 1976 and MBBS 1971

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New graduates Amy Fitzgerald and Danielle Pickett join the Melbourne Medical School alumni in 2012;
photograph. Courtesy of Advancement and Alumni, Faculty, Medicine, Dentistry and Health Sciences



CONSTANCE STONE

THE PIONEER LADY PHYSICIAN OF AUSTRALIA

Obituary, *Australian Town and Country Journal*, 7 January 1903, p. 38

Dr. Emma Constance Stone [1856–1902], the pioneer lady physician of Australia, died on December 29, at the residence of her sister, Miss Clara Stone, M.B., Alma-road, St. Kilda, Melbourne. Dr. Stone, who was the daughter of a London contractor, was born in Hobart 46 years ago, and at an early age turned her attention to the study of anatomy. Her taste for science was inherited, her father being, even at an advanced age, a student of biology. On the advice of the Rev. D. Egryn Jones, M.R.C.S., who subsequently became her husband, she decided to study medicine. The idea was almost unheard of in Australia, and Miss Stone, after careful inquiry, went to Philadelphia where she studied at the Women's Medical College, the eldest medical college for women in the world. She studied later at Toronto, where she graduated as M.D. in 1888. In the following year Dr. Stone was continuing her studies in London, and in 1890 she settled in Melbourne, and commenced the practice of her profession. Dr. Stone experienced a little of the old-world prejudice against women doctors, but it quickly disappeared; and her successful entry into the medical world was the means of encouraging several other young women, who came forward when the Melbourne University was thrown open to them. Dr. Stone, a few years later headed a band of earnest workers in the interests of poor women in the city, to whom their services were given free. The result of this movement was the establishment of the Queen Victoria Hospital. Dr. Stone was also deeply interested in the women's suffrage cause, and on several occasions spoke in public on its behalf. In recent years, however, her attention was exclusively devoted to her profession, in which her zeal and ability caused her to take a very high position.

Dr Constance Stone (1865–1902), c.1890; photograph. Southern Health Historic Archive Collection



MELBOURNE MEDICINE SCHOOL'S FIRST WOMEN STUDENTS

It is difficult today to imagine the challenges faced by women in becoming doctors in the 19th century. These first female medical students were admitted to the Melbourne Medical School in 1887, eight years after women were first admitted to the University of Melbourne and before women had the right to vote. They went on to change the course of history by setting up a hospital run by women for women—Queen Victoria Hospital for Women—and set a benchmark for women's healthcare in Victoria and indeed the world. They also founded the Victorian Medical Women's Society, an organisation that continues to facilitate the professional development of medical women and to advocate for the health of women and children. These were remarkable, tenacious and visionary women.

Seated in the photograph opposite are (left to right) Clara Stone, Margaret Whyte, Grace Vale and Elizabeth O'Hara; standing are Helen Sexton, Lilian Alexander and Annie O'Hara. Clara Stone went into private practice with her sister Constance Stone and joined her at the free dispensary, which saw more than 2000 women in the first three months. (Perhaps the last woman to be refused entry to study medicine at Melbourne, Constance studied overseas before becoming our first registered female medical doctor.)

Margaret Whyte was the first woman doctor to hold a post on the Women's Hospital staff, where she was appointed assistant resident officer in the midwifery department, having been refused a position as resident medical officer at the Melbourne Hospital because she was female. Grace Vale became a general practitioner in Ballarat, witnessing the first X-ray taken there. It is thought that Elizabeth and Annie O'Hara went into private practice.

Helen Sexton was the first woman elected a member of the honorary staff as a surgeon at the Women's Hospital. Soon after the outbreak of World War I, she took a small field hospital to France. This was a gift from Sexton and other women doctors, whose offers to serve had been refused by Australia's military authorities. Lilian Alexander, the first female student at Trinity College and a leading surgeon, also served overseas in World War I.

Dr Desiree Yap
MBBS 1986

References: *Victorian Honour Roll of Women 2007*, Melbourne: Office of Women's Policy, Department for Victorian Communities, 2007, pp. 22–23. University of Melbourne, 'Our History', <http://our-history.unimelb.edu.au/timeline>; accessed 25 August 2013.

Cat. 21 **First women students at the University of Melbourne School of Medicine**, 1887; photograph; 28.0 × 33.0 cm; MHM02037. Left to right, with year of graduation: Helen Sexton (1892), Clara Stone (1891), Lilian Alexander (1892), Margaret Whyte (1891), Grace Vale (1894), Annie O'Hara (1894), Elizabeth O'Hara (1893)



VICTORIAN MEDICAL WOMEN'S SOCIETY FORGING A COLLECTIVE VOICE FOR MEDICAL WOMEN

Dr Constance Stone, the first female doctor to practise in Australia, founded the Victorian Medical Women's Society on 22 March 1895. She was joined by Emily Mary Page Stone, Grace Clara Stone, Lilian Alexander, Margaret Whyte, Elizabeth O'Hara, Annie O'Hara, Grace Vale and Helen Sexton. These women challenged existing perceptions that women were unsuitable for learning and practising medicine, and held monthly meetings in the East Melbourne home of Dr Stone. The society remains active to this day and is one of the oldest organisations in the world for medical women.

The aims of the society were to improve the health of all people, but with a focus on women and children in Victoria; and to provide professional development opportunities, mentoring and support to other female medical students and doctors. The medical women discussed scientific approaches to social reform. Having already had to overcome their own challenges in order to be accepted into university and then gain medical employment, they here planted the seed for the creation of a hospital for women run by women. In 1899, Queen Victoria Hospital was established, funded by the women of Victoria through the state-run 'shilling fund'. All women were encouraged to donate a shilling towards the purchase of the building that was to house their hospital, in which female graduates were given the chance to work.

The Victorian Medical Women's Society established links with other state-run organisations, and the Australian Federation of Medical Women was formed in 1927. As early as 1919, the Medical Women's International Association came into being, founded at the first international congress of medical women held in New York. Medical women from around the globe were thus linked through the sister organisations. The collective voice of medical women continues to advocate for women and to raise the benchmark for health around the world through the United Nations.

Dr Magdalena Simonis
MBBS 1986

Cat. 22 **Victorian Medical Women's Association, Brownless Memorial Supplement**, 1898, p. 6; Raw Bros Photo-Process House; print on paper; 9.5 x 12.5 cm; MHM00992. Standing: Janet Greig, Constance Stone, Lilian Alexander; seated on chairs: Amy de Castilla, Emily Mary Page Stone, Helen Sexton, Clara Stone, Jean Greig; seated on steps: Alfreda Gamble, Bertha Main



THE QUEEN VICTORIA HOSPITAL

A HOSPITAL FOR WOMEN BY WOMEN

The entry of women into the Victorian medical profession threatened to disrupt the medical marketplace. Obstetrics was the most lucrative element of general practitioners' business, and women doctors might prove more popular with women patients. They might even compromise the esteem of the male medical profession.

The Women's Hospital proved the first battleground when, in 1892, the brilliant Dr Margaret Whyte was elected over Dr Grace Stone as assistant resident. Her tenure was uncontroversial and she soon resolved any official misgivings by marrying Dr Charles Martell and retiring from practice—at his insistence. Dr Helen Sexton acted as her locum.

The next female appointment came in 1895, when residents were unpaid because of the 1890s depression. Dr Amy de Castilla was appointed assistant in midwifery. Dr Helen Alexander, now 37 and impressive, was then appointed senior resident surgeon. The male honoraries supported the women but the ladies on the hospital board harassed Alexander, picking on her clothes and criticising her practice. When Dr Gertrude Halley applied for an assistantship, enough was enough. The hospital Ladies' Board refused her and adopted the policy: 'other things being equal, to recommend the male candidate'.

The women had no alternative but to open their own hospital, starting with a clinic in the hall of St David's Welsh Church, in 1896. Dr Constance Stone led the public campaign to purchase the old Governess' Institute in Mint Place. The Queen Victoria Hospital provided a full obstetric and gynaecological service and ran a venereal disease clinic for the city's prostitutes. It became distinctive for its woman-focused medical culture and feminist values, and was often preferred by the poor, as more 'respectable' than the Women's Hospital.

In 1931, it opened a private wing, the Jessie McPherson Community Hospital, and in 1946, it moved into premises in Lonsdale Street. In 1965, it became Monash University's teaching hospital for obstetrics, gynaecology and paediatrics, having evolved into a family hospital. Time had resolved the need for sexual segregation, but the legacy of the Queen Vic was the vital bridge for women to enter specialist women's medicine and surgical training when hospitals around Australia were discouraging women graduates.

Professor Janet McCalman

References: Emma Russell, *Bricks or Spirit? The Queen Victoria Hospital*, Melbourne, Melbourne: Australian Scholarly Publishing, 1997. Janet McCalman, *Sex and Suffering: Women's Health and a Women's Hospital, 1856–1996*, Melbourne: Melbourne University Press, 1998.

Queen Victoria Hospital, c.1910; photograph; 17.0 × 30.0 cm. Pictures Collection. State Library of Victoria, H99.87



ALFREDA GAMBLE AND JANET GREIG
TERMS MORE DIFFICULT THAN NEED BE
MBBS 1896, MBBS 1896

On graduation day 1891, in the hall at the University of Melbourne, Margaret Whyte and Clara Stone were given a rousing reception from the audience, which included members of the Australian women's movement. They were the first women graduates of Melbourne Medical School. Whyte's results in her examinations were outstanding and she qualified for a residency at the Melbourne Hospital. But the hospital board objected, raising the issue of her gender and its lack of suitable accommodation. After discussions with the board, Dr Whyte relinquished her claim to the residency; she later accepted one at the Women's Hospital.¹ Years later, medical student Mary De Garis was still so furious with Dr Whyte's acquiescence that she requested Whyte not be invited to the inaugural meeting of the Women Medical Student's Society in 1902.²

Change was inevitable. In 1896, Dr Alfreda Gamble (1871–1947) and Dr Janet Greig (1874–1950) were among the top graduates of the University of Melbourne, and they became the first two female resident medical officers appointed to the staff of the Melbourne Hospital. The appointments were not welcome by staff or patients, and articles in the press questioned the capacity of 'lady doctors' to deal with unpleasant injuries.³

Gamble and Greig experienced active resistance to their participation in the work of the hospital, but they carried on regardless, with persistence and determination. At the end of their residencies, the chairman of the hospital board acknowledged their experience with both congratulations for their contribution as well as an apology: '... [Dr Gamble and Dr Greig] had convinced all who opposed them of the great value of their work to the hospital, and he regretted more strongly than he could express the incidents which had made their term of residence far more difficult than it need have been ... He wished them happiness and success in the profession they had chosen.'⁴

Dr Jacqueline Healy

Curator, Medical History Museum

- 1 M. Hutton Neve, *This Mad Folly! The History of Australia's Pioneer Women Doctors*, Sydney: Library of Australian History, 1980, p. 34.
- 2 R.J.W. Selleck, *The Shop, The University of Melbourne 1850–1939*, Carlton, Vic.: Melbourne University Press, 2003, p. 280.
- 3 'The Melbourne Hospital. Ladies appointed as resident medical officers, Melbourne April 21', *South Australian Register* (Adelaide, SA: 1839–1900), Wednesday 22 April 1896, p. 5.
- 4 'Lady doctor in hospital, warm commendation, the difficulties placed in their path', *Daily News Perth*, 20 May 1897.

Left: **Dr Janet Greig (1874–1950)**, c.1900. South Health Historical Archive Collection

Right: **Dr Alfreda Gamble (1871–1947)**, c.1900. South Health Historical Archive Collection



MARY DE GARIS A PATRIOTIC FEMINIST MBBS 1905

Mary De Garis (1881–1963) graduated from the University of Melbourne in 1905, and was the second woman in Victoria to gain a Doctor of Medicine, in 1907. After travelling abroad in 1908–10, she was appointed to Tibbooburra Hospital. Here she met Colin Thomson, and they became engaged two weeks before the outbreak of World War I.

A patriotic feminist, Mary applied to the Australian Army, but was refused. Despite this, she and about 16 Australian women doctors travelled to Britain to offer their services. Denied enlistment, they worked in various voluntary and paid positions, often with Allied governments and organisations, such as the Scottish Women's Hospitals (SWH) and Red Cross. About 20 Australian women doctors were directly involved in the war.¹

In 1915, Colin Thomson enlisted in the Australian Imperial Forces. He was killed at Pozieres, France in August 1916, while Mary was working at Manor Hospital, London. In February 1917 she joined the SWH, as a surgeon and chief medical officer. This was a feminist organisation providing mobile medical units, staffed by women, to the Allied armies.

The SWH's America Unit was a 200-bed tent hospital under the Serbian Army near Mt Kalimantchan. The staff nursed Serbian, Russian, Greek, Italian, French and British servicemen. Conditions were tough and primitive, with malaria endemic and snow in winter, and the camp was occasionally bombed. The road was dangerous and ambulances—driven by the women—were often bogged. Patients required amputations and treatment for gangrene and pneumonia. Mary ran the camp efficiently, reporting to the administration in Edinburgh. The staff wrote that they felt very safe with her and when she made charcoal burners from kerosene tins they were impressed!

After her mother died in mid-1918, Mary resigned in October, but she contracted Spanish influenza in Rome. She did not arrive back in Melbourne until early 1919. Awarded the Order of Sava, Third Class from the Serbian government, she was not recognised by Australia.

Dr Ruth Lee

¹ Conversation with Heather Sheard; see also A. Mitchell, 'Medical women and the medical services of World War One', in *Festschrift for Kenneth Russell*, H. Attwood and G. Kenny (eds), Melbourne: Queensberry Hill, 1978, p. 97.

Mary Clementina De Garis (1881–1963) during World War I, c.1917; photograph; 15.5 × 12.0 cm. University of Melbourne Archives, UMA/I/1716

Cat. 66 **Mary De Garis's (1881–1963) clinical lectures in notebooks**, 1901–1904; ink on paper; 18.7 × 12.2 × 1.8 cm; MHM02030

Cat. 62 **Calling card of Miss De Garis, MD, BS (1881–1963)**, date unknown; print on paper; 5.0 × 7.3 cm; MHM03625



MARY GLOWREY

A RELIGIOUS VOCATION

MBBS 1910

Born to a devoutly Catholic family, Mary Glowrey's (1887–1957) extraordinary intellect was apparent from an early age. After completing first year arts at the University of Melbourne she began studying medicine. She joined the St Vincent's Hospital Clinical School in her fourth year, graduating with an MBBS in 1910.

Mary's first appointment, at Christchurch Hospital, made her the first woman resident doctor in New Zealand. In 1912, she was appointed to the Victorian Eye and Ear Hospital and St Vincent's Hospital in Melbourne, and in 1916 she became inaugural president of the Catholic Women's Social Guild. On reading a pamphlet on the work of Dr Agnes McLaren in India, Mary felt called to a religious vocation and resolved to become a medical missionary. First, she undertook further study, graduating with an MD from University of Melbourne in 1919.

Mary travelled to Guntur, southern India, in 1920 and entered the Dutch order of the Society of Jesus, Mary and Joseph (JMJ). She was granted permission to undertake her novitiate and to practise medicine as a nun, learning Dutch and Telugu during her training. Two years later, Sr Mary of the Sacred Heart, as Mary was then known, began to work as a sole practitioner. She was the first nun-doctor missionary.

St Joseph's Hospital Guntur was opened within a few years and here Mary cared for both inpatients and outpatients. By 1929, the outpatients numbered in excess of 40,000 a year. Dr Sr Mary and the JMJ sisters began training local women, and Mary also taught science in the high school. Guntur's JMJ provincial superior said Mary 'treated everyone with the same care ... Incurable patients found a special place in [her] heart ... She did all in her power to give them some relief.'

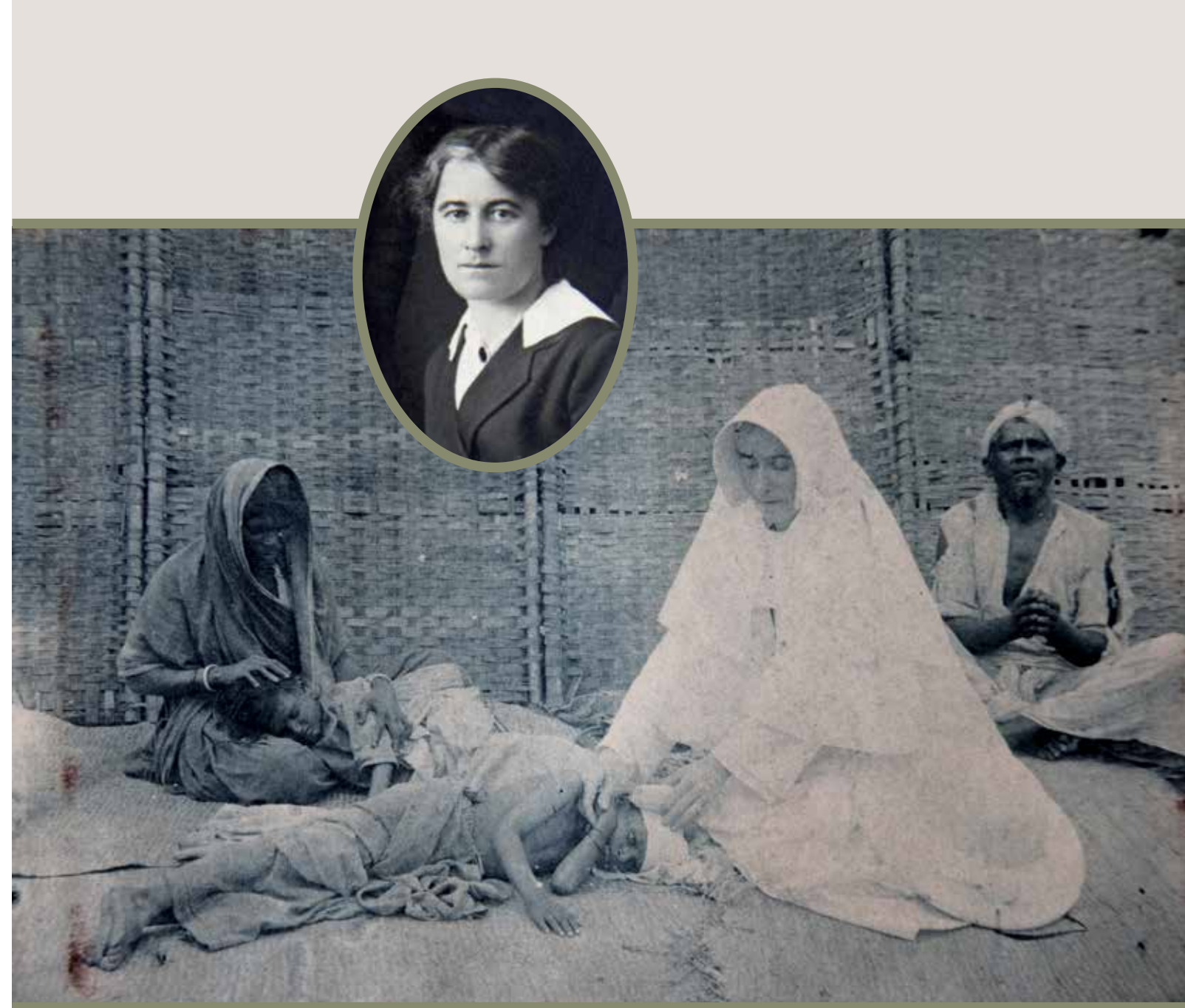
Dr Sr Mary also wrote papers against the rise of eugenics and euthanasia, and her vision extended to broader public health issues. In 1943, she founded the Catholic Health Association of India to improve health education in India and to teach Catholic principles in medical and nursing practice.

Sadly, Mary succumbed to cancer in May 1957. On 27 March 2013, she achieved the first of four official approvals on the path to sainthood.

Dr Sharon Wallace
MBBS 1985

Dr Mary Glowrey (1887–1957) on the day of her brother Edward's ordination, 28 May 1918; photograph (detail). The Glowrey Papers

Cat. 129 **Dr Sr Mary Glowrey (1887–1957) JMJ caring for a young boy with leprosy,** c.1926; photograph; 15.0 × 18 cm; from the album 'Groetem uit Indie', c.1920–1930. The Glowrey Papers



ELLEN BALAAM

A SURGICAL LEADER OF HER TIME

MBBS 1915

Ellen Maud Balaam (1892–1985) was born in North Carlton, Melbourne, the second of nine children. This required she be an industrious member of the household, performing domestic tasks in addition to her schoolwork, at which she excelled.

Ellen was awarded a junior scholarship and, with encouragement from her teachers, her parents permitted her to attend the continuation school (now known as Mac.Robertson Girls' High School). A worthy student, she here achieved a senior scholarship to the University of Melbourne, covering university entrance and a college scholarship for tutorials in her first year. In subsequent years, her tuition fees were largely self-funded.

In 1915, she graduated from medicine, the first woman from her continuation school to achieve this. She was appointed a resident at the Melbourne Hospital the following year, and soon after married classmate Thomas Alfred Wright. Circumstances did not enable them to travel for postgraduate study, so they set up individual private practices in Melbourne.

Ellen was the first woman to do general surgery in Melbourne. In 1922, in honour of her work, she performed the exhibition operation at the first international congress of the Medical Women's International Association in the United States. At its subsequent Melbourne congress she was appointed president, which she considered a great honour. Ellen was appointed honorary surgeon to inpatients at the Queen Victoria Hospital in 1924.

In 1927, Ellen and Alfred travelled overseas to further their surgical technique and to study hospital design. On her return, Ellen continued to care for patients from all social circumstances through both her public appointment and private practice until her retirement in 1953.

Ellen supported and fostered the education of young women. She was instrumental in evolving her *alma mater*, particularly supporting financial bursaries for girls with much potential but little financial means. An academic scholarship is awarded annually in a scientific endeavour at Mac.Robertson Girls High School in memory of Ellen, one of its most successful achievers.

She inspired members of her kin with her dedication to family, community and education; four other women from her family joined the medical profession. Her story is one of achievement and of inspiration to those around her.

Dr Catherine Poliness

MBBS 1989

Cat. 169 Left to right: **Ellen Balaam (1892–1985)**, **Annie Bennett (1891–1940)**, **Gweneth Wisewould (1884–1972)** and **Nurse at Women's Hospital postcard**, c.1915; print on paper; 14.0×9.0 cm. Collection of Lois Parr



ANNIE BENNETT
A LIFE GIVEN TO COMMUNITY MEDICINE
MBBS 1915

Dr Annie Lister Bennett (1891–1940) devoted her life to medicine and the community of the Goulburn Valley in Victoria. She forged a successful career as a rural GP proceduralist (surgical), and was among the first generation of female graduates to do so.

Annie Bennett was born and educated in Melbourne. She commenced medical school at the University of Melbourne in 1910, being one of only five female students in her year. She completed residency years at the old Melbourne Hospital and the Children’s Hospital, before making the unusual decision, in 1919, to undertake a locum position for her mother’s cousin, Dr J.W. Florance, in Mooroopna, in country Victoria.¹

Her first impressions of rural life were less than favourable. She arrived in a storm of red dust and was said to have wondered how anyone could stay in such a place for any length of time.² She soon became aware of the demographic of her colleagues in the Goulburn Valley: ‘All the doctors were old men, except the Shepparton men who, at the time, were more or less of my own age’.³

Despite this less-than-auspicious beginning, Annie Bennett stayed in the Goulburn Valley. She worked in various practices in the region and became renowned for treating all who required medical treatment. Such was her commitment to community medicine that this included collecting patients in her own car if need be.

Annie Bennett was a medical officer of the Mooroopna Hospital from 1920, and from 1928 held the position of honorary surgeon until her death in 1940.⁴ She owned St Luke’s Private Hospital with Dr Florance; the Mooroopna Medical Centre, which she established in 1928, continues to serve the community today.⁵

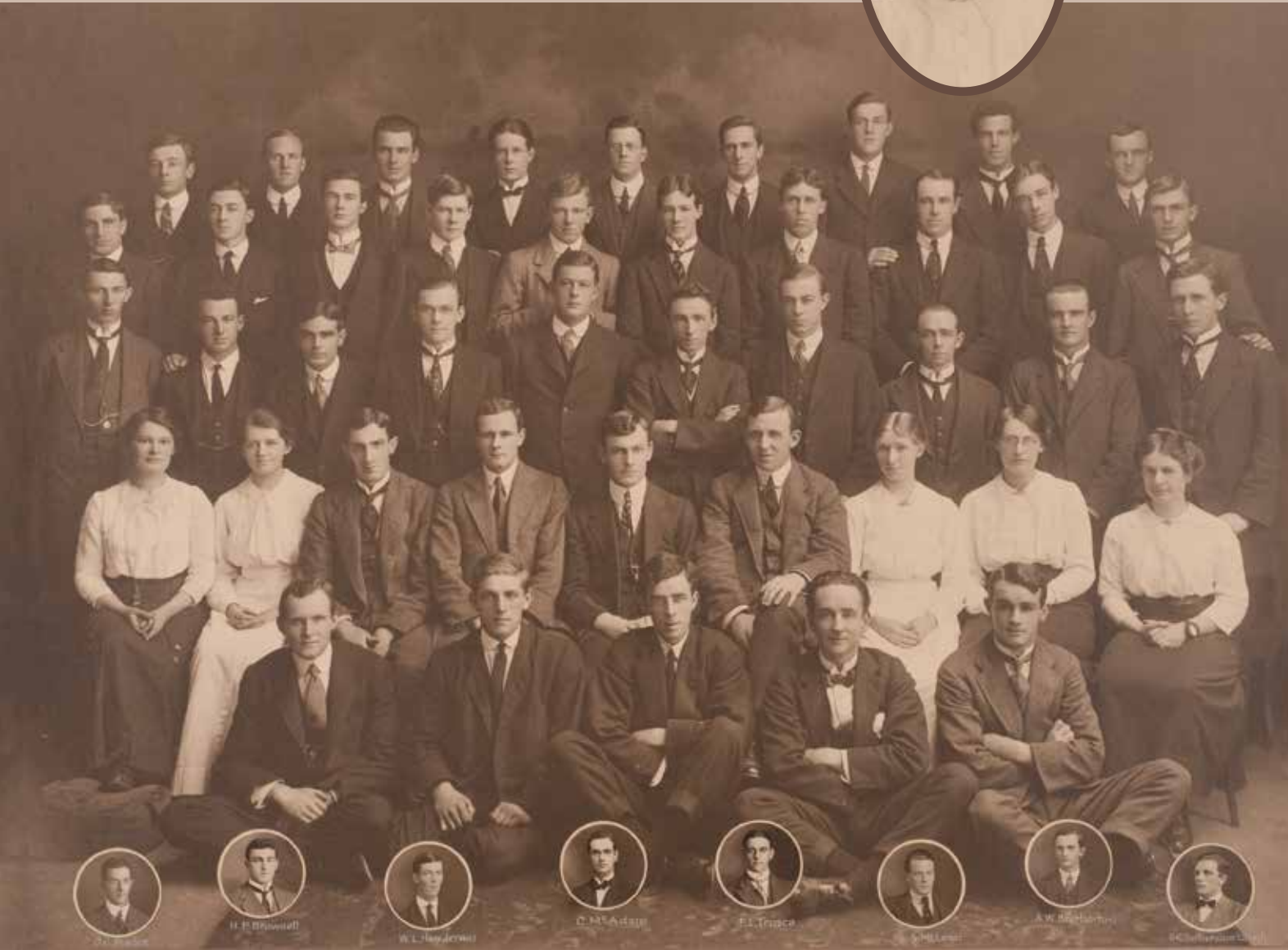
As a city-born female rural GP, I recognise the extraordinary courage in Annie Bennett’s decision to embark on this kind of career 100 years ago. Her contribution to medicine in her community was immense, despite her sudden and premature death at the age of 49. ‘Dr Bennett came to be greatly loved by the people of Mooroopna and she continued to serve them until her death in 1940.’⁶

Dr Carolyn De Poi
MBBS 1988

1 From text on Dr Annie Lister Bennett, held at Mooroopna Museum.
2 *ibid.*
3 *ibid.*
4 G. Nice, *Hospitals Are People: The History of the Mooroopna and District Base Hospital*, Melbourne: The Hawthorn Press, 1976, p. 208.
5 www.mmc.org.au/history; accessed 8 August 2013.
6 Nice, *Hospitals Are People*, p. 176.

Cat. 8 **Fifth Year Medical Students 1914**, 1914; photograph; 53.6×60.9 cm; MHM00495. Women medical students, left to right: Gweneth Wisewould, Mary Lane, Ellen Maud Balaam, **Annie Lister Bennett (1891–1940)**, Ellice Jean Davies

5TH YEAR MEDICAL STUDENTS
MELBOURNE UNIVERSITY 1914



DAME MARY HERRING DBE

SELFLESS DEVOTION TO THE SERVICE OF OTHERS

MBBS 1921

Mary Ranken Herring (nee Lyle) (1895–1981) was born in Melbourne on 31 August 1895 and died at 86 years of age. She was born into a privileged and gifted family, and was educated at Toorak College, where she excelled scholastically and in sports. She studied medicine at the University of Melbourne, graduating with an MBBS in 1921. The following year she married barrister and military gentleman Edmund Herring, with whom she had three daughters.

Mary Herring was both a physician and a pioneer in the advancement of women's health. In 1926, she became medical officer for the first non-hospital prenatal clinic at the Prahran Health Centre. The same year, Dr Vera Scantlebury Brown (also educated at Toorak College) became director of the first Infant Welfare section of the Victorian Health Department. Mary Herring later became one of the founders of Women's Welfare and Family Planning Clinics. In 1940, she established a prenatal clinic in South Melbourne. During this period of her career, she experienced both encouragement and opposition from colleagues and others.

In 1931, she formed an enduring role with the Melbourne District Nursing Society, the members of which supported the work of Drs Mary Herring, Victor Wallace and George Simpson in their efforts to provide prenatal and family planning clinics to improve women's welfare. She devoted her time overseas, in 1933, to studying conditions and management of women's health issues, and on her return tried to introduce what she had seen as 'best practice' in comparable health services.

Mary became a true community social worker, and was patron and supporter of many societies and organisations of medical, social and sports groups. From 1945 to 1972, she combined her career with a vice-regal role, as wife of Sir Edmund (Ned) Herring, Lieutenant-Governor of Victoria, Chief Justice of Victoria. In 1981, Mary predeceased Ned by ten weeks.

In 1949, the *Argus* described Mary Herring as having 'selfless devotion to the service of others' and as being 'calm, kindly, clear-minded and intensely logical'; in photographs, her face portrays a woman of both thoughtfulness and concern. Like many women, she successfully combined her career with a devoted family life.

Dr Kathleen Hayes

MBBS 1958

References: Kate Campbell, 'Scantlebury Brown, Vera (1889–1946)', *Australian Dictionary of Biography*, vol. 11, Carlton, Vic.: Melbourne University Press, 1988. Cheryl Crockett, 'Herring, Dame Mary Ranken (1895–1981)', *Australian Dictionary of Biography*, vol. 17, Carlton, Vic.: Melbourne University Press, 2007. Della Hilton, *Dr Mary: The Story of Dame Mary Herring*, DBE, CBE, Caulfield, Vic.: D.H. Media, 1989.

Dame Mary Herring (1895–1981), c.1970; photograph; 14.5×9.5 cm. Stonnington History Centre, PH 12275



DAME ANNIE JEAN MACNAMARA DBE

A DETERMINED CLINICIAN

MBBS 1922

Annie Jean Macnamara (1899–1968) was a dynamic, determined and outspoken clinician, who successfully combined research, a busy clinical practice and a strong commitment to her patients. This was widely recognised, and she was awarded Dame Commander of the Order of the British Empire (DBE) in 1935 for her outstanding contribution to the care of polio sufferers.

Born in Beechworth, Jean was the second daughter of John and Annie Macnamara. As a teenager she secured a scholarship to the Presbyterian Ladies' College, and following this she entered the University of Melbourne, aged 17. Graduating in 1922 with an MBBS and the Beaney scholarship in surgery, she began her internship at Melbourne Hospital.

It was after gaining a residency at the Children's Hospital, one of the first women to do so, that she first encountered the devastating consequences of polio. She dedicated the majority of her career to the treatment and rehabilitation of those suffering children.

One of her greatest achievements was the discovery, with Macfarlane Burnet, that there was more than one strain of the polio virus. This was crucial for the eventual development of an effective vaccine for polio. A fellowship in orthopaedics in the United States honed her skills in physical treatment, and she adapted splints and devices to immobilise, protect and subsequently allow rehabilitation of paralysed limbs. She is also credited with ordering Australia's first artificial respirator during her time overseas.

Jean's achievements went beyond medicine. Her determination and persistence is evident in the role she played in the success of myxoma in decimating the rabbit population responsible for destroying much of the farming land. Jean heard of the virus during her travels and encouraged Australian authorities to investigate it further. Initial trials had been disappointing and the project was close to being abandoned. However, Jean was instrumental in a public campaign to force continued work on the virus, leading to the eventual success of the program.

Jean married Joseph Connor, a dermatologist, in 1934 and together they had two daughters. She passed away in 1968. Since her passing she has been remembered on the Australian 45-cent stamp with Frank Macfarlane Burnet.

Dr Katherine Bond
MBBS 2005

References: Ann G. Smith, 'Dame Annie Jean Macnamara', *Australian Dictionary of Biography*, vol. 10, Carlton, Vic.: Melbourne University Press, 1986. *Encyclopaedia of Australian Science. Australasian Science*, vol. 13, no. 4, summer 1993, p. 64.

Cat. 60 **Dame Annie Jean Macnamara (1899–1968)**, c.1960; photograph; 24 × 14 cm; MHM01042



MARGARET SMALLWOOD OBE

A FIERCE ADVOCATE FOR CHILDREN

MBBS 1922

The lives and the work of male doctors interned in prison camps during the World War II have been well documented—indeed, some are heroes in the public consciousness. Margaret Smallwood (1898–1968) holds no such place, but spent nearly four years caring for women and children internees, first in Changi prison and then the Sime Road Internment Camp, in Singapore.

Before the war, Margaret (Maggie) Hewitson worked with the Malayan Medical Service, her father a mining engineer in Malaya. There, she met and married Briton Ian Smallwood, with whom she had two sons. Still with the service when war broke out, Margaret sent the boys to family in Sydney, while she and Ian remained.

When the Japanese invaded Malaya she was working in Johore. Evacuated to Singapore, Margaret treated sick and wounded children in Singapore General Hospital during the invasion. After the fall of Singapore Ian was sent to Thailand and Margaret was interned in Changi; she and other internees were later sent to Sime Road Internment Camp. There, she, Dr Jeanette Robinson and three nurses treated, cared for and advocated for the health and rights of the camp's women and children.

Reports characterise Margaret as fiercely determined to fight for the health of the internees, particularly the children. Every morning she and other interned women doctors conducted a clinic for the children, providing the care of the 'best woman doctors in Malaya'.

After the war, the Smallwoods eventually settled in Melbourne, where Margaret continued to advocate and care for women and children, working in maternal and child welfare in the slums of South Melbourne. In 1948, she warned municipal councils about 'unhappy living conditions' causing a recent big decrease 'in the number of mothers naturally feeding their babies'. In 1949, she noted the great need for more preschool centres.

Margaret Smallwood was awarded an OBE in 1947 for her actions during the war, though some might argue her work remains comparatively unheralded—perhaps due to her career in the 'unheroic' area of maternal and child health.

Dr Catherine Scarff

MBBS 1996

References: 'Civilian internees had bitter times in Jap hands', *Mercury*, 10 September 1945, p. 8. 'The life of a child in a Jap prison', *Townsville Daily Bulletin*, 22 September 1945, p. 5. 'OBE to woman POW', *Argus*, 21 October 1947, p. 3. 'More pre-school centres needed in South Melbourne', *Argus*, 19 August 1949, p. 6. "'Must Guard" Self-Reliance', *Daily News* (Perth), 3 July 1948, p. 5. 'Children interned at Changi saved by Women Doctors', *Morning Bulletin* (Rockhampton), 29 September 1945.

Cat. 172 **Margaret Hewitson (1898–1968)**, 1922; photograph; 18.0 × 12.0 cm. Collection of Richard Smallwood

Cat. 173 **Margaret Smallwood (nee Hewitson)**, c.1960; photograph; 21.0 × 15.0 cm. Collection of Richard Smallwood



DAME KATE CAMPBELL DBE OUTSTANDING CHILDREN'S DOCTOR AND CLINICAL SCIENTIST MBBS 1922

Dr Kate Isabel Campbell (1899–1986) was an outstanding children's doctor and clinical scientist. She graduated from the University of Melbourne in 1922, to become a resident at the Melbourne Hospital, and in 1923, she and Dr Annie Jean Macnamara became residents at the Children's Hospital.

Later accepting a residency at the Women's Hospital, she also studied for her doctorate of medicine, was appointed as honorary paediatrician to the Queen Victoria Hospital and continued her work with newborns. Her paediatric skills included meticulous clinical observation; detailed assessment of newborn behaviour, reflexes and neurological function; development of neonatal intensive care; and medical advances in the treatment of premature and newborn babies. She contributed to the development of exchange blood transfusions, used homemade humidicribs and hot-water bottles, and emphasised the importance of detailed care of the newborn. Her outstanding research contribution was the discovery that excessive oxygen caused retrolental fibroplasia in premature babies.

As well as her clinical interest, Kate was concerned with babies as individuals and with maternal-baby bonding. Her interests extended to the community, enjoying a long association with the Victorian Baby Health Centres Association—as medical officer from 1927 to 1965—and teaching infant-welfare nurses. With Dr Vera Scantlebury Brown, she co-authored the definitive textbook for infant-welfare nurses used from 1947 to 1972.

A specialty newborn nurse and later an infant-welfare nurse, my aunt was taught by Kate Campbell, and she confirmed her reputation for working closely with nurses as colleagues, rather than underlings. Kate also taught neonatal paediatrics at the University of Melbourne from 1929 to 1965.

Kate Campbell's contribution to medicine was honoured variously, including through an OBE, a DBE, the Britannica–Australia award for medicine, honorary fellow of the Royal College of Obstetricians and Gynaecologists, and as the first woman president of the Australian Paediatric Association. Her reputation and legacy are apparent to any paediatric trainee, and as a dedicated and somewhat eccentric polymath of medicine, she demonstrated the capacity to link bedside medicine, teaching, clinical research, service development, population health, and patient- and family-centred care.

She remains an inspiring example to all doctors, but especially to women doctors and paediatricians.

Associate Professor Jill Sewell AM
MBBS 1971

Cat. 58 **Dr Kate Campbell (1899–1986) examining a premature baby in isolette**, 1974; photograph; 23.8 × 17.5 cm.
Gift of Winifred Crick; MHM02260



JEAN LITTLEJOHN CBE A PIONEER IN MEDICINE MBBS 1922

Jean Littlejohn (1899–1990) was born on 3 April 1899 in Nelson, New Zealand to Scottish-born parents. She came to Australia in 1904, when her father was appointed principal at Scotch College, Melbourne. Jean was educated at the Presbyterian Ladies College, where she was something of a champion tennis player, before studying medicine at the University of Melbourne.

In 1922, her year of graduation, she was appointed to the Victorian Eye and Ear Hospital (VEEH), where she earned £150 per annum working in ear, nose and throat (ENT) and ophthalmology, and giving anaesthetics. Interested in ENT, she developed her technique for adenotonsillectomy, which was a one- to two-minute procedure using guillotine and curette.¹ One week, she apparently operated on 28 mastoids!

Dr Jean Littlejohn became medical superintendant at VEEH in 1923. She then went into private practice, although she also remained at the hospital, where she was appointed honorary surgeon in 1933, becoming the first woman to achieve this status. She was also appointed to Queen Victoria Hospital. She was awarded the Diploma in Otorhinolaryngology in 1933 and was admitted as a fellow of the Royal Australasian College of Surgeons in 1935. In 1947, she became the first woman to be elected to the Faculty of Medicine at the University of Melbourne.

Jean Littlejohn was dedicated to teaching and research, with an interest in infant deafness and pioneering the use of hearing aids for babies. When the Deafness Investigation and Research Unit was founded at VEEH in 1957 it was named after her, and, interestingly, here the cochlear implant was later developed.

Jean Littlejohn was also involved in governance: from 1950 to 1952 as chair of medical staff at VEEH and for 13 years as a member of its committee of management, and as president of ASOHNS (the Australian Society of Otolaryngology, Head and Neck Surgery) in 1958–59. She was awarded the OBE and CBE, and retired from clinical medicine in 1978, at the age of 79.

Jean Littlejohn was a pioneer in medicine—particularly as a female surgeon—but she was also a well-rounded person, with an active social and cultural life.

Dr Anne Cass
MBBS 1996

¹ This comes first-hand from my anaesthetist father, who worked with Jean Littlejohn much later.

Cat. 43 **Dr Jean Littlejohn (1899–1990)**, c.1930; photograph; 18.9 × 14.5 cm; MHM04589



LUCY BRYCE CBE

VISION, GENEROSITY AND HUMILITY

MBBS 1922

Lucy Meredith Bryce (1897–1968) played two important roles in the history of medicine and the University of Melbourne. She established Australia's first blood transfusion service, the Red Cross Blood Transfusion Service, and she was the first woman elected to the university's council, in 1947.

Born in Lindfield, NSW, Lucy Bryce entered medicine through her love of science and the need for doctors during and after World War I. She found inspiration serving others during the post-war era and was among the most influential women in medicine, forging new ground through responding to civilian needs.

Graduating from the University of Melbourne in 1922, Dr Bryce commenced a research career at the Walter and Eliza Hall Institute of Medical Research and the Lister Institute in London. In 1928, she was appointed the first full-time bacteriologist and clinical pathologist at the Melbourne Hospital. Despite resigning from this role in 1934 to work privately as a clinical pathologist, she continued her research with the Commonwealth Serum Laboratories (CSL), the Hall Institute and Queen Victoria Hospital.

Dr Bryce's most noted achievement in medicine occurred in 1929, when she established the Red Cross Blood Transfusion Service, which operated from the Melbourne Hospital from 1929 to 1959. She played a key role in developing the transfusion service and was involved in the initial production of serum in Australia at the CSL. Under her leadership, this service was responsible for saving thousands of lives. The story of the transfusion service is chronicled in her book, *An Abiding Gladness* (1965).

In 1954, Dr Bryce retired as honorary director of the Blood Transfusion Service and was appointed an honorary life member of the Red Cross.

Dr Bryce had an uncanny ability to make things happen. Ella Macknight, in the *Donor News*, said: 'She was a brilliant organiser with an amazing ability to work out plans down to the smallest detail. She had vision, generosity and humility' (September 1968).

While her awards and distinctions are many—CBE, MBBS, BSc Melb, FRACP, MCPA—Dr Bryce is remembered for her ability to inspire others, her professional dedication and her service to the community.

Deputy Vice-Chancellor Sue Elliott
MBBS 1982



Cat. 36 **Mr J. Harrison and Mr A. Hall, the first recipients of badges for 50 blood donations, with Dr Lucy Bryce (1897–1968) and Nurse Gleeson**, 1949; photograph; 13.1 × 17.5 cm; MHM02916

DAME ELLA MACKNIGHT DBE

A CAREER MOST OUTSTANDING

MBBS 1928

Ella Annie Nobel Macknight (1904–1997) was clearly destined for a high-achieving career. One of five women to graduate with an MBBS in 1928, her skill, vision and leadership is apparent in her many appointments, including membership of the Royal College of Obstetrics and Gynaecology and specialist fellowships in DGO, FRCOG, FAMA and FRACOG. Closely associated with the Queen Victoria Hospital for Women from 1935 to 1977, she served as board president for six years, and she became the first woman president of the council of the Royal College.

Dr Macknight had a long association with the Red Cross Blood Transfusion Service, serving on its Victorian division committee; she was chair and member of its executive from 1965 to 1969. During World War II she worked 12-hour days and on weekends for its blood bank.

She established the Oncology Department of the Queen Victoria Hospital and served with the Victorian Gynaecological Cytology Service and the Victorian Anti-Cancer Council. Her appointment as foundation dean of the Monash Medical School and her Honorary Doctorate of Medicine confirm her leadership for women in medicine.

Medicine ‘was a rough road for many female practitioners’,¹ but Dr Macknight was highly dedicated to her work, and there is no doubt about her surgical and medical skills or her compassion. She was appointed Dame Commander of the Order of the British Empire for services to medicine (1969) and in 1998 a scholarship was established in her name for her contributions to obstetrics and gynaecology.

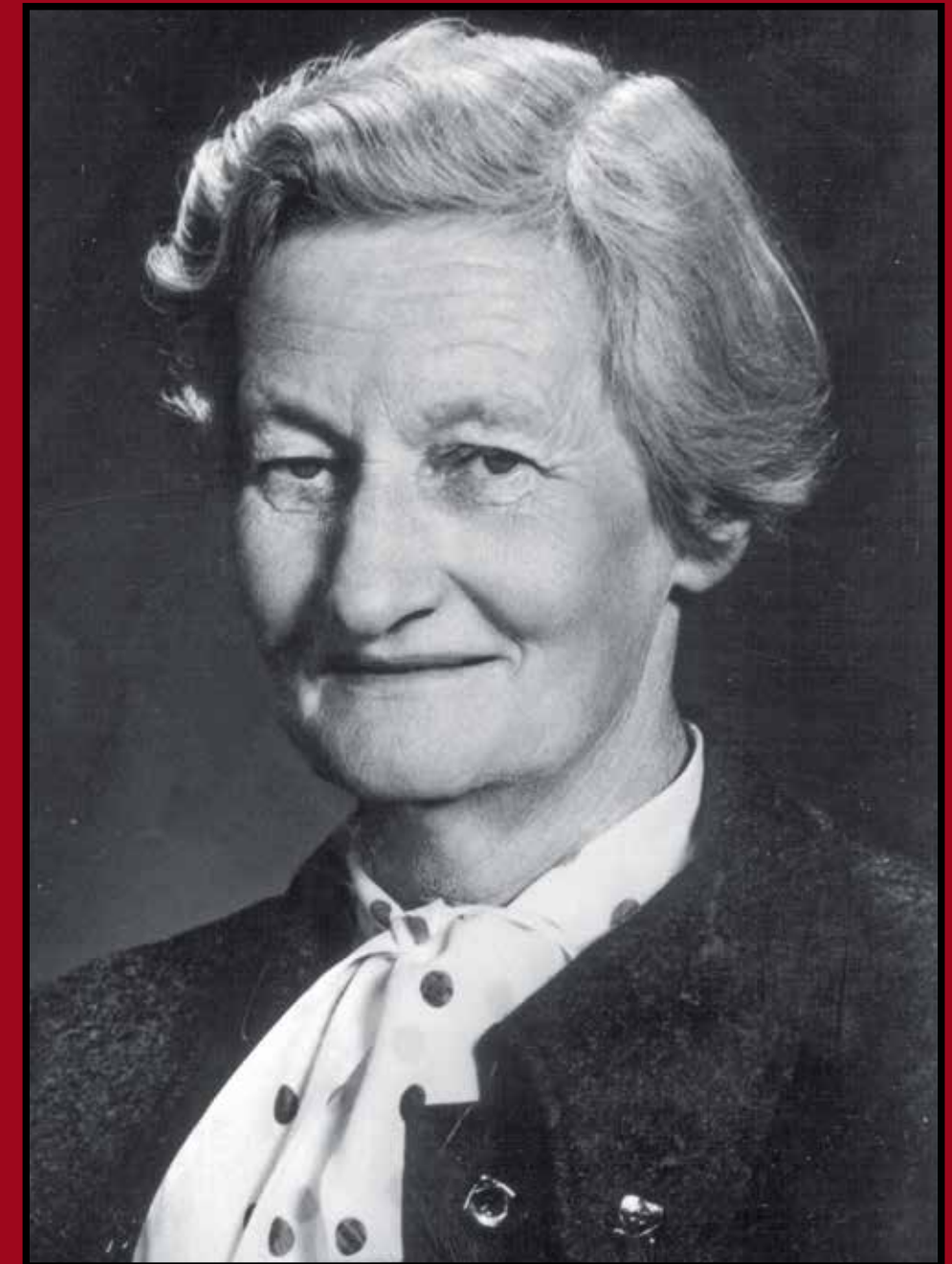
What is surprising is her many extra-medical activities, including playing golf and hockey at a high level. In 1929, she became the first woman in Victoria to obtain a pilot’s ticket and, in 1930, she was one of six women pilots to provide an escort to British aviator Amy Johnson from Laverton to Moonee Valley. A well-rounded individual, she would often hold weekends at Torquay with her medical friends, conversing about music and the arts as much as about medicine.

Dame Ella and her female colleagues paved the way for following generations of female medicos through their amazing careers. Dame Ella’s career was most outstanding.

Associate Professor Elizabeth M. Dax AM
MBBS 1971

¹ Rosemary Pringle, *Sex and Medicine: Gender, Power and Authority in the Medical Profession*, Melbourne and Cambridge, UK: Cambridge University Press, 1998.

Dame Ella Macknight, c.1970; photograph; The Queen Victoria Memorial Hospital Annual Report, 1972, p. 2. Courtesy of Monash Health Historical Archive



LORNA LLOYD-GREEN CBE AN INSPIRATIONAL LEADER MBBS 1933

Lorna Lloyd-Green (1910–2002) was an inspirational leader in Australian Medicine during her 92 years. She graduated in 1933 and became one of Melbourne's first female obstetricians and gynaecologists. Lorna was appointed medical superintendent at the Queen Victoria Memorial Hospital in 1939, and held various leadership positions there, including dean of the Clinical School. Motivated by her concern for those unable to have children, she founded the sterility clinic, which she ran for 25 years; eventually, this became the IVF clinic at Monash.

Lorna was the first medical advisor to the then Nursing Mother's Association and the first female fellow of the Australian Medical Association. She was also foundation fellow of the Australian College of Obstetricians and Gynaecologists and president of the Australian Federation of Medical Women and the Medical Women's International Association. Her honourable awards included an OBE (1968), Woman of the Year (1970) and CBE (1979).

Lorna pioneered the way for women in medicine, with equal pay for equal work being one of her achievements. She was president of Zonta (Melbourne), a service that worked to advance the status of women, and she contributed to other organisations with this aim.

She was renowned for her commitment to her patients: she never missed a delivery, and during World War II she was on call 24 hours a day for two years, spending every night in the hospital. Her sense of service was attributed to her family and school, Lowther Hall, where she was dux and captain (1929). A gifted musician, Lorna had considered becoming a music teacher. So, late in her career, when she felt it inappropriate to practise medicine, she re-trained as a music therapist, spending nearly ten years caring for dying patients, including a patient she had delivered 50 years before.

Lorna had a lifelong passion for learning and studied for a Diploma in Law, using computers for the first time at the age of 80. An elegant, highly organised and energetic woman, Lorna was also an ardent ecumenist, serving on the vestry and as church warden at St John's Anglican Church in Toorak.

Dr Lena Sanci MBBS 1988

Based on an obituary adapted by Ken and Lyn Wheat (Lorna's niece) from the eulogy delivered by Senator Kay Patterson at the Thanksgiving Service, Saturday 29 June 2002.

Cat. 50 **Lorna Lloyd-Green (1910–2002) at the University of Melbourne**, c.1940; photograph; 14.0×9.0 cm. Gift of Mrs Wendy Alexander, MHM04582

Cat. 53 **Lorna Lloyd-Green (1910–2002) in RCOG gown**, 1988; photograph; 15×10.4 cm. Gift of Mrs Wendy Alexander, MHM04583



MARGARET MACKIE CMG

A LEADING LIGHT IN OBSTETRICS AND GYNAECOLOGY

MBBS 1935

Margaret Alison Mackie (1910–1991) was born in Armadale, Victoria and educated at the Presbyterian Ladies' College in East Melbourne. She graduated from the University of Melbourne in fourth place in the MBBS class of 1935 before spending time on the resident staff of the Royal Melbourne Hospital and the Children's Hospital. She then embarked on a long career in obstetrics and gynaecology at the Women's Hospital and St Andrews Hospital in Melbourne.

In 1940, only ten months after joining the Women's Hospital, she was appointed medical superintendent when the incumbent, Dr (Major) R.McK. Rome, enlisted with the Australian Army Medical Corps for service abroad. She held the position for the duration of the war; in August 1946, the *Argus* records Dr C.K. Churches in the role, commenting on the expected increase in birth rate after World War II.

The end of hostilities usually meant the end of senior appointments for women, and often re-directed their career from positions of influence and seniority. The experience and expertise Margaret had gained as medical superintendent, however, was enough to cement her place as a leading specialist in obstetrics and gynaecology. In 1948, Margaret, or Alison as she was often known, became the first woman to be appointed to the honorary staff of the Women's Hospital as outpatient gynaecologist. Eleven years later she became the first woman appointed honorary in-patient obstetrician.

Not long after the war's end, Margaret won the Vera Scantlebury Brown Travelling Scholarship and spent most of 1949 in the UK, researching antenatal clinics and breast-milk banks throughout England, Ireland and Scotland. Her career blossomed upon her return. She built up a large private practice; her public and private patients were numerous and devoted and her advice and opinions were widely sought by her colleagues.

In addition to her clinical work Margaret chaired the board of St Andrews Hospital from 1965 to 1972—a role that was recognised in her appointment as a Commander of the Order of St Michael and St George (CMG) in 1975 for services to the medical profession and as a hospital administrator.

Dr Gillian Opie
MBBS 1981

References: Australian Women's Register www.womenaustralia.info/biogs/IMP0076b.htm; accessed 9 September 2013; *Chiron* 1991; *Argus*, 8 June 1940, 13 September and 1 October 1948, 8 March and 9 June 1950.

Dr Margaret Mackie (1910–1991), medical superintendent of the Women's Hospital, takes the blood pressure of a woman patient, c.1944; photograph. Australian War Memorial, P00784.139



NANCY LEWIS DETERMINED AND ETHICAL MBBS 1935

Nancy Lewis (1913–2002) was born on 28 August 1913 in the Melbourne suburb of Malvern. Through her career she achieved an MBBS, MD, a DO, FRACS, FRANZCO and FRCOphth (UK). She practised as an ophthalmologist in Melbourne for almost 60 years.

Nancy graduated from medicine at the University of Melbourne in 1935. After being a resident medical officer at the Children’s Hospital, the Victorian Eye and Ear Hospital (VEEH) and the Women’s Hospital, she became medical superintendent of VEEH in 1940–1941. During these residencies, she decided to pursue a career in ophthalmology, and she was one of only three female ophthalmologists when she entered the profession in 1940. She was appointed to the Children’s Hospital in 1942 and remained associated with the hospital until 1986.

Her major contribution to ophthalmology was in founding the eye clinic at the Children’s Hospital, which she remained in charge of until 1963. She continued as honorary consultant ophthalmologist at the clinic until 1986. Her work in private practice was initially in Collins Street, Melbourne and later in East Melbourne.

Nancy was determined and ethical in practising medicine and demonstrated great concern for her patients’ welfare. She was also concerned for their families and for other important aspects of their lives.

Besides having a successful career in medicine, Nancy was also a sportswoman of note. In her final year of school at Toorak College, 1929, she won the Schoolgirls’ Singles (Ashphalt) Tennis Championship of Victoria. She also won the Melbourne University Tennis Club Singles Championship in 1930 and 1931, and the Australian Girls Under 21 Singles Championship in 1932 and in 1933.

In 1951, Nancy Lewis married John Vickery Brooks, an electrical engineer. They had one daughter, Anne Marie Vickery Brooks—who followed Nancy into medicine and ophthalmology—and they became grandparents to Elita and Georgina Frazer, to whom Nancy was devoted.

Nancy summed up her personal and medical experience thus: ‘I had a wonderful life and enjoyed every minute of it’.

Professor Robyn Guymer MBBS 1991

Thanks to Associate Professor Anne Brooks for input into this piece.

Nancy Lewis (1913–2002), 1983; photograph. Courtesy of the family



MARGARET MARY HENDERSON OBE

STRIKING A BLOW FOR WOMEN

MBBS 1938

Living in post-war London in 1947, Margaret Henderson applied for the position of honorary physician to outpatients at the Royal Melbourne Hospital (RMH). She applied mainly ‘to strike a blow for women in medicine’;¹ then she; put it out of her mind, as ‘there had never been a woman appointed to the Honorary staff’.

Margaret had spent two years as resident medical officer at the RMH after graduating in 1938. As the tide of war swept up Australia, she gained an MD; undertook research at the Walter and Eliza Hall Institute; worked with Euan Littlejohn in general practice, and in medical outpatients at the RMH; and served with the military forces.

As war ended, the Red Cross recruited Margaret for post-war civilian work, as a senior medical officer in outlying Malay villages, dealing with nutritional and tropical diseases. She then developed her interest in respiratory and thoracic medicine in London and Switzerland, gaining membership and then fellowship of the Royal College of Physicians and the Royal Australasian College of Physicians.

One of the few women medical graduates at the time, she was ‘quite stunned’ to receive a cable from Euan Littlejohn: she had been appointed to the honorary staff at RMH. This was one of many blows Margaret struck for women in an era in which great tenacity and talent were required to achieve parity with men. Margaret was acutely aware of how her actions influenced prospects for other women, and her strength of character and perceptive mind made her highly regarded in medicine—held in great esteem and widely sought as a teacher. Many fondly recall her teaching rounds with medical students and her wonderful clinical acumen.

Besides her work at the RMH, she was honorary physician to the Queen Victoria Hospital and medical officer to Janet Clarke Hall for many years. She also provided outstanding service to the management committee of the Royal District Nursing Service for 18 years. She was awarded an OBE for services to medicine in 1976, a rare distinction in that era. In 2012, the University of Melbourne awarded her the Honorary Doctor of Medical Science *honoris causa* recognising her pioneering leadership in establishing the rightful place of women in medicine.

Professor Christine Kilpatrick

MBBS 1976

¹ Margaret Henderson, *Perspectives—Cursory and Clinical: Reflections and Memories of a Melbourne Physician*, Melbourne: self-published.

Margaret Henderson at the Honorary Doctor of Medical Science ceremony, 11 September 2012.
University of Melbourne Advancement Office



ELIZABETH TURNER AO

STIMULATED BY INDIFFERENCE

MBBS 1940

In 1983, Elizabeth Kathleen Turner (1914–1999) was one of five women graduates of the University of Melbourne to be awarded the degree of Doctor of Laws *honoris causa* by the University of Melbourne. This special conferring marked the centenary of the first woman graduating from the University of Melbourne.

Elizabeth Turner was educated at the Presbyterian Ladies' College, Melbourne, before studying at Melbourne Medical School. She was one of ten women in a class of 110 to graduate with an MBBS in 1940. After a year at the Alfred Hospital, she joined the Children's Hospital to commence a career in paediatrics that lasted 50 years. She was awarded an MD in 1948 for her thesis 'Meningitis in infancy and childhood', drawing on 790 cases of this disease, 420 of which she had managed herself.

With the departure of men during World War II, Elizabeth Turner became medical superintendent at the Children's from 1943 to 1946. With just three years' postgraduate experience she was responsible for medical administration and worked as consultant physician and emergency surgeon. This broad experience was not wasted, as for a number of years she also practised as neonatal surgeon at the Queen Victoria Hospital. Over her long career Elizabeth Turner held a number of senior appointments at both the Children's Hospital and the Queen Victoria Hospital.

Elizabeth Turner accomplished a number of notable 'firsts'. In 1944, she obtained a supply of penicillin from the US Army Medical Corps, stationed at the Royal Melbourne Hospital, and became the first Australian to administer the drug to a paediatric patient, whom she cured. She was also the first Australian to perform an exchange transfusion for severe Rh compatibility and to recognise the country's first case of Turner's Syndrome (not named for her). She described the effects of alcohol on the developing foetus many years before Foetal Alcohol Syndrome was reported internationally.

In 1983, giving the presidential address to the Victorian Medical Women's Society, Elizabeth Turner reflected on the pioneer women doctors: '[They lived] like us, marvelling in the goodness of people and in the delight of being a doctor, but also puzzled and stimulated by the indifference, the ignorance, the disease, cruelty and sadness in some lives'.

Professor Beverley-Ann Biggs

MBBS 1979

References: Elizabeth K. Turner, 88th presidential address to the Victorian Medical Women's Society, 18 November 1983, *Chiron*, 1984. Max Robinson, 'Elizabeth Kathleen Turner AO' (obituary), *Chiron*, 2000.

Dr Elizabeth Turner (1914–1999) admitted to the degree of Doctor of Laws *honoris causa*, 10 December 1983; photograph; 14.5 × 18.5 cm. University of Melbourne Archives, UMA/I/2317; acc. no. 1994.0025



LORNA SISELY OBE FIRST FEMALE SURGEON APPOINTED TO RACS MBBS 1942

Lorna Verdun Sisely (1916–2004) was born in Wangaratta, Victoria. She was educated at Wangaratta High School, Methodist Ladies College in Melbourne, and Janet Clarke Hall, at the University of Melbourne.

Lorna graduated from the Melbourne Medical School with an MBBS in 1942, after which she was appointed first junior and then senior resident medical officer at Melbourne's St Vincent's Hospital until 1944. When she gained her Master of Surgery from the University of Melbourne in 1949, she became only the second woman to be awarded this degree from the university. She became the first female surgeon admitted to the Royal Australasian College of Surgeons in 1947 by passing its fellowship examination.

Earning a Gordon Craig travelling scholarship, Dr Lorna Sisely travelled to England and the United States to advance her postgraduate studies in the field of surgery. She later became a member of the Anti-Cancer Council, between 1964 and 1981, and in 1979 she founded the Breast Clinic, Monash Medical Centre, at which she was also a consulting surgeon.

Her appointments included honorary assistant surgeon at the Children's Hospital between 1947 and 1949, surgeon and member of senior staff at the Queen Victoria Medical Centre between 1947 and 1981, and dean of the Clinical School at the Queen Victoria Medical Centre, Monash University from 1980 to 1981.

On 14 June 1981, Dr Lorna Sisely MS, MBBS, FRACS, FACS was appointed an Officer of the Order of the British Empire for services to medicine; in 2001 she was awarded a Centenary Medal, the citation again acknowledging her services to medicine.

Dr Gillian Farrell
MBBS 1978

References: *Argus*, 11 April 1949. 'Australian Women's Register', <http://trove.nla.gov.au/people/741075?c=people>; accessed 30 August 2013. Margaret Herd (ed.), *Who's Who in Australia*, 38th edition, Melbourne: Crown Content, 2002. Royal Australasian College of Surgeons, 'History', www.surgeons.org/about/college-history/history/; accessed 30 August 2013.

Cat. 159 **Resident Medical Officers, including Dr Lorna Sisely (1916–2004)**, 1942 (detail); photograph, cardboard; 110.0 × 80.0 cm. St Vincent's Hospital Collection



Dr. L. SISELY

JUNE HOWQUA

RESILIENT, PERSISTENT AND DECISIVE

MBBS 1944

June Howqua (1921–2009) grew up at the time of the Great Depression. She won a scholarship to Melbourne Girls' Grammar, where she excelled academically and gained entry to the Melbourne Medical School.

Dr Nancy Cowling (née McNeil) recalls: 'June Howqua, Mary Hoy and I graduated in the top 10 of our year'. The brightest in those days had a Senior Government Scholarship, which paid £10 per term and covered the tuition cost for medical school. Although medicine was a six-year degree, it was shortened to five years for the graduates of 1944, due to need for doctors following the war.

The top graduates became residents at Royal Melbourne Hospital. Here, June worked at as a resident medical officer, specialising in cardio-thoracic medicine. She then took a position at Brompton Hospital in the United Kingdom to further develop her clinical skills.

On her return from Britain, June worked at the Queen Victoria Hospital, where she and Priscilla Kincaid-Smith were leading physicians. A high achiever, June became vice president of the board of management and set up coronary care. After Monash University began running the Queen Vic, June became a member of its assessment team for coronary surgery. She was also a member of the standing committee on ethics in human experimentation and IVF.

June was devoted to her career and her patients. As well as working for the Queen Vic, she set up a private practice from her residence in Powlett Street, East Melbourne. 'June was one of those very successful early women in medicine with postgraduate qualifications', recalls Nancy, 'She was resilient, persistent and decisive.' Regarded as thorough, diligent and driven, June cared about women in medicine and published on the topic. When she retired from medicine, at the age of 75, she went back to university to study classics, she spent time in the country and worked as a volunteer.

Dr June Howqua MD, MBBS, FRACP, FRCP was an early leader of women in medicine. 'Women's liberation', she is quoted as saying, 'was a very decent thing and it didn't come before time'.

Dr Elif I. Ekinci
MBBS 2000

Dr June Howqua (1921–2009), 1972; photograph; The Queen Victoria Memorial Hospital Annual Report, 1972, p. 9. Courtesy of Monash Health Historical Archive



IDA BELL BRODRICK OAM PIONEERING NEW INITIATIVES FOR WOMEN AND CHILDREN MBBS 1944

Dr Ida Bell Brodrick (1919–2011), known as Dr Bell Brodrick, was a key player in promoting the health and wellbeing of women and children in Melbourne for more than 60 years.

She was one of only four women to complete a medical degree at the University of Melbourne in 1944. Following residencies at St Vincent's, Queen Victoria and the Children's Hospitals, most of her professional life was with the Melbourne City Council, where she was chief medical officer for maternal and child health and then chief medical officer for the City of Melbourne. The latter position existed for approximately 100 years and Dr Brodrick was the only woman to ever fill that role.

A trailblazer, Dr Brodrick pioneered many new initiatives for women and children in Melbourne. These included integrating disabled young people in mainstream childcare centres and helping upgrade Melbourne's facilities for the disabled. For some years she served as state commissioner for disabled Girl Guides. Dr Brodrick was also vital in establishing infant-welfare and day-care centres in inner Melbourne to meet the needs of the new housing commission areas and new migrant populations. She initiated a range of services for women from non-English-speaking backgrounds.

Dr Brodrick had a special interest in women in prison, particularly those mothering children. She was a member of the Victorian Women's Prison Council and advocated successfully for the right of women to keep their children when entering prison. She helped develop parenting and child-rearing programs for such women, working closely with Dame Phyllis Frost.

In the later years of her career, leading up to her retirement at 82 years of age, Dr Brodrick counselled women suffering from post-natal depression. She also continued to assist other women in medicine, a priority for her throughout her working life and one that she pursued during her term as president of the Victorian Medical Women's Society.

I knew Dr Brodrick for more than 20 years. She was always a very friendly, helpful and considerate neighbour, and as a doctor she contributed much in maternal and child health. I learnt a lot from her.

Dr June Danks (nee McMullin)
MBBS 1954



Cat. 178 **Dr Ida Bell Brodrick (1919–2011) and baby**, 1955; photograph; 9.0 × 9.0 cm. Collection of the Matthews family

UNICE BEATRICE PORTER OBE THE PHILANTHROPIC PSYCHIATRIST MBBS 1944

Unice (Una) Beatrice Porter (1900–1996) was the daughter of prominent businessman Frederick John Cato. She attended the Methodist Ladies' College until her formal education was interrupted by ill-health. She travelled with her parents and worked as a volunteer with the Young Women's Christian Association (YWCA) before returning to complete her matriculation in 1932.

Una commenced medicine at the University of Melbourne in 1933, but interrupted her studies to complete a social work course. Returning to medicine, she specialised in psychiatry, training at Prince Henry's Hospital, Royal Park Psychiatric Hospital and the Royal Children's Hospital. She became the first female consultant member of staff at the Ballarat Mental Hospital, and later worked in private practice and established the psychiatric clinic at the Queen Victoria Hospital. In her retirement she continued as an honorary consultant psychiatrist and as a counsellor for nurses at the Queen Vic.

Psychiatry was only one of many roles for Una. Like her father, she was committed to the Methodist Church. Throughout her life she was an active member of the YWCA and served in many leadership roles, including foundation member of the national YWCA executive and president of both the world YWCA and YWCA Australia. Fittingly, the YWCA building in Canberra is named after Dr Porter.

Frederick Cato was known for his generosity to many Methodist organisations. Following his death, in 1935, Una administered the F.J. Cato Charitable and Benevolent Fund, also making substantial personal donations to hospitals, universities and community organisations. Following the death of her husband, in 1966, she established the James and Una Porter Trust Fund to provide travel grants for young YWCA members to attend overseas conferences. In recognition of services to the community, Una was appointed Officer of the British Empire in 1961 and Commander of the British Empire in 1968.

Una's roles in psychiatry and philanthropy supported the establishment of the Department of Psychiatry at the University of Melbourne. She was a driving force in establishing the Cato Chair in Psychiatry in 1963, funded by she and her brother in memory of their late father. The Una Porter Entrance Scholarship to Queen's College recognises Dr Porter and her 28 years as a member of the college council.

Professor Fiona Judd
MBBS 1978

Una Beatrice Porter (1900–1996), c.1990; photograph; 17.9 × 12.6 cm. University of Melbourne Archives, Una Beatrice Porter Collection, BWP/13326



GRADUATING MEDICAL CLASS, 1945



BETTY WILMOT OBE IMPROVING THE LIVES OF THOSE AROUND HER MBBS 1945

It is never easy to advocate for those who cannot do so for themselves, particularly as a woman in the early 20th century. But Alice Elizabeth (Betty) Wilmot (1912–1998) demonstrated early on that she was dedicated to improving the lives of those around her.

Her training began with a Bachelor of Science from the University of Melbourne. Upon completion, she became a dietician at the Victorian Railways (1934–1938). She drove several public health initiatives to improve the diets of Victorian travellers. These would not be out of place today, given the challenge of obesity, but such innovation must be measured against the world of 80 years ago. Introducing fresh-fruit juices at railway milk bars and designing menus that included ‘new’ foods such as salad opened the eyes of many to a healthy diet.

In 1939, Betty joined the Commonwealth Department of Health. While working on maternal and child nutrition she met the notable Dr Vera Scantlebury Brown, who inspired her to obtain a medical degree to further her work. Gaining an MBBS in 1945, Betty became a resident medical officer at the Alfred Hospital, Melbourne and the Children’s Hospital, Perth.

She remained fiercely dedicated to her work in maternal and child health and was particularly passionate about the health of migrants and of citizens of neighbouring countries. In 1948, she travelled to England to gain her Diploma of Child Health, returning in 1950 to become assistant director of maternal, infant and preschool welfare at the Department of Health in Victoria. She became director in 1960, the position Dr Scantlebury Brown established and then held until her death, in 1946.

Betty was extremely hard working and frequently held multiple positions. As assistant director, she was appointed the World Health Organisation’s regional director of maternal and child health in the Western Pacific (1953–1955), her office based primarily in the Philippines. As director, she was appointed assistant chief health officer from 1967 to 1977, making her the first woman to reach this level of seniority in the Victorian Department of Health.

In recognition of her work, she was appointed Officer of the Order of the British Empire in 1978.

Melissa Lee

Cat. 16 **Graduating Medical Class**, 1945; photograph; 19.8 × 13.5 cm; MHM04389

Women graduates, left to right: Jenny Pascheove, Mancell Gwenneth Pinner, Joan Mowlam, Nancy Brown, Joan Amelia Walker, Iris Alice Leber, **Alice Elizabeth Wilmot**, Dorothy Beatrice Hurley, Shirley Evelyn Amy Lorraine Francis, Mary Bennett, Charlotte Morrison Anderson

Alice Elizabeth Wilmot



CHARLOTTE ANDERSON AM BY LUCKY COINCIDENCE AND CHANCE MBBS 1945

The preface to the third edition of the textbook *Paediatric Gastroenterology* states that ‘Charlotte Anderson is one of the great pioneers who nurtured the fledging specialty in the 1950s and 1960s’.

Born in Melbourne, Charlotte Anderson (1915–2002) knew as a girl that she wanted to be a medical researcher and a paediatrician. Although not permitted by her father to enrol in medicine, she won an A.M. White Scholarship to Janet Clarke Hall at the University of Melbourne to study science. She undertook a Masters while doing research at the Baker Institute before enrolling in medicine at the Melbourne Medical School in 1941.

She embarked on a career in clinical research when she was offered a staff position at the Children’s Hospital in the newly formed Clinical Research Unit, under the directorship of Howard Williams. Her work focused on the key disorders of children with chronic chest disease and diarrhoea. Her work has resulted in major advances in understanding the underlying pathogenesis and treatment of cystic fibrosis and coeliac disease, including the link between gluten and coeliac disease. Dr Anderson established the Gastroenterology Research Unit at the Royal Children’s Hospital and was later offered the Chair of Paediatrics and Child Health at the University of Birmingham, making her the first female professor of paediatrics in Australia or the United Kingdom.

Her colleague Dr Nate Myers described her as ‘a humane doctor, who put research first and patients equal first’. In her Teale Lecture to the Royal College of Physicians in London, given soon after her retirement, Charlotte Anderson described her career as a series of ‘lucky coincidences and chances’. Doubtless, this does not reflect the battles she had as a woman scientist working in a clinical setting and with the development of a new subspecialty in a new field of medicine.

Charlotte Anderson is internationally recognised by her peers as a pioneer in paediatric gastroenterology and as ‘the person who got paediatric research up and running in Australia’. Her legacy has continued at the Royal Children’s Hospital and the University of Melbourne, and generations of patients have benefitted from her contribution to paediatric gastroenterology and child health.

Professor Julie Bines
MD 2000

Lillaine Gedye, **Charlotte Morrison Anderson AM (1915–2002)**, 1990; photograph. Courtesy of Professor Emeritus Ian Booth, Division of Reproductive and Child Health – Paediatrics, University of Birmingham



JEAN HAILES AM PASSION AND STRENGTH OF VISION MBBS 1949

By all accounts (Dorothy) Jean Hailes (1926–1988) was an amazing medical woman. The daughter of a surgeon, Jean was head prefect at the Melbourne Church of England Girls Grammar School, and undertook her medical degree at the University of Melbourne.

Jean developed a strong interest in women’s health while working with mothers and their intellectually disabled children. As a general practitioner, she became aware of the extent of unacknowledged menopausal symptoms. It is hard to imagine today, but in the 1960s menopause was poorly understood and practically a taboo topic. The (mostly male) medical profession considered such complaints were trivial, ‘all in women’s heads’, and could be dealt with by the odd Valium tablet.

While accompanying her cardiologist husband to a conference in the United States, Jean met one of the early doctors who believed that women’s mid-life symptoms could be alleviated with hormonal therapy. On returning to Melbourne, she was unable to convince the Royal Women’s Hospital to address menopausal problems. Due to her passion and strength of vision, in 1971 she convinced two senior doctors at Prince Henry’s—who had no interest at all in menopause—to allow her to see women in their endocrine clinic. Business was slow; so Jean had a full-page article published in the newspaper, whereupon the floodgates of unmet menopausal need opened. To manage the demand, Jean recruited other women GPs to work with her.

Jean’s other achievements included establishing a research program in menopause and an annual conference, the precursor to the Australasian Menopause Society. Later, recognising the importance of bone health, she raised the funds to purchase a bone densitometer for her clinic.

Perhaps the strength of Jean’s vision and her legacy to medicine is best illustrated by the reaction to her premature death. To honour her memory, five of her colleagues—four clinicians, one basic scientist—decided to establish a new women’s health clinic bearing her name, and the clinicians helped to staff it. Eventually, this became the foundation that bears her name and continues to help Victorian women today.

Dr Marie Pirotta
 MBBS 1983

Cat. 17 **Melbourne University Medical Graduates**, 1949; photograph, cardboard; 24.3 × 29.8 cm; MHM03568
 Women graduates, front row: Drs Mary G. Asche, Joy E. Young, Hazel Y. Halse, Jessie C. Webster, D. Ann Bridge, M. Joy McCulloch, D. Jean Hailes, Patricia M. Scrivenor, Lois C. Garrett, Pamela S. Triplett, Mary H. Bromner

Melbourne University Medical Graduates, 1949



Drs. J. D. S. Gunter, R. L. Faragher, W. R. Beetham, J. Freidin, P. Foster, I. L. McVey, C. D. Smith, D. M. McLaren, J. B. Combes, J. C. S. Officer, A. G. Bond.
 Drs. K. J. Millar, R. H. Kernutt, N. B. Le Courteur, N. Johnson, J. C. P. Cone, C. S. Reid, J. L. Stubbe, D. A. Cooper, M. J. Robinson, J. K. Francis,
 J. A. S. Brine, S. J. Baker, W. L. Etrick.
 Drs. J. E. Cranswick, I. A. Collins, V. C. Woolley, C. F. Macdonald, B. R. Grove, J. A. Horton, W. H. Kitchen, N. A. Gunn, W. B. Fleming, P. C. Tuckfield,
 H. T. Day, R. D. Wilson, P. A. Mapleston, D. A. McCredie, I. H. Wood, A. B. Alder, N. M. Cass.
 Drs. W. M. Davis, H. R. Springall, Mary G. Asche, Joy E. Young, Hazel Y. Halse, Jessie C. Webster, D. Ann Bridge, M. Joy McCulloch, D. Jean Hailes,
 Patricia M. Scrivenor, Lois C. Garrett, Pamela S. Triplett, Raynor P. Williams, Mary H. Bremner, K. M. Benn, L. C. Rouch.
 Absent: Dr. N. K. Dougan.

Sears' Studios
 St. Kilda

MARGARET GARSON AO UNLOCKING DOORS MBBS 1951

Dr (Olga) Margaret Garson established the Department of Cytogenetics at St Vincent's Hospital (SVH) in Melbourne, Australia's premier cancer cytogenetics laboratory. She graduated from medicine at the University of Melbourne in 1951. At that time, advancement in medicine was difficult for women; she was denied entry to training in obstetrics, so turned to pathology and haematology—meeting her husband over the autopsy table!

Margaret not so much chose cytogenetics but fell into it. In 1959, her husband received a scholarship to study plastic surgery in Texas, and Margaret—a trained haematologist—travelled on an accompanying person's visa, which prohibited her from working. Her husband's boss's wife, however, organised a research fellowship and obtained Margaret both a National Institutes of Health grant and a carer for her children. The visa was the easiest challenge of all: she filled out a form and paid \$25.

The director of the research department she joined had just read of the Philadelphia chromosome discovery. He sent Margaret to the Rockefeller Institute in New York to learn chromosome techniques. She was fascinated by the available literature, and once compared herself to Alice in Wonderland and her fall down the rabbit burrow: arriving in a hall of locked doors, as she unlocked each it revealed the exciting possibilities beyond.

At a 1962 conference, Margaret renewed her acquaintance with Carl de Gruchy, Professor of Medicine at SVH, who was interested in her experience in cytogenetics. In 1964, she returned to Melbourne and helped establish a cytogenetics laboratory at SVH. Her directorship of the unit was formalised in 1976.

With the development of chromosome banding methods in the 1970s, chromosome abnormalities could be linked to specific disorders. Margaret spent the next decades educating her colleagues on the clinical importance of cytogenetics in patient management.

At her 65th birthday, in 1992, Margaret's retirement was marked by an event honouring her contribution to medicine, attended by cytogeneticists and haematologists from around Australia and the world. The outstanding array of speakers and attendees is a measure of Margaret's standing. She was made an Officer of the Order of Australia the following year.

Associate Professor Lynda Campbell
MBBS 1977

Cat. 158 Shirley Bourne (1924–2006), **Margaret Garson**, c.1970; oil on canvas; 89.0 × 74.0 cm. St Vincent's Art Gallery Collection



BARBARA MARTIN DEVELOPING THE ‘QUEEN VIC’ OF SOUTH KOREA MBBS 1957

Barbara Martin felt called to be a missionary from the time she was at school at Strathcona Baptist Girls’ Grammar, in Melbourne. She entered Melbourne Medical School in 1952 and graduated in 1957.

After a residency at the Alfred Hospital, she trained in obstetrics and gynaecology (O&G) at the Queen Victoria Hospital, where she particularly appreciated the support of Drs June Pash and Marcia Robinson.

After obtaining the MRCOG in 1963, Barbara was recruited as a locum to the Il Sin Christian Hospital in Pusan, South Korea. The hospital had been established in 1952 under the auspices of the Australian Presbyterian Mission Board by Dr Helen Mackenzie and her sister Catherine, a nurse midwife. Both Helen and Catherine had also trained at Queen Vic, where Helen had been acting medical superintendent.

Barbara worked at Il Sin for 32 years. She passed the Korean undergraduate degree and obtained the Korean specialist qualification. Il Sin became the ‘Queen Vic’ of South Korea, and by the time Barbara returned to Australia, more than 130 women O&G specialists had been trained and around 2600 nurses had graduated as midwives. The hospital continues today as a general hospital providing training and high-quality care.

Barbara’s work in Korea as a clinician, assistant medical superintendent and educator of nurse midwives and O&G residents contributed to establishing a culture of excellence in clinical care, training and professional development. Many of her trainees are now senior leaders and outstanding clinicians. She presented and published papers in local and international forums on a variety of topics, such as trophoblastic disease and preventable factors in maternal deaths.

Her trophoblastic disease support group, the Lily Club, was the earliest patient support group in the country for women with a disease that had ongoing family, social and medical implications. This and other initiatives, especially preventive activities in maternal and child health, improved women’s lives substantially.

Barbara returned to Australia in 1995 and, after further training in the United Kingdom, began a second career as a palliative care physician. She retired in 2012.

Dr Heather Cleland
MBBS 1980

Barbara Martin at the first birthday of quadruplets at the Il Sin Christian Hospital in Pusan, South Korea, June 1981, photograph; 20.0 × 24.0 cm. Courtesy of Barbara Martin



ROSEMARY CROWLEY

A POLITICAL LIFE

MBBS 1961

Rosemary Anne Crowley is best known for her distinguished career in politics, as a Labor senator for South Australia from 1983 to 2002. She is recognised for her dedication to the principles of social justice and democracy. During her term in the Senate she served as Minister for Family Services in the former Keating Labor government (1993–1996) and as Minister Assisting the Prime Minister for the Status of Women, supporting women's issues and policies affecting women. She was the first female member of the Australian Labor Party to be elected to the federal parliament for South Australia, and the first woman to be elected to a federal ministry from South Australia.

Rosemary Crowley graduated from the University of Melbourne with an MBBS in 1961. She then worked as a doctor in community health, Medicare, childcare, parent education, occupational health and safety, and women's health. She was also a foundation member of the South Australian Mental Health Review Tribunal and a tutor in the Flinders Medical School. Through her work she became very interested in occupational health and safety and a strong advocate for social justice, campaigning in the areas of healthcare, childcare, nuclear disarmament, sport and women's issues.

During her time in parliament, Senator Crowley maintained her interest in health, chairing the Senate Select Committee inquiring into health insurance and health legislation. She also helped place childcare on the political agenda.

Senator Crowley's strong interest in women's sport is evident in her initiating the Prime Minister's Cup for women's netball and the Premier's Cup, in South Australia, for women's sport. She headed the government inquiry into women, sport and the media, which resulted in the establishment of the Women's Sports Unit in the Sport Commission in Canberra, and supports government funding for community and school participation in sport and physical fitness, as well as support for elite athletes.

Alongside of supporting women, her passion is for the care and protection of children and support for their families. This has been the focus of her working life.

Dr Judith A. Whitworth AC
MBBS 1967

Rosemary Crowley in her office, 1993; photograph. Courtesy of AUSPIC, 000056015



RUTH REDPATH AO

IMPROVING THE CARE OF THE TERMINALLY ILL

MBBS 1964

When Dr Ruth Redpath (now Rev. Dr) graduated in 1964 there were no formal palliative care services in Australia. After completing surgical training, she undertook training in radiation oncology in London. During this time, she was inspired by Dr Cicely Saunders, the pioneer of modern approaches to symptom control in life-threatening illness and the whole-of-person care that accompanied it. On return to Australia in 1982, she became acutely aware of the possibilities for improving the care of the terminally ill in Australia.

Together with other enthusiasts in the Victorian Association for Hospice and Palliative Care (AHPC), Dr Redpath advocated to government, oncology practitioners, and doctors and nurses for better recognition of these specialist needs. Community services improved in 1989 with Medicare and state funding for community-based programs, and specialist nurses were able to provide services complementary to district nursing.

Dr Redpath worked as a palliative care physician at Monash Medical Centre until 1994, becoming president of the Australian AHPC and, later, of Cancer Council Victoria. During and since that time, services have been extensively developed through regional and metropolitan Melbourne, with home-based care, funding of palliative care and respite beds staffed by multidisciplinary teams. Accredited education programs now exist for medical and nursing staff, with integration of services into medical care, especially in the oncology setting. The excellent services available to terminally ill patients in Victoria result from the efforts of Dr Redpath and her colleagues, who sought to improve care. In 2003, Dr Redpath was made an Officer in the Order of Australia for services to the development of palliative care services in Australia.

Dr Redpath was inspired by several of her teachers, who demonstrated truly holistic patient care. Her observation is that women can often more readily put a person in the total context of family and social circumstance, which can lead to more appropriate decisions about treatment and the patient feeling that they have been 'heard'. This is particularly important in palliative care, but applicable to all branches of medicine. Her advice to young doctors is to use technology as an aid to diagnosis and treatment, not as master of it, and to consider the whole person when making management decisions.

Dr Geraldine Goss
MBBS 1987

Rev. Dr Ruth Redpath AO with patient, c.1980; photograph. Courtesy of Dr Redpath

Brian Gilkes, **Ruth Redpath**, c.2004; photograph. Courtesy of the Cancer Council



JULIE CLIFF AO

HEAD AND HEART, STRENGTH AND SUBSTANCE

MBBS 1967

In Mozambique, Julie Cliff is known as ‘an historical monument (*historica*)’. The term is used with great affection and respect, recognising a woman who has given a life of service and passion to the country that has become her second home. Global health professor, revered teacher, intrepid medical researcher and fierce advocate for the poor and marginalised; these make up the brilliant and inspiring career of Julie Cliff AO, MBBS, FRCP, MScCHDC, DTM&H, LLD—a medical woman of strength and substance.

Julie left Melbourne not long after graduation to study at the London School of Hygiene and Tropical Medicine, following a life-changing experience as a medical student in Papua New Guinea. In London, she fell in with a group of medical activists working with the liberation movements in Portuguese Africa. Julie followed her tropical medicine interest to Tanzania—home of the movements—romanced by the possibility of freedom from colonial oppression. By 1976, Julie was in Mozambique, working as the director of the Infectious Diseases Unit at the Maputo Central Hospital, amid the turbulence and excitement of independence from Portugal.

The combination of her clinical skills and community-health perspective led Julie to the medical discovery that earned her local and international regard. As part of a team effort, she helped reveal that the epidemic of spastic paraparesis (*konzo*) among the rural poor of Mozambique was due to cyanide toxicity from poorly prepared cassava. This nutritional health disaster resulted from environmental and social inequality. The synergy of clinical medicine, public health awareness, research expertise and social advocacy has continued to characterise Julie’s work. She has collaborated with African and international colleagues, publishing widely on infectious diseases, public health policy, nutritional health and the effects of war, while continuing to teach and train students in Mozambique. In recognition of her global standing, Julie holds appointments at several universities and research institutes in Africa, the USA and Melbourne. Her insights are sought around the world, shaping health policy and practice, and inspiring another generation of young doctors to similar works of greatness.

Julie Cliff’s legacy as a passionate and compassionate medical woman is both powerful and compelling. A true *historica* indeed!

Dr Georgina Phillips
MBBS 1993



Julie Cliff with medical students in Mozambique, 2012; photograph. Courtesy of Julie Cliff

‘GYTHA’S GIRLS’ TRAILBLAZERS IN FAMILY PLANNING

The advent of more effective contraceptive methods in the 1960s provided relief for many women, who could now reliably limit the number of children they bore in the interests of their families and themselves. Those better-off could see their general practitioner or gynaecologist to prescribe ‘the pill’ or to insert a contraceptive device, but it was much more difficult for the disadvantaged to get this help.

In 1967, the Brotherhood of St Laurence bravely established Victoria’s first family planning clinic as a pilot project for low-income families. Gytha Betheras had recently qualified in obstetrics and gynaecology at the University of Melbourne–affiliated Royal Women’s Hospital, or ‘the Women’s’, as it is known. She learned about contraception at the Brotherhood and sought to implement the practice elsewhere.

In 1971, Gytha was invited to set up a family planning clinic at the Women’s, provided the doctors were willing to work unpaid. Her recruits were all women, who considered the work important enough to do on a voluntary basis, enabled by the financial support of their partners.

Gytha and her team of largely unsung quiet achievers provided the bulk of the direct care in family planning at the Women’s. Many went on to work in clinics established by local councils and the Family Planning Association, and to provide care to women seeking an abortion, when this service was established at the Women’s in 1975. They have also encouraged and inspired others to do this work.

John Leeton, Gytha Betheras and Michael Kloss were among the early visionary, supportive leaders and innovators in this area of practice. Their teams of women doctors saw the work as a priority and made it possible. Up to 1975, the medical team at the Women’s included: Gytha Betheras, Dorothy Bignell, Elaine Chong, Gillian Griffiths, Jean Hailes¹ (MBBS 1949), June McMullin (now Danks, MBBS 1954), Janet Mather, Margaret Menelaus (MBBS 1954), Joan Mowlam (MBBS 1945), Anne Myers, Joy Nelson (MBBS 1954), Susan Watson (MBBS 1969) and Mary Watt.

Dr Chris Bayly
MBBS 1977

¹ Where an MBBS is given, the woman noted graduated from medicine at the University of Melbourne.

Dr Gytha Betheras, 2013; photograph. Courtesy of the Royal Women’s Hospital



MARION PETERS

A CAREER TRAJECTORY THAT SPEAKS FOR ITSELF

MBBS 1972

One of eight siblings, seven of whom have graduated from the University of Melbourne, Marion Peters followed her father's example in pursuing a medical career. She graduated from the Melbourne Medical School in 1972, achieving honours in medicine, pathology, and obstetrics and gynaecology.

Marion undertook her internship and early training in gastroenterology at Melbourne's St Vincent's Hospital. Here she had spent her clinical undergraduate years, with a couple of years intercalated as clinical research registrar at the Walter and Eliza Hall Institute and at the Royal Melbourne Hospital.

In 1978, Marion took up a clinical fellowship in hepatology at the University of Southern California, in Los Angeles. She then spent five years with the National Institutes of Health at Bethesda, Maryland, first as a visiting Fogarty fellow to the National Institute of Allergy and Infectious Disease, then as visiting staff fellow at the National Institute of Arthritis, Diabetes, and Digestive and Kidney Diseases.

Marion has built a career working across the United States. In Missouri, Washington, she was chief of hepatology and medical director of liver transplantation, and in California, she is professor of medicine and chief of the Hepatology Clinic at the University of California in San Francisco.

Marion's interest in viral hepatitis and the role of the host-immune response is driving her current research into the interactions between alcohol use, cannabis use and HIV co-infection on fibrotic outcomes of HCV infection. She is investigating adherence to antiretroviral therapy in HIV/HCV co-infected women and on HCV-specific and innate immune responses in persons co-infected with HCV and HIV. She also contributes to the development of clinical trials in viral hepatitis and HIV and to examining predictors of liver-related morbidity and mortality in a cohort of women with HIV/HCV infection.

With a long list of publications to her name, significant contributions to a host of professional organisations and publications, and a career trajectory that speaks for itself, Marion Peters has undoubtedly established herself as a feature of the medical landscape in the USA. Perhaps the acknowledgement most peculiarly characteristic of her adopted country is her mentions in the very public, peer-assessed, consumerist *Best Doctors* publications.

Dr Barbara Demediuk
MBBS 1984

Marion Peters, c.2010; photograph. Courtesy of Marion Peters



WILMA BESWICK AM

AN ARCHETYPE FOR THE ART OF MEDICINE

MBBS 1972

Associate Professor Wilma M. Beswick is a woman of vision and immense capacity. Her longstanding service to medicine has been nationally recognised by being awarded a Member of the Order of Australia (2012) and being inducted into the Victorian Women's Honour Roll (2013).

Prior to her current role as chief medical officer at St Vincent's Hospital Melbourne, Associate Professor Beswick served as St Vincent's clinical dean for 23 years, graduating more than 1900 students. She developed a formidable teaching style, modelled on her predecessor and mentor, Professor Greg Whelan. She felt 'responsible for every single medical student', with a goal to ensure each reached their 'highest potential'. Students fondly recall her animated teaching style: quirky anecdotes, frequent recourse to 'The Stick' and, underlying it all, an unwavering support for their progress.

Alongside this, she became the director of physician training at St Vincent's, and held several leadership roles in postgraduate physician education with the Royal Australasian College of Physicians. She has built one of the most highly regarded physician training programs in Australia, preparing her candidates for distinction with pass rates well above the national average. Associate Professor Beswick modestly attributes the program's success to her 'excellent team', but her colleagues readily confirm their director provides the inspiration underpinning the collaborative effort. Through this critical influence on the skills, knowledge and professional practice of emergent doctors, Associate Professor Beswick has been able to positively impact the lives of countless Australian patients.

In addition to teaching, Associate Professor Beswick continues to work in a clinical capacity as a physician at St Vincent's. She is an archetype for the 'art of medicine': her care of patients expresses humility, passionate advocacy and a holistic understanding of an individual's emotional and physical needs.

Associate Professor Beswick invests every undertaking with her 'whole heart and soul'; she is a generous leader who has dedicated her life to medicine without losing the humility of her clinical practice. Personally, it has been an immense privilege to have worked with her. Her enthusiasm and steely determination will inspire me and many other women in the field of medicine for years to come.

Dr Kim Yeoh
MBBS 2012

Wilma Beswick, 2013; photograph. Courtesy of Wilma Beswick



VIRGINIA BILLSON EXCEEDING EXPECTATIONS MBBS 1973

It is often said that high expectations are the foundation of success, but Virginia (Ginny) Billson was motivated, in part, by the low expectations of her early teachers.

Ginny Billson was born at the Women's Hospital in 1949, a year after her parents arrived in Australia from Lithuania, escaping the rise of communism in the Baltic states. Raised by her mother and grandmother (with a stepfather in the background), Ginny had a curious mind; she loved puzzles and was always asking questions. She must have been a challenge for teachers in working-class suburban Melbourne during the 1950s and 60s. After a couple of primary school teachers told Ginny she would never amount to anything, she set out to prove them wrong.

At secondary school Ginny's questions were met with the academic challenge she yearned for. Her reward was a scholarship to study science at the University of Melbourne. Looking for a greater challenge, she transferred to medicine at the end of her second year. This was considerably longer than the science degree her scholarship covered, so Ginny worked in the laboratories at the Royal Melbourne Hospital. Fortunately, her scholarship was extended.

There were few female role models in hospitals when Ginny was studying. After two years at the Royal Melbourne Hospital, following her graduation, she began working towards a career in anatomical pathology, as registrar in anatomical pathology at St Vincent's Hospital and a demonstrator in the university's Department of Pathology. Once inside the hospital system Ginny found women to support and influence her career, which has traversed senior hospital and consultant appointments. Her interests include cytology, perinatal pathology, histopathology and teaching. Ginny led the Department of Anatomical Pathology of the merged Royal Women's and Children's Healthcare Network for five years.

When her department's dissolution coincided with her diagnosis of multiple sclerosis it triggered a crisis she has negotiated with characteristic determination and intelligence. Fourteen years later, Ginny works part-time, still intent on solving medical puzzles at the Royal Women's Hospital and living proof that determination, intelligence and support make it possible to exceed expectation.

Dr Catriona McLean
MBBS 1984

References: G. Jelinek and K. Law, *Recovering from Multiple Sclerosis: Real Life Stories of Hope and Inspiration*, Crow's Nest, NSW: Allen & Unwin, 2013. Interview, Joe Fennessy and Virginia Billson, 23 August 2013.

Lee McRae, **Virginia Billson**, 2013; photograph. Courtesy of Virginia Billson



JOANNA FLYNN AM
AN ARCHITECT OF TRUST
MBBS 1975

A lifetime spent serving the Australian public and leading the medical profession is reflected in Dr Joanna Flynn being awarded the Member of the Order of Australia in 2011. It recognised her service to medical administration and to the community, particularly in practice standards, regulation and professional education, and as a general practitioner.

A kind, intelligent and wise woman, Dr Flynn has achieved many firsts during her career. She was the first female president of both the Australian Medical Council (AMC) and the Medical Practitioners Board of Victoria, and she was the inaugural chair of the Medical Board of Australia.

A woman of principle, she has always been clear about what is in the best interests of the public; this has guided her decisions and actions. Consequently, her decisions were not always initially popular with her peers, but history and public scrutiny have generally proved her right. Under her leadership, the AMC introduced compulsory assessment of international medical graduates before their registration, and she helped guide Australia's transition to a national registration and accreditation system—the most significant reform of health practitioner regulation ever undertaken here.

Dr Flynn has made an enormous contribution to developing general practice as a professional specialty. As state director of the Victorian Royal Australian College of General Practitioners training program for nine years, she helped guide and educate a generation of general practitioners. She was instrumental in maturing the general practice education program and oversaw great change in the evolution of general practice to a specialty in its own right.

Despite her busy schedule as chair of both the Medical Board of Australia and Eastern Health, she continues to work in general practice in Melbourne. She has a strong appreciation of the real-life practice challenges, having worked in rural Tasmania, Far North Queensland, and rural and metropolitan Victoria.

Underpinning her work is an abiding belief that trust must be the basis of the patient–doctor relationship. As a regulator, she has strived to enhance the integrity and rigour of medical regulation and systems for assuring high standards in medical practice. This has helped build the trust of the community in medical practitioners.

Dr Joanne Katsoris
MBBS 1989

Joanna Flynn at the Honorary Doctor of Medical Science ceremony, 11 September 2012. University of Melbourne Advancement Office



BARBARA WORKMAN
EDUCATING FOR THE CARE OF OUR ELDERS
MBBS 1977

Professor Barbara Workman is the director of medical services for the Rehabilitation and Aged Services Program (RASP) at Monash Health, one of a four-member executive responsible for an approximate \$100 million program operating across five major hospital sites.

Barbara gained her MD from the University of Melbourne in 1991. She was appointed professor of geriatric medicine at Monash University in 1997, and in 1999 she created MONARC, the Monash Ageing Research Centre, drawing together existing groups conducting research into ageing to form a single centre. Recent successful research grants include SNORE ASA (Study of Neurocognitive Outcomes, Radiological and Retinal Effects of Aspirin in Sleep Apnoea) and evidence-based care of people with dementia, both of which are funded by the National Health and Medical Research Council.

Her involvement in medical teaching and curriculum development began with her professorial appointment. In her role as co-chair of the Year 5 Curriculum Committee she ensured aged care became one of the four mandatory student intern placements, providing six weeks' clinical experience in subacute and community geriatric medicine. She is now co-chair of the Year 5/D Assessment Working Group.

Barbara has continued an active involvement with the Royal Australasian College of Physicians since becoming a fellow in 1977. Her 19-year membership of the Geriatric Medicine Education and Training Committee has led to a robust and professional training program for junior doctors. One of her major achievements has been positioning RASP at Monash Health as the preferred training site for advanced trainees in geriatric medicine in Victoria, providing experience in acute, subacute, ambulatory care, aged mental health and palliative care.

In her time away from work she sings with the Melbourne Women's Choir and attends musical and theatrical events. She is the proud mother of three young women, two of whom are medical students. A story that resonates with all working mothers comes from her first meeting with the all-male medical professors at Monash University; she reached into the pocket of her suit jacket for a pen and could only find a pink dummy.

Dr Eleanor Flynn
MBBS 1972

Barbara Workman, 2013; photograph. Courtesy of Barbara Workman



LOUISE CHRISTIE

NEVER TOO LATE TO PICK UP THE REINS AGAIN

MBBS 1977

Dr Louise Christie is one of those women doctors you're glad to have met. She's determined but unassuming. She is living evidence that after a break away from medicine, it is never too late to pick up the reins again and practise the sort of medicine you believe in.

Louise graduated in 1977, uncertain about the direction she would take. Her intern years provided the impetus to begin thinking, not only on her feet, as the job itself demanded, but about medicine and the role of the medical practitioner with the patient as singular being. She became interested in the treatment of children and in exploring means of giving voice to aspects of the patient not caught by routine medical diagnostic and treatment processes. She began training in psychiatry, but this was interrupted by the arrival of her own children.

For Louise, despite feeling that she didn't manage well the tension between personal study and raising a family, evidence would point to the contrary. Having faced attitudes to pregnancy and breaks in training that wouldn't be tolerated today, Louise decided to complete her family before resuming her career. She did an arts degree, majoring in English literature, and then took a part-time position in community mental health. She did this for many years before making the decision to resign. She spent 15 years out of medicine. During this time she became interested in and began to study psychoanalysis and infant mental health, and through this has found her way back into practice, in psychoanalysis with adults and children.

After taking years to negotiate the competing demands of family, career, training system and registration restrictions and demands, Louise considers herself lucky to have had the opportunity to establish a satisfying working life in an area in which a variety of long-held interests coalesced. She has been inspired in this by her own female colleagues—the women of the class of 1977 and those from her years in community mental health. Each has found her path through similarly complex situations.

Dr Kym Jenkins
GDipWH 1991



Katrina Watson, **Dr Louise Christie**, 2013; photograph. Courtesy of Louise Christie

MARGARET TOBIN
PASSIONATE ABOUT MENTAL HEALTH CARE
MBBS 1978

Margaret Tobin (1952–2002) was a passionate woman—passionate about mental health care, passionate about patients and their families. One of her strong interests was developing leadership in the field of mental health, and she wrote specifically about leadership for psychiatrists.

The eldest of eight children, Margaret graduated from medicine in 1978 and gained fellowship at the Royal Australian and New Zealand College of Psychiatrists (RANZCP) in 1986. She was also awarded a Master of Business Administration, a fellowship of the Royal Australian College of Medical Administrators and a fellowship of the Australian College of Health Service Executives.

Her initial career was in clinical services at St Vincent’s Hospital and at Willsmere. In 1988, she joined the Victorian Health Department’s Office of Psychiatric Services; thenceforth she worked in mental health administration. Having overseen the closure and mainstreaming of Lakeside Hospital to Ballarat Base Hospital, she moved to New South Wales. Those who worked with Margaret in New South Wales reforming mental health services emphasised her commitment to developing the highest standards of mental health care.

Requiring a director to oversee a ‘radical overhaul’ of South Australia’s mental health services, its Department of Human Services appointed Margaret. She began implementing the key priorities: enhanced mental health services for adolescents, stable supported accommodation initiatives for people with complex needs, access to 24-hour emergency services in rural and remote regions, greater integration of mental health services within a regional network, and the provision of training and education support to attract and maintain an effective mental health workforce.

On 14 October 2002, Margaret Tobin was shot dead as she exited a lift to enter her Adelaide office. Her murderer, Eric Gassy, was a former Sydney psychiatrist who blamed her for first raising concerns about his eligibility to be a psychiatrist, eventually leading to his de-registration. Her tragic death had a profound effect on her colleagues. The RANZCP established the annual Margaret Tobin Award in her honour, presented to the college fellow who has made the most significant contributions to administrative psychiatry in Australia and New Zealand over the preceding five years.

Dr Sandra Hacker AO
MBBS 1969

Dr Margaret Tobin Award, awarded to Bobbi Sawyer, 2010; photograph. Courtesy of SA Health



CHRISTINA MITCHELL
TRANSFORMATIVE EXPANSION IN RESEARCH
MBBS 1978

Professor Christina Anne Mitchell was inspired by her father's years in general practice and her mother's determination that her daughters embrace a tertiary education. Graduating from Melbourne Medical School, she undertook consultant training in haematology, obtained a PhD from Monash University and gained fellowships of the Royal Australasian College of Physicians and the Royal College of Pathology, Australasia. Her potential as a physician scientist was recognised by several scholarships, including a National Heart Foundation post-doctoral fellowship, which took her to the United States. On her return, Monash University appointed her senior lecturer in its Department of Medicine at Box Hill Hospital.

This signalled the start of a long association with Monash, which recently saw her appointed dean of the Faculty of Medicine, Nursing and Health Sciences—an acknowledgement of her leadership in research and research-training and her executive proficiency. She is one of only six professors at Monash to be appointed a Sir John Monash Distinguished Professor since 1995.

Christina's research focus has been characterising the function of unknown genes that regulate cell proliferation and growth, and which, when deleted or mutated, lead to human disease. Her work has been widely recognised and has attracted an extensive list of research awards. As leader of the Monash Department of Biochemistry and Molecular Biology and then the School of Biomedical Sciences, she drove a transformative expansion in Australian biomedical research.

She is frequently invited to speak or chair at key international meetings, to write reviews on her field in high-profile publications, and to work on the editorial boards of major biochemistry journals. A long track record of committee and board membership in the areas of research grants, fellowships, appointments and promotions, and broad scientific advice testifies to the respect of her peers.

Christina has always maintained an active role in undergraduate teaching. She still delivers lectures to undergraduate biomedical science and medical students, and until recently undertook bedside teaching to medical students. This commitment exemplifies her passion to 'narrow the interface between clinical medicine and basic research'.

Associate Professor Jenny Hayes
MBBS 1982

Christina Mitchell, 2013; photograph. Courtesy of Christina Mitchell



ROSEMARY LESTER
USING SCIENCE TO HELP OTHERS
MBBS 1980

Dr Rosemary Lester was born in Shepparton, Victoria and attended boarding school in Melbourne. A high-achieving science student, she was expected to pursue a career in either law or medicine. She drifted into medicine because she thought the degree might be a way into a career that could use science to help others. She entered the course in 1974, deferring in 1978 for the birth of her first child; she completed the course and gave birth to her second child in 1980.

After two years at St Vincent's Hospital, Rosemary worked part-time in general practice until 1988, giving birth to her third child in 1985. In 1986, she took up the part-time role of medical officer of health for the City of Melbourne, the greater part of which involved running the immunisation program. Evidence that immunisation had such absolutely tangible benefits in population health served as inspiration to Rosemary to actively pursue qualifications in public health; she undertook a Master of Public Health at Monash University, which she completed 1991. During this degree she joined the inaugural intake of the Victorian Public Health Training Scheme, in 1989, commencing her career in public health with the Victorian state government.

Awarded a fellowship that enabled her to undertake a Masters of Science in Epidemiology at UCLA (1992–1993), Rosemary gained further formal training in epidemiology and biostatistics. She credits Professor Terry Nolan's work in the area of immunisation as a catalyst for her own interest; Dr Graham Rouch (chief health officer when she commenced in the Victorian public service) as her exemplar for effective communication to the public on public health matters; and Professor Rob Moodie's work with the HIV/AIDS epidemic as inspiration for managing a major public health threat. In managing the 'swine flu' epidemic of 2009, Rosemary demonstrated her ability to combine these skills to great effect.

In 2012, she was appointed Chief Health Officer of Victoria. This reflects her early ambition of using science to help others.

Dr Lorraine Baker
MBBS 1979



Rosemary Lester, 2013; photograph. Courtesy of Rosemary Lester

FRANCES BRAMWELL
HELPING PEOPLE HELP THEMSELVES
MBBS 1981

The two aspects of Frances Bramwell's medical training that most interested her were paediatrics and infectious diseases. In her final year she was awarded the Arthur Sims travelling scholarship and she went to Zimbabwe. This trip determined the direction of her career. It was life changing. She experienced the harsh realities of medicine in a developing country in recent political upheaval, with health service delivery struggling to get off the ground. Bramwell was inspired by Dr Richard Lang's principles of primary care: affordable, accessible and appropriate practice. She has applied these principles throughout her career in public health.

After her internship and residency at Geelong Hospital, she spent most of the next ten years overseas. She returned to Africa in 1985 to work in the Wad Kowli refugee camp in East Sudan. This was extremely challenging professionally and emotionally, due to the high death toll in the camps. She also worked in Thailand, with the Lao people at Ban Napho refugee camp, in 1986–1987. Then in Quetta, Pakistan, she assisted Afghan refugees for three years as part of the Afghan Refugee Health Program. Bramwell observed first-hand people's remarkable resilience in extreme circumstances and their capacity to improve their health knowledge and acquire new skills. For example, in a refugee camp in Thailand, where there were no humidicribs for low-birth weight babies and no finances: 'the refugees came up with this idea to construct cribs out of plywood with a light globe at one end to provide extra heat'. In these refugee settings she was involved in training people in medical or community health work.

This has translated into her current work. Bramwell specialises in the treatment of drug addiction and public health. She believes training people who have had experience of drug abuse but no background in health is the key to delivering effective programs for intravenous drug users. Her experience in this field over the last 12 years has revealed the achievements people are capable of if given the opportunity.

She has always been interested in the interplay between social environment and political issues on health and the delivery of services.

Associate Professor Yvonne Bonomo
MBBS 1990



Frances Bramwell, 2013; photograph. Courtesy of Frances Bramwell

NADINE LEVICK HARNESSING THE POWER OF SOCIAL MEDIA MBBS 1983

Although not strictly part of the iGeneration, Professor Nadine Levick understands very well the power of social media and crowd sourcing technologies.

An established medical practitioner in the United States, Nadine has developed a smart-phone application to help bystanders intervene in the case of a sudden cardiac arrest. Named 'iRescu', the application provides users with relevant information on cardio-pulmonary resuscitation (CPR) and automated external defibrillator (AED) use and location, as well as locally specific emergency numbers.

There are more than 1000 out-of-hospital cardiac arrests each day in the USA alone, and the locations of AEDs in the community are largely ad hoc and unknown. Without immediate bystander intervention, with effective CPR and use of AEDs, it is often too late for a viable outcome once the ambulance arrives.

After graduating from the Melbourne Medical School in 1983, Nadine undertook her clinical training at the Austin Hospital, in Melbourne. She is now based in New York, working at the Winthrop University Medical Centre at the State University of New York. She previously worked as director of Pediatric Emergency Medical Services, at Harlem Hospital, and director of Research in Emergency Medicine, at Maimonides Medical Centre, Brooklyn.

Nadine credits her educational background for much of her success in the US. 'The outstanding training I received at the Melbourne Medical School prepared me so well and has held me in great stead to forge ahead in this USA environment', she says.

Nadine presented iRescu to an audience at the White House early in 2013, as part of a forum on public safety technologies. Her work was highly praised. The project has progressed from the implementation pilot phase and is now in the midst of a comprehensive global rollout.

'This type of technology could be valuable if applied to the bystander community to enhance the use of CPR and AEDs', she says. 'The project is there to bridge the existing gaps in the chain of survival, by use of the combination of a robust cloud-based data system and social media. We already have some Australian data input, in addition to Europe and Asia.'

Dr Sandra Neate
MBBS 1985

Nadine Levick with EMS Safety Foundation's new Demonstration Project: the Ambulance Safety INDEMO 1.0,
EMS World Expo, Las Vegas, 2013; photograph. Courtesy of Nadine Levick



FRIEDA LAW

TREMENDOUS ENERGY AND DEDICATION

MBBS 1983

Dr Frieda Law was born and grew up in Hong Kong, migrating with her family to Melbourne at the age of 16. She studied medicine at the University of Melbourne, attending the Royal Melbourne Hospital clinical school and graduating in 1983. Following an internship at the Royal Melbourne, she pursued her love of paediatrics and obtained her fellowship of the Royal Australasian College of Physicians in 1990. Frieda's interest in the scientific basis of medicine saw her undertake laboratory research at St Vincent's Institute for Medical Research, graduating with an MD degree in 1992, followed by post-doctoral training at the University of Geneva, Switzerland.

Frieda harboured a passion to enhance medical care for children from underprivileged backgrounds, leading to work as a volunteer paediatrician in Sri Lanka in 1994. She then went to Shanghai, China, working for Project HOPE, a US-based non-government health organisation, from 1996 to 2001. Starting as a medical educator, she became program director for building a state-of-the-art Sino-American children's hospital: Shanghai Children's Medical Center. She also established an international training program for healthcare professionals enhancing local standards of medical care and hospital practice.

Frieda's tremendous energy and dedication in medical education caught the eye of the managing director of the Li Ka Shing Foundation (Li Ka Shing being a Hong Kong businessman and philanthropist), who in 2002 appointed her a representative of the foundation, based at Shantou University Medical School in Southern China. In this role, she remains actively involved in undergraduate medical education and clinical paediatric training. She has overseen many innovative projects for the foundation, including major developments of the medical school and its five affiliated hospitals, building an East-West alliance with international universities, and overseeing development of a national hospice service program throughout China and a cleft lip and palate treatment program in Shantou.

Frieda visits her family in Melbourne regularly and maintains contact with fellow alumni and with Melbourne Medical School, St Vincent's Institute and the Royal Children's Hospital. We are indeed proud of her many achievements. Her virtues encompass courage, integrity, humility, generosity and excellence, values to which the Melbourne Medical School aspires for all our graduates.

Professor Doris Young
MBBS 1972

Concept for Shantou University Medical College scheduled for completion 2015, photograph. Courtesy Frieda Law



HELEN O'CONNELL
AN INSPIRATION TO YOUNG GRADUATES
MBBS 1985

Dr Helen O'Connell is a clinical leader in urology and surgery, and an inspirational model for women seeking to enter surgical professions. She became Australia and New Zealand's first female urologist in 1994. Dr O'Connell has three degrees from the University of Melbourne: MBBS; MMed Women's Health, for research on conservative treatments for urge incontinence; and an MD, for her pioneering female pelvic anatomy studies. Her anatomical studies have attracted international acclaim and reconceptualised clitoral and vaginal anatomy. She was awarded the Bruce Pearson Fellowship by the Urological Society of Australia and New Zealand (USANZ) in 1997, and the work has been publicised in several international and national documentaries. In 2007, the World Association of Sexual Health awarded her the lifetime achievement gold medal.

Since 2005 she has been a board member for the Royal Australasian College of Surgeons (RACS) and USANZ. She was the chair of RACS's Board of Surgical Research in 2006–08 and is currently chair of its Skills Facility Oversight, plus a member of the Academy of Surgical Educators and an examiner for RACS's part II examinations in urological surgery. She was a member of the federal government's National Continence Management Strategy in 2003–2004, including its chair of medical curriculum development.

Dr O'Connell has been the principal investigator on numerous drug and device trials. A collaborative project initiated in 1996 led to her performing the first human implant, in 2005, via a commercial partnership with Cochlear Limited. In 2004, her research group demonstrated that a strip of smooth muscle could be circularised, transplanted and then stimulated in situ to replace defective sphincteric function. The current iteration of the work involves a partnership with the Bionic Institute. She won the Alban Gee prize for this work in 2006.

Dr O'Connell has run a fellowship program for training younger urologists in surgical reconstruction to restore urinary function. She has developed simulations to permit procedures typically associated with significant complications to be practised in a laboratory setting. The neuro urology course she initiated has been run at RACS in 2009 and 2013.

Professor Lorraine Dennerstein AO
MBBS 1970

Helen O'Connell, 2013; photograph. Courtesy of Helen O'Connell



DONNA HENDERSON
WHEN THE PERSONAL BECOMES PRACTICAL AND POLITICAL
MBBS 1987

The birth of a child is one of the most significant events in our lives. For Donna Henderson, whose son was born at 26 weeks' gestation and developed cerebral palsy, it also shaped her medical career.

A general practitioner by training, Donna stopped paid medical practice for four years after Patrick's birth because of his complex care needs. Her frustrations about the difficulties negotiating such a highly fragmented and uncoordinated service system led her to contribute to the establishment of the Cerebral Palsy Education Centre to provide practical assistance and early intervention to families with children with a disability. Informed by her own and others' personal experiences of these struggles, she has subsequently spent well over a decade as an advocate for children with a disability. Donna continues to work for the Association of Children with a Disability and the Centre for Developmental Disability Health where she is heavily involved in teaching medical students about developmental disabilities at both the University of Melbourne and Monash University.

With the knowledge that disability services are highly influenced by government policy and programs, she has also been deeply active in local government initiatives to improve disability supports for families, being a longstanding member of the Council for Aged and Disability Support Services client reference group. She contributed to the establishment of the Australian Association for Developmental Disability Medicine, an organisation of medical practitioners that, among other achievements, successfully lobbied for a new Medicare item for an annual health assessment for people with intellectual disabilities. Continuing to respond to disability in very practical ways, she is now one of very few general practitioners in Australia whose clinical practice specialises in developmental disability.

I can only imagine her excitement about the recent establishment of DisabilityCare Australia. Notwithstanding her advocacy efforts on multiple fronts, there is little doubt that her personal joy is that Patrick is a happy teenager, who is well integrated within his mainstream school, where it sounds like being in a wheelchair has done little to dampen the typical mischievousness of 16-year-old boys.

Professor Susan Sawyer
MBBS 1985

Lee McRae, **Donna Henderson**, 2013; photograph. Courtesy of Donna Henderson



SHARON KEELING
DRIVEN BY A DEEP SENSE OF ETHICS
MBBS 1989

As a 22-year-old paediatric nurse, Sharon Keeling resolved to follow her lifelong ambition to be a doctor. She repeated Year 12 as a mature student at a private girls' school, and then combined medical studies with marriage and motherhood, graduating first in the University of Melbourne's class of 1989. In 1990, she was awarded the prize for best intern at the Royal Melbourne Hospital.

After she completed paediatric training, a PhD in molecular genetics and advanced training in clinical genetics, Sharon moved into law. She completed the University of Melbourne Juris Doctor in 2003 and joined the Victorian Bar in 2004, practising in personal injury, coronial proceedings and health professional disciplinary matters. Sharon's combined medical and legal expertise, and key support from mentors at the Bar, enabled her to establish a successful practice.

Sharon enjoys applying her medical knowledge to the law and thrives on the team-based strategic challenges it offers. She understands that medico-legal proceedings are stressful for doctors. She is able to differentiate between a bad outcome for a patient because of a bad disease and a bad outcome because usual medical practice was not followed. She knows what it is like to be looking after a desperately ill patient at three in the morning. She recognises that while doctors work hard and strive to provide excellent patient care, most doctors are likely to make a serious error of judgment in their working lifetime by reason of being human, and will need support when an error results in injury to a patient. She also believes that good support for plaintiffs 'gives them great comfort and recognises their loss'.

This inspirational woman is driven by a deep sense of ethics, an exceptional intellect and great determination. She firmly identifies as a lawyer and advocate, and loves her career. 'I've realised that there are many ways to be a useful member of society. Law is a different intellectual stretch to medicine. What is my future? I will be at the Bar. I want to continue to work on cases supporting clients; it is creative and satisfying.'

Dr Heather Wellington
MBBS 1982

Lee McRae, **Sharon Keeling**, 2013; photograph. Courtesy of Sharon Keeling



SARAH LARKINS
PASSIONATE ABOUT HEALTH EQUALITY
MBBS 1989

Sarah Larkins is Associate Professor in General Practice and Rural Medicine and Director of Research and Postgraduate Education at the School of Medicine and Dentistry, James Cook University, in Townsville. Her major research interests revolve around Aboriginal and Torres Strait Islander health, particularly maternal, child, family and reproductive health. She also works with communities to develop, implement and evaluate sustainable interventions and to improve access to health services for Indigenous Australians, rural residents, adolescents and other under-served populations. Her other interests include socially accountable health-professional education, capacity building in Indigenous research and doctors' health. She is passionate about advocacy and policy change to bring about health equity.

Obtaining an undergraduate medical degree and Bachelor of Medical Science from the University of Melbourne in 1993, Sarah completed her residency in Melbourne before moving to Townsville, where she pursued her clinical and academic interests in Aboriginal and Torres Strait Islander Health, and public and population health.

Sarah had not really considered a career in Indigenous health until her Year 6 elective. An eight-week placement at Amata, on the Pitjantjatjara lands in Central Australia, really opened her eyes to the health disparities in Australia and to the contribution of social determinants to health. She had decided to specialise in general practice—thanks to some inspiring role models in Melbourne and her inability to narrow down to a particular discipline. Undertaking training for academic general practice in either northern Queensland or the Northern Territory made sense given her interests. She applied for this training while travelling overseas, and the then NQ RACGP training program was the most accommodating and flexible, so Larkins moved to northern Queensland where she and her family have lived ever since.

She considers the combination of clinical work (whole person continuing care, with a focus on Aboriginal and Torres Strait Islander healthcare and youth health) with academic work the most satisfying aspect of her career. The most challenging has been balancing all this with her family life, but she feels the positives far outweigh the negatives.

Dr Emily Prewett
MBBS 1981



Sarah Larkins, 2013; photograph. Courtesy of Sarah Larkins

KYLIE MASON
DEDICATED TO COMMUNITY SERVICE AND ADVOCACY
MBBS 1996

Dr Kylie Mason is a clinician scientist committed to improving the care of patients with haematological malignancies. She is active in laboratory research, clinical trials, and teaching and mentoring future clinician-researchers. She also continues high-profile community service and advocacy.

Kylie graduated with honours from the University of Melbourne in 1996, and the series of scientific and community service awards she has since gained reflects her commitment and achievements in these fields. Examples include Young Victorian Achiever of the Year and the Young Australian of the Year Community Service Award (1996); the Victorian Premier's Award for Health and Medical Research (2009); and the L'Oreal-Unesco For Women in Science Fellowship (2012). The *Age* named her among 'Melbourne's Top 100 Most Influential People' in 2009 and 2012.

Kylie is a clinical haematologist at the Royal Melbourne Hospital and a senior post-doctoral research fellow at the University of Melbourne's Department of Medicine. She became fellow of the Royal Australasian College of Physicians and of the Royal College of Pathologists of Australasia in 2004, and was awarded a Doctor of Philosophy in 2007. She has an excellent record of scientific publications and international invitations.

At the same time, she is active in community service and advocacy for survivorship in cancer care. Her three career breaks have been time taken for the birth and care of her two children, in 2008 and 2010, and when she was diagnosed with a benign brain tumour that required resection, in 2009. This was a consequence of earlier cancer treatment.

Kylie's talents and career are committed to this field following her own experience of surviving acute leukaemia at the age of 15. Her successful recovery from the illness included overcoming the discrimination that she and her family faced from others in the community, as well as from friends at school. Kylie is passionate about the need for young people diagnosed with cancer to receive targeted therapies identified through research. She is also working to develop services that support young people and their families as they negotiate the journey to adulthood in the midst of treatments and recovery.

Professor Helen Herrman
MD 1982



Czesia Markiewicz, **Kylie Mason**, 2013; photograph. Courtesy of Kylie Mason

JESSICA LUONG
EDUCATION AS A WAY TO A BETTER LIFE
MBBS 2003

Jessica Luong's family left Vietnam by boat in 1979, hoping to leave behind the devastation of the war and the hardship of living under communist rule. Jessica was born while her family was en route to a better life, living in an Indonesian refugee camp.

During Jessica's early childhood years, her family lived in Germany, which meant that by the time they moved to Melbourne to settle in 1987, Jessica spoke Cantonese, Mandarin, Vietnamese and German. Jessica always wanted to be in a profession where she could help people, and so, when she became dux of Mac.Robertson Girls' High School, it made sense that she chose to pursue medicine.

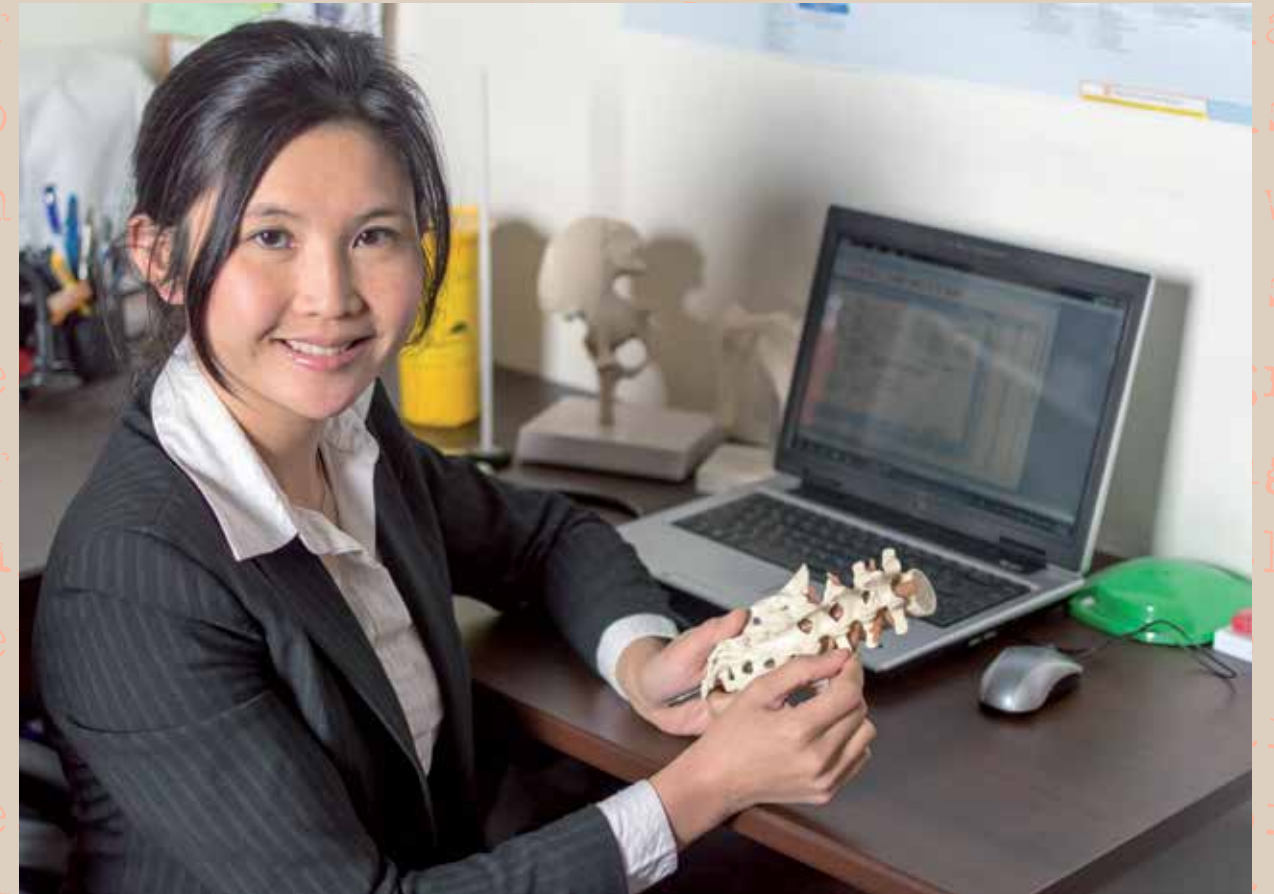
When the time came to specialise, Jessica chose rheumatology because it covers a broad spectrum of diseases. She was also drawn to the fact that it would allow her to work in an outpatient setting and maintain long-term relationships with patients who have chronic diseases. One of the highlights of her career so far has been a case report that she published in the peer-reviewed journal *Clinical Rheumatology*.

Jessica believes work is important, but also believes it is important to enjoy life outside of medicine. This belief has become stronger since the birth of her daughter, who at the time of writing was just 13 months old. Fortunately, Jessica was able to tailor her consultant work to suit her needs towards the end of her pregnancy and through the early period of caring for her daughter. She hopes that, in the future, rheumatology will offer part-time training to the large number of female trainees.

Ideally, Jessica would like to work four days a week, with a combination of public and private work and teaching, and to set up a multidisciplinary group practice. She believes this will give her the time to be a good role model to her daughter and have a balance between her career and motherhood.

Dr Shirley Zaklikowski
MBBS 1977

Jessica Luong, 2013; photograph. Courtesy of Jessica Luong



KATE ROBSON A YOUNG DOCTOR MOST TALENTED MBBS 2007

Dr Kate Robson graduated from the University of Melbourne in 2007 with an MBBS (Hons). A talented musician with a flair for languages, she complemented her medical studies with a Bachelor of Arts and a Diploma of Music. During her studies she was the recipient of many awards, including the Dean's Honour List in Medicine in 2004, 2006 and 2007, the Clinical Dean's prize for highest-placed medical student at St Vincent's Hospital, the Herbert Bower prize for old-aged psychiatry and, in arts, the Baillieu exhibition for the highest-placed student of French.

Kate was awarded a Rhodes Scholarship in 2008, and, after completing her internship at St Vincent's Hospital, moved to Oxford, England to undertake a research-based Masters in History and Philosophy of Medicine, focusing on the history of chronic illness in hospitals of the 19th century. While at Oxford, Kate also helped steer a health policy education program for medical students, and she pursued her passion for music, playing piano and cello in chamber music groups and orchestras, and singing in Christ Church's 13th-century cathedral as a member of the college choir.

She returned to clinical practice in Melbourne in August 2011, and is now a medical registrar at St Vincent's Hospital. She is currently in training for her fellowship of the Royal Australasian College of Physicians, developing her clinical skills and leading bedside teaching with medical students. She continues playing music, as a cellist in the Australian Doctors Orchestra and Melbourne's own Corpus Medicorum orchestra.

Kate's interest in medical history also plays a big part in her work. She had an important role in Melbourne Medical School's 150th anniversary celebration in 2012, through an invited presentation, 'Deans of the Distant Past', and through contributing a chapter to the publication *Highlights of the Collection: Medical History Museum*.

Kate Robson continues to excel and to develop her all-round skills. Although it is still early in her career, she has already made an important contribution as a woman in medicine.

Professor Patricia Desmond MBBS 1984

Kate Robson at the Brownless Medal award ceremony, 15 March 2012. University of Melbourne Advancement Office



LINNY KIMLY PHUONG
THE WATER WELL WOMAN
MBBS 2009

Linny Kimly Phuong is an extremely committed young doctor, currently studying to be a paediatrician. She set up a not-for-profit organisation to enable migrant and refugee groups to improve their access to health information and services. Named the Water Well Project—referencing the traditional place of gathering and information exchange—the venture is staffed by volunteers and uses interactive sessions in informal community settings to provide culturally appropriate health information, as well as assistance in navigating the health system.

Academically able, evident by a list of honours and awards gained throughout her education, Linny first studied pharmacy. After qualifying, she worked as a community pharmacist and became involved in the pharmacy's commitment to provide information sessions to the local community.

In 2005, she was accepted to study medicine, continuing to work part-time as a pharmacist in the community and industry, and as a university tutor. During this period she began to see the need to improve health outcomes for recent migrants and refugees. After some input from friends, she wrote a project proposal, which she presented to the Australian Medical Association. By establishing collaborative relationships with existing service providers to migrant and refugee groups, such as the Brotherhood of St Laurence, Linny was able to launch a successful pilot session with the Ethiopian community group.

The project has grown rapidly. In its first year, 2011, there were 20 volunteers and two sessions were delivered. In 2012, there were 12 sessions. Now there are 100 volunteers and there have been 25 sessions this year to date. Linny says the area is a joy in which to work, as people are so generous with their time. At each induction session there is a huge response, with long waiting lists of young doctors, final-year medical students and allied health professionals wanting to offer their services.

Linny says she has been inspired in part by the amazing friends who helped her refugee parents assimilate, and by her involvement in public education sessions run by community pharmacies. Being chair and founder of the Water Well Project is only the latest activity in her long history of community contribution.

Dr Patricia Fricker
MBBS 1972

Linny Kimly Phuong (fourth from left) with her Water Well project team, 2013; photograph. Courtesy of Linny Kimly Phuong



SHIRLEY GODWIN

CHALLENGING STEREOTYPES

MBBS 2010

Shirley Godwin is a Badimia Yamatji woman from the Mid-West region of Western Australia. She has lived, studied and worked in Aboriginal communities across the country.

Shirley came to study medicine after a 20-year career in health research, both laboratory and community based. She was deeply motivated by the devastating and ongoing harmful impact of colonisation on Indigenous Australians and felt driven to improve their health status. This was a powerful calling that translated into an emotional and intellectual minefield. She successfully completed the rigours of undergraduate study. She also experienced the loneliness and complexity of inhabiting a world where she belonged to a minority group that has been excluded, both explicitly and in subtle ways, from full status and participation. She navigated the assault on her own identity, straddling different worlds, different values, different knowledge systems. She struggled with typically negative depictions of Aboriginal and Torres Strait Islander peoples in case studies and clinical discussions. She witnessed a general lack of compassion and understanding of the life circumstances, of the intergenerational burden of grief and trauma, and structural disadvantage faced by Indigenous people. Shirley also came to know that what felt like hostility or indifference from many of her peers was often a more benign ignorance born of their own privilege.

With great resolve and courage, Shirley spoke up. She challenged stereotypes; she brought humanity and the lived experience to case discussions; she lobbied for greater inclusiveness; she challenged her teachers and fellow students to better understand that the burden of sickness, disadvantage and premature mortality experienced by many Indigenous people is a *result* of this country's history and not an expression of some intrinsic flaw.

Shirley's experience of studying medicine has led to a deep commitment to Indigenous medical education and support of fellow Aboriginal and Torres Strait Islander doctors-in-training. Since graduation, she has taught as a senior lecturer in Aboriginal Health at Notre Dame University (Fremantle Campus) and currently she is a GP medical educator and cultural mentor with WAGPET, the GP training body in WA.

Shirley has a deep sense of gratitude for the support and companionship she experienced in finding her way.

Dr Mary Belfrage
MBBS 1989

Shirley Godwin, 2013; photograph. Courtesy of Shirley Godwin



ALICE McNAMARA

WATER, STAIRS AND MEDICINE

Motivated, resilient and focused, 27-year-old postgraduate medical student Alice McNamara is in her second year of the Melbourne MD at the Royal Melbourne Hospital Clinical School. The eldest of three sisters, Alice, or ‘Mac’ as she is affectionately known, grew up in Melbourne and attended school at Loreto Mandeville Hall.

Alice sees her entrance into medicine in 2011 a career highlight, achieved after completing an undergraduate degree in science and commerce. But Alice has also mastered the water on the Yarra River and the stairs of Melbourne’s tallest building, Eureka Tower, and these activities too shape her life.

Alice began rowing in Year 9, inspired by the teamwork and athleticism required. Her achievements include dual world champion (2007 and 2008), seven national titles, World Cup gold, rowing at Olympic level and many Head of the Yarra titles with Melbourne University Boat Club. Alice credits the boat club with her seamless integration into university life, exposing her to professionals in law, medicine and other fields, who continue to row. Alice now enjoys mentoring younger students at the club, sharing her knowledge when possible, which has been enriched through a perspective on cultural diversity gained from competing internationally.

The strength of mind she shows through successfully combining medical study with rigorous physical training has required the support of coaches and their families, and the inspiration of Drs Larissa Trease, an energetic and selfless mentor, Peter Morley and Neil Strathmore. As a representative of the Victorian Institute of Sport and Melbourne University Sports, Alice regularly speaks to younger students on goal-setting and balancing sport and study.

Alice’s competitive spirit has contributed to her success in both medicine and sport, with her altruism driving her winning stair climb as part of a charity team run up Eureka Tower. Her capacity to reach great heights has been revealed in a most literal way through winning climbs of Malaysia’s KL Tower and New York’s Empire State Building.

Alice provides an excellent role model to aspiring young athletes and medical students. Embracing the values of excellence, teamwork and communication—strengths Alice brings to medicine—will ultimately enhance patient care and benefit the community.

Dr Mary Anne McLean

MBBS 1981

Alice McNamara, 2013; photograph. Courtesy of Alice McNamara



NGAREE BLOW DESTINED TO MAKE A DIFFERENCE

My name is Ngaree. I am an Indigenous woman from Bangerang and Noonuccal country. I am in my third year of a four-year postgraduate medicine degree at the University of Melbourne.

My mother's side of the family is Bangerang, from land at the top of Victoria across Shepparton and Wangaratta. My father's side of the family is Noonuccal, from North Stradbroke Island, or as we call it Minjerribah, in Queensland. I visit these areas often, but I have lived most my life in Melbourne.

I grew up very proud of my culture, and when I was younger I loved to teach others about my culture. I was often faced with negative stereotypes that disheartened me. I wanted to prove these people wrong, so I aimed high and received a scholarship to Methodist Ladies' College, in Kew. I made it my duty to learn about Australian history and its consequences for Indigenous Australians. I began to understand more about the disparities between Indigenous and non-Indigenous people, with one of the largest gaps existing in health. I also found a love for biology and how the body worked, so I strove for medicine.

I didn't get into medicine from school, so I decided to find other pathways in. I finished a science degree and was successful getting into the Doctor of Medicine (MD) postgraduate course straight after. I have focused on Indigenous health, as I want to truly make a difference in addressing the poorer outcomes of our people. I am passionate about educating others; I believe the key to improving Indigenous health is to first understand the underlying reasons.

I have been involved in Indigenous health in many ways since starting my MD. I joined Outlook, our rural health club, and was elected Indigenous health chair this year. I have been involved in student conferences, organising speakers and running a session on Indigenous health in 2012. I have completed an elective at the Victorian Aboriginal Health Service and a GP rotation in Shepparton. And I am the student representative of the Australian Indigenous Doctors' Association.

I haven't decided on my specialty just yet, but I know that I will be involved in Indigenous health.

Ngaree Blow, 2013; photograph. Courtesy of Ngaree Blow



LOUISE RICHARDSON INSPIRED BY RESILIENCE

I have joined the Melbourne Medical School as a mature-age student and am currently in the second year of my degree. While this has given me the benefit of life experience, it also means I have had the challenges of balancing family, work and study commitments. I have a son with special needs, so I deferred studying medicine until he had some independence. The faculty is very supportive of all students, but occasionally in the broader learning environment cultural and ageist attitudes exist.

I was raised in Melbourne and am a descendant of the Wiradjuri people; I proudly identify as Aboriginal. Being part of a struggle and witnessing struggle and resilience is what inspired me to do medicine. Experiencing both the good and less good aspects of our medical system, and wanting to be part of a drive for positive change from within the system set me on this path. We can't undo the layers and generations of hurt that have played out, but we can make a commitment to deliver quality, culturally sensitive medicine that not only restores health, but also fosters and maintains wellness.

I am very interested to direct my career into mental health, particularly adolescent mental health. I believe that wellness of the mind is a major determinant of wellness of the physical body. I am also passionate about the benefits of exercise and physical activity for both physical health and mental wellbeing. There is increasing evidence of the effects of physical activity interventions on various dimensions of mental health and psychological wellbeing, but to achieve health goals the environment must be right. So my overriding aim is to become part of a medical culture that creates the right healing environment through recognition of the whole person: their culture, their history, their language, their struggles, their resilience and their survival.

I believe medicine is a great way to contribute to the community, and I would advise medical aspirants to follow their heart. The wonderful aspect about the new graduate entry system is that it opens up even greater access for people to enter. If you have enough vision and tenacity, you can come from any walk of life, fulfill the entry requirements in a systematic way and then watch your ambition transform into reality.

Lee McRae, **Louise Richardson**, 2013; photograph. Courtesy of Louise Richardson



LIST OF AUTHORS

ALUMNI AND STUDENTS OF THE MELBOURNE MEDICAL SCHOOL

Dr Lorraine Baker is a general practitioner and graduate of the University of Melbourne (1979). After two years at the Queen Victoria Medical Centre she obtained a Diploma of Obstetrics and moved into rural general practice. In 1983, she founded the Belmore Road Medical Centre, which she has owned and operated with her husband since he joined her in 1984. She was one of the first students to enrol in the Graduate Diploma in Women's Health, a course that stimulated her lasting interest in the social determinants of health. She was founding chair of the Inner East Melbourne Division of General Practice. After serving on the AMA Victoria council, she was elected to the board in 2010 and re-elected in May 2013. Involvement with the AMA allows her to work in various ways for the profession and for public health. In 2011–2012 she served with the state government alcohol and other drugs advisory group.

Dr Chris Bayly MD BS, FRANZCOG, FRCOG, MPH began medicine planning a career in genetics research; she was seduced by obstetrics as an undergraduate, and after specialist qualification she practised gynaecology. She spent a decade working mainly in infertility and IVF and became a founding director of Melbourne IVF. She was also interested in the contraceptive end of the fertility spectrum—led and inspired by Gytha Betheras and her team—and continued in this field when she ceased private practice to do further study. In the late 1990s, Chris undertook a Master of Public Health, followed by various management, service development and project roles, mainly at the Royal Women's Hospital. She has worked to support access to medical abortion and is currently engaged in collaborative research on long-acting contraception, fertility management and female genital cutting.

Dr Mary Belfrage MBBS is the medical director of the Victorian Aboriginal Health Service in Fitzroy, Melbourne, a position she has held since 2009. This multi-faceted role includes policy and service development, research, teaching and clinical GP practice. Above all, the role provides clinical governance leadership for a model of primary healthcare for Aboriginal people that combines clinical excellence with cultural and community knowledge. Mary is a visiting lecturer at several universities, and has an appointment at the University of Melbourne as an honorary senior clinical lecturer. Mary has worked in a range of primary healthcare settings over the past 20 years, including urban general practice and both urban and remote Aboriginal health services. She has also been extensively involved in various pilot and research projects in the fields of social and public health. She has a broad interest in safety and quality issues in healthcare delivery, particularly how that translates into the patient experience of receiving effective high-quality care. Mary lives in Northcote with her partner and three daughters.

Professor Beverley-Ann Biggs graduated with an MBBS in 1979. She undertook house officer and registrar jobs at St Vincent's Hospital, Fairfield Infectious Diseases Hospital, and the Northern and Western General Hospitals in Edinburgh. She completed her PhD at the Walter and Eliza Hall Institute (University of Melbourne, 1991), FRACP in 1987 and FRCP (Edinburgh) in 1992. She has held joint appointments at the Royal Melbourne Hospital in the Victorian Infectious Diseases Service, and the University of Melbourne since the mid-1990s. At University of Melbourne she heads the International and Immigrant Health Group, and is involved in research in refugee health, infectious diseases, and maternal and child health, as well as service and policy development. Beverley-Ann has authored 105 journal articles, 14 book chapters and one book, and been awarded more than \$12 million in research funding. She is married to Associate Professor John Hayman. Their son, Thomas Hayman, is currently a student at the University of Melbourne.

Professor Julie Bines MD, MBBS, FRACP is the inaugural Victor and Loti Smorgon Professor of Paediatrics and deputy head of the Department of Paediatrics at the University of Melbourne. She is a paediatric gastroenterologist and head of Clinical Nutrition at the Royal Children's Hospital, Melbourne. She is recognised nationally and internationally for her leadership in clinical and research efforts aimed at improving the outcome for children with intestinal failure. Julie also leads the RV3 Rotavirus Vaccine Program at the Murdoch Children's Research Institute, a program that aims to develop a low-cost neonatal rotavirus vaccine to prevent this disease from birth worldwide.

Dr Katherine Bond was born in Melbourne and grew up in Gippsland and Ballarat. She initially completed a BSc at the University of Melbourne, focusing on genetics and immunology. Following this, she entered medical training as part of the second year of the university's postgraduate medical course. She undertook her clinical training at St Vincent's Hospital and her obstetrics and paediatrics term in Oslo, Norway. Katherine graduated with honours in 2005 and continued on at St Vincent's for her internship. Her interest in infectious diseases and public health led to a residency in Darwin and then to further study at the Liverpool School of Tropical Medicine, in 2009. Katherine then volunteered at the Queen Elizabeth Central Hospital in Blantyre, Malawi. Returning to Melbourne, she completed her FRACP examinations and is now in her second year of advanced training in infectious diseases and microbiology.

Associate Professor Yvonne Bonomo is a physician and Melbourne University medical graduate (1990). As medical registrar, she worked in various specialties, but it was a new area of medicine at the Centre for Adolescent Health at the Royal Children's Hospital that most excited her. The prevalence of young people with alcohol and drug problems was on the increase and this prompted her to return to her *alma mater*, St Vincent's, to gain further experience in another new area of medicine: addiction. She completed a PhD that explores alcohol use in adolescence through to young adulthood. As a physician she engages in clinical work, research and education in a number of contexts—hospitals, correctional services, youth and the homeless—and collaborates internationally, including with the World

Health Organisation. Her leadership roles have included chair of Education and later president of the chapter of Addiction Medicine (RACP) and board member of the Australian Drug Foundation.

Associate Professor Lynda Campbell trained as a haematologist at the Royal Melbourne and Alfred Hospitals in Melbourne and the Royal Free Hospital in London. She then obtained a Keogh Fellowship from the Cancer Council Victoria to train in cancer cytogenetics in Margaret Garson's laboratory at St Vincent's Hospital in 1988. She spent a year in Philadelphia working in Dr Carlo Croce's research group before returning to St Vincent's Hospital in 1991. On Margaret Garson's retirement in 1992, Lynda was appointed director of the cytogenetics laboratory. The department was renamed the Victorian Cancer Cytogenetics Service in 1993 to reflect its role as a statewide reference centre for cancer cytogenetics. Lynda is also a principal fellow in the University of Melbourne Department of Medicine at St Vincent's Hospital.

Dr Anne Cass graduated from the University of Melbourne in 1982. She completed two years' general surgical training at St Vincent's Hospital and then commenced specialist surgical training in ENT in 1988. She was appointed to the senior medical staff at the Royal Victorian Eye and Ear Hospital in 1992 and followed in Jean Littlejohn's footsteps becoming a head of unit, in 2004. Anne is very involved in training young surgeons and is an examiner for the fellowship in otolaryngology/head and neck surgery. Since 1994 Anne has also worked in the Western District of Victoria, and ten years ago gave up private practice in Melbourne to work and live in Hamilton, with fortnightly trips to Melbourne to work at the Eye and Ear Hospital. She has learnt to fly and uses a light plane to commute to Melbourne and to provide outreach ENT in the Western District.

Dr Heather Cleland attended Strathcona Baptist Girls' Grammar School in Melbourne and the University of Melbourne Medical School. She graduated in 1980 and obtained the FRACS in 1989, in plastic surgery. She is currently visiting plastic surgeon at the Royal Children's Hospital and Alfred Hospital in Melbourne, where she is director of the Victorian Adult Burn Service. She is a plastic surgery member of the Court of Examiners of

RACS and adjunct senior lecturer at Monash University. She is a member of various boards and councils, including councillor and treasurer of the Australian Society of Plastic Surgeons; member of the Medical Advisory Board of the Donor Tissue Bank of Victoria; and chair of the steering committee of the ANZ Bi-National Burn Registry. She is currently president of the Australian and New Zealand Burn Association.

Dr June Danks (nee **McMullin**) graduated with an MB,MS from the University of Melbourne in 1954 and then was resident medical officer at the Royal Melbourne Hospital from 1955 to 1957. She married Professor David Miles Danks in 1957. She did sessional work at Australia House in 1961, Kindergarten Training College (Melb), Lauriston Girls' School, and in 1974 attended a course to update women doctors. Dr Gytha Betheras then invited her to join the family planning clinic at the Royal Women's Hospital, where she worked until 1995. She also attended the Pregnancy Advisory Clinic (1978–1995), the Antenatal Clinic (1985–1995) and the Menopausal Clinic (1978–1995) at the Royal Women's. In 1975–1976 she attended the Menopausal Clinic at Prince Henry's Hospital, and from 1974 to 1993 she worked in family planning clinics for the Department of Health, Victoria. At the O'Connell Family Centre she was relief medical officer for Dr Bell Brodrick, working in post-natal depression. Her other interests were with the kindergartens, and she was involved in a submission to Premier Rupert Hamer to fund kindergarten for three-year-olds, which was implemented. She was also a delegate to the Committee of Women Shaping the Nation, chaired by Joan Kirner, which initiated the petition and Honour Roll of Women (2000–2001). Since 1987, June has been an interested member of Soroptimist Melbourne Club.

Associate Professor Elizabeth M. Dax AM gained her MBBS (1971) and MD (1989) from the University of Melbourne and her PhD (1977) from Monash University. After 13 years in the USA at the National Institutes of Health, she returned to direct and develop the National Serology Reference Laboratory, Australia, which administers quality assurance for blood-borne virus tests and testing nationally and internationally. It also administers an international program on

laboratory systems improvement and is a World Health Organisation collaborating centre. Elizabeth has authored 100 peer-reviewed publications and two books. More recently, she has concentrated on board work (Graduate AICD) and is chair of the boards of the Dax Centre and St Hilda's College. In 2001, she was awarded a Membership of the Order of Australia for services to medicine. Elizabeth and her husband, Professor Hugh Taylor AC, have four children, who are all graduates of the University of Melbourne.

Dr Barbara Demediuk graduated with honours in 1984 from the University of Melbourne, and then trained in gastroenterology at the Royal Melbourne Hospital, Massachusetts General Hospital, Harvard Medical School, Boston and the Ludwig Institute for Cancer Research, in Parkville. She is in clinical practice as consultant gastroenterologist at St Vincent's Hospital, Melbourne, where she works in endoscopy, liver clinic and on ward service. She also has a private practice, based at St Vincent's Private Hospital, in general gastroenterology, with a particular interest in liver disease.

Professor Lorraine Dennerstein AO was appointed to a personal chair at the University of Melbourne, where she was foundation director of the Office for Gender and Health and a professor in the Department of Psychiatry. She established and directed the first Australian academic centre for teaching and research in women's health, and also the first inpatient mother-baby psychiatric unit in an obstetrics hospital. In recognition of her contribution to women's health she was made an Officer of the Order of Australia in 1994. In 1970, Lorraine graduated MBBS, achieving the exhibition in obstetrics and gynaecology and associated prizes as well as an honour in surgery. She has been a consultant to the Commonwealth Secretariat (London), the World Health Organisation, the Global Commission on Women's Health (WHO) and the International Bioethics Committee of Unesco. For more than 30 years she has researched the relationship of ovarian steroids to mood and sexual functioning. She is a world authority on menopause, and her achievements for medical education in relation to women's health issues have been recognised by the Australian government



Cat. 51 **Lorna Lloyd-Green (1910–2002) with Margaret O'Reilly at Queen Victoria Hospital, 1940;** photograph; 7.2 × 11.5 cm; gift of Mrs Wendy Alexander; MHM04580

and the international medical community with multiple awards. A fellow of the Royal Australian and New Zealand College of Psychiatrists, she has been president of national and international medical societies and organised national and international scientific conferences. She is a past president of the International Society for the Study of Women’s Sexual Health and is currently review editor of the *Journal of Sexual Medicine*. In July 2005, the World Association of Sexology awarded Lorraine a gold medal for Lifetime Achievement in Sexuality Research. She is Professor Emeritus in the Department of Psychiatry, the University of Melbourne.

Dr Carolyn Michelle De Poi graduated with an MBBS (honours) from the University of Melbourne in 1988. She deferred her intern year and completed a Bachelor of Medical Science in the field of medical history, researching the life of Dr Mary Clementina De Garis. Carolyn returned to clinical work in 1990, with residency years at the Royal Melbourne Hospital. She joined the general practice training program and gained the DRANZCOG, FRACGP, FACRRM and GradDipRuralGP over subsequent years. In 1995, she joined the Beechworth Surgery, working in procedural general practice with VMO rights at the local small rural hospital. She was appointed to QA and medical advisory committees and became a RACGP examiner. In 2007, Carolyn joined Bogong GP Training as a medical educator, training GP registrars, international medical graduates and medical students in north-eastern Victoria. She continues to work part-time in rural general practice.

Professor Patricia Desmond is the Edgar Rouse Professor and head of the University of Melbourne Department of Radiology, and director of the Department of Imaging at the Royal Melbourne Hospital. She qualified MBBS at the University of Melbourne in 1984, after obtaining a bachelor and masters qualification in physics. Her most recent medical qualification is Doctor of Medicine, in 2005, studying magnetic resonance imaging in acute cerebral ischaemia. A well-established neuro-radiologist, she is recognised as a specialist in neuro-imaging, a field in which she has published effectively and extensively. She has more than 100 publications and two book chapters, and her areas of research interest are neuro-imaging in stroke, brain tumours, dementia and epilepsy.

Dr Elif Ekinci graduated from the University of Melbourne with an MBBS (2000) and undertook physician training at St Vincent’s Health and Austin Health (FRACP 2009). She completed a PhD on dietary salt intake and type 2 diabetes at the University of Melbourne in 2011. Elif is an endocrinologist and an NHMRC early career post-doctorate research fellow. She is active in diabetes research and supervises PhD students. She has the following appointments: director of Diabetes & Endocrinologist, Austin Health; senior research fellow, Menzies School of Health, Darwin; senior research fellow, University of Melbourne; and visiting endocrinologist, Northern Territory affiliated with BakerIDI. Since her PhD was conferred, Elif has worked part-time in research to allow her to care for her young children. Despite this, she has 20 publications, has given more than 50 national and international abstract presentations and has been awarded more than \$880,000 in research funding.

Professor Susan Elliott MBBS, MD, FRACP graduated from medicine at the University of Melbourne in 1982, as dux of the Austin and Repatriation General Hospital’s clinical school and a recipient of the Senior Medical Staff Prize. Her specialist training is in gastroenterology and she has worked as a consultant physician at the Austin, Western and Royal Melbourne Hospitals, while concurrently pursuing her interest in medical education. Her academic career has been at the University of Melbourne: as director of the Faculty of Medicine, Dentistry and Health Science’s Education Unit, she was instrumental in developing the new undergraduate medical curriculum; and she has been a medical curriculum development consultant nationally and internationally. More recently as Pro Vice-Chancellor (Teaching, Learning and Equity) she was involved in developing the Melbourne Model. She is currently Deputy Vice-Chancellor Engagement.

Dr Gillian Farrell graduated from the University of Melbourne in 1978, receiving the Kate Campbell prize in neonatal paediatrics. She was an intern and surgical resident at the Royal Melbourne Hospital before spending a year tutoring in anatomy and physiology at the University of Melbourne while studying for her first-part exam in surgery. She trained in plastic surgery at several hospitals in Melbourne, completing her fellowship at the end of 1986. She then spent

three years overseas broadening her surgical and cultural horizons, working in India, France, the UK and Malaysia. Gillian returned to Melbourne in 1990 and worked as a consultant in plastic surgery at Royal Melbourne Hospital and Western Hospital for some years. She was always interested in plastic surgery of the breast, particularly breast reconstruction and the correction of asymmetry. Gillian and her partner, John Hunt, a respiratory physician, have four children, born between 1993 and 1998. In 2003, the family lived in Fiji for 18 months, and since returning Gillian has worked in private practice in Melbourne, specialising in plastic surgery of the breast. The family spends most holidays at Point Lonsdale. Gillian also loves skiing and has for the last ten years been rowing regularly on the Yarra with other enthusiastic mums.

Dr Eleanor Flynn graduated with an MBBS in 1972. She also has education and theology degrees and is a fellow of the Colleges of General Practice and Medical Administration. In the UK and Australia she has worked in general practice, aged care and management positions. She is currently a senior lecturer in medical education at the Melbourne Medical School, where she is involved in curriculum development for aged care, palliative care, ethics and communication skills for medical students, as well as the selection of medical students. Clinically, she is a consultant in palliative care at St Vincent’s Hospital and the Royal Melbourne Hospital, where she teaches students and supervises interns and trainees as part of her clinical roles. Her research involves projects on language and communication skills in international medical graduates, support for staff who support medical students, the effectiveness of palliative-care teaching and innovative methods for medical student selection.

Dr Patricia Fricker had the privilege of training at the University of Melbourne and St Vincent’s Hospital. This was followed by a year of paediatrics at the Prince of Wales Hospital, in Sydney. Patricia then elected to travel and have a family, but found training in general practice invaluable. She now has three granddaughters, aged between two and six, which she says does wonders for brushing up her approach to treating small children. She spent 16 years as a member of the Social Security Appeals

Tribunal, hearing appeals including eligibility for disability support pensions and child disability and carer’s allowances. For ten years she served on the Commonwealth Administrative Appeals Tribunal, reviewing decisions involving medical evidence. A general practitioner in the Whitehorse and Manningham area for 37 years, she intends to continue part-time for as long as she feels she can make a contribution.

Dr Geraldine Goss graduated from the University of Melbourne in 1987 and subsequently trained in adult medicine, specialising in medical oncology. She went on to complete a laboratory-based doctoral degree, examining the role of growth factors in breast cancer. In 1997, she moved with her husband and three children to Boston, Massachusetts, where she worked at the Dana Farber Cancer Institute. It was here that her interest in the treatment of women with breast and gynaecological cancers intensified. She developed a special interest in palliative care, noting, with disappointment, the lack of supportive services in the USA. After her return to Australia in 2000, she completed a masters degree in women’s health. She works in the public and private sectors, specialising in the treatment of women’s cancers and the care of terminally ill patients.

Professor Jane Gunn PhD, MBBS is the inaugural chair of Primary Care Research and head of the General Practice and Primary Health Care Academic Centre at the University of Melbourne.

Educated first in Sale, Gippsland, in rural Victoria, she resided at Newman College for the early years of her university life. She is a past president of the Australian Association for Academic Primary Care (AAPC) and she currently serves on the Research Committee of the National Health and Medical Research Council and is the chair of the Northern Melbourne Medicare Local board. In 1991, she was the inaugural recipient of the Alan Chancellor Award from the RACGP and in 2008 the inaugural recipient of the AAPC Bridges-Webb Medal for exceptional contribution to general practice research. She leads a successful multidisciplinary research group investigating depression and multi-morbidity in primary care. She continues her clinical work in general practice at Harp Family Medical Centre, where she has practised since 1996.

Professor Robyn Guymmer is a medical retinal specialist at the Royal Victorian Eye and Ear Hospital, and head of the Macular Research Unit at the Centre for Eye Research Australia (CERA), University of Melbourne. She is also deputy director of CERA and deputy head of the Department of Ophthalmology, University of Melbourne. Robyn is a clinician scientist, with age-related macular degeneration disease being her major research interest. In 2002, she was awarded the Australian Society for Medical Research Amgen Research Award for translational research, and in 2008 was awarded a NHMRC practitioner fellowship. She has written ten chapters for ophthalmic textbooks, as well as more than 150 research papers, principally on age-related macular degeneration. Her work has recently extended to directing CERA's contribution to the Bionic Vision Australia partnership, aiming to develop a bionic eye. She is married to Graeme Harris and they have two children, Andrew and Gillian.

Dr Sandra Hacker AO is a psychiatrist in private practice, who also works at the Alfred Hospital's Heart-Lung Transplant Unit. Her prime area of clinical interest is severe trauma, treating adult victims of severe childhood sexual assault. Her medico-legal interests are in crimes compensation, Workcover and medical negligence. She is a fellow of the Australian Institute of Company Directors, former secretary of the Royal Australian and New Zealand College of Psychiatrists, former president of the Australian Medical Association (AMA) Victoria and federal vice-president of the AMA. She chaired the board of the Northern Metropolitan Health Service and served on the board of Eastern Health. She chaired the Australian Institute of Health and Welfare, the Mental Health Research Institute and the Australian Health Ethics Committee, and was deputy chair of the Human Genetics Advisory Committee, principal committees of the NHMRC. Sandra also chaired the Cunningham Dax Collection of Psychiatric Art Advisory Committee. She founded the Victorian Doctor's Health Program and was a member of the NHMRC Health Privacy Working Party and the Commonwealth Exhaust Gas Suicide Working Party. Sandra was appointed an Officer of the Order of Australia in 2005 and received a Doctor of Medical Science *honoris causa* from the University of Melbourne in 2012.

Associate Professor Jenny Hayes graduated from the Melbourne Medical School with an MBBS in 1982. She has more 20 years' experience teaching anatomy into a wide range of subjects and professional courses at the University of Melbourne. Students and peers regularly acknowledge her teaching skills; she was awarded the School of Medicine Teaching Award in 2008 and the University of Melbourne David White Teaching Award for Teaching Excellence in 2013. She implemented the first-ever anatomy workshop program for medical and dental students in Phnom Penh in November 2010, which continues as a collaboration between the University of Melbourne, Phnom Penh University of Health Science and the International University of Phnom Penh. In January 2011 and January 2013 she travelled to the School of St Jude in Tanzania, as part of an international team of volunteer health professionals. Jenny promotes the crucial University of Melbourne Body Donor Program through her implementation of an annual Commemorative Thanksgiving Service, which brings together students and faculty members with families and friends of donors. Through this interaction, students develop a richer understanding of the life of donors, while for many family members the service provides a sense of closure and an alternative to the traditional funeral, which is inevitably compromised.

Dr Kathleen Hayes A Mus A (Melb), MBBS (Melb), DCH (Dublin), FRCPA graduated in medicine in 1958 and worked at the Queen Victoria Hospital, the Royal Children's Hospital and the Health Department before travelling to London in 1963. There, she became research fellow at the Hospital for Sick Children, Great Ormond Street, working mainly on prenatal rubella virus infection. After returning to Melbourne in 1968, she became a research fellow in a prospective study of cytomegalovirus (CMV) in pregnancy, based at the Royal Children's Hospital. This and subsequent studies at the Department of Paediatrics, Monash University contributed to clarification of the epidemiology, and recognition and elucidation of the complex nature of prenatal CMV infection, which can cause brain damage, deafness and other abnormalities. She continued research in the field of prenatal viral infections until 1978, when she joined the Virology Department, Fairfield Hospital. There, she maintained a particular interest in CMV.

Since 1996, she has been a virologist at Dorevitch Pathology, currently in an honorary consultant role, focusing on interpretation of CMV serology in relation to stages of pregnancy.

Professor Helen Herrman is a psychiatrist and public health physician, with career interests in community psychiatry and promoting mental health. She is professor of psychiatry and director of research at Orygen Youth Health Research Centre and the Centre for Youth Mental Health, at the University of Melbourne; and director of the World Health Organisation (WHO) Collaborating Centre for Mental Health in Melbourne. She is a NHMRC practitioner fellow, with research interests in improving mental health for young people in out-of-home care, family violence and depression in primary healthcare. Her international work includes service as the World Psychiatric Association secretary for publications (2005–2011) and currently president-elect of the Pacific Rim College of Psychiatrists and of the International Association for Women's Mental Health. She was fortunate to work part-time for several years after the birth of her two sons. Subsequently, she became professor and director of psychiatry in St Vincent's Health, Melbourne and the University of Melbourne (1992–2005) and acting regional adviser in mental health for WHO's Western Pacific region (2001–2002).

Dr Kym Jenkins graduated MBChB from the University of Manchester (UK) in 1980 and initially specialised in general practice. She moved to Australia in 1986 and worked in general practice before commencing psychiatry training, completing her RANZCP fellowship in 1998. She was one of the first women doctors to undertake the Graduate Diploma of Women's Health at the University of Melbourne, completing in 1991. This Graduate Diploma was developed under the vision and leadership of Professor Lorraine Dennerstein and was offered through the Key Centre for Women's Health in Society, a landmark in women's health, medical feminism and one of the first WHO collaborating centres. Dr Jenkins has held a range of roles in psychiatry in both the public and private sectors. She is currently the medical director of the Victorian Doctors' Health Program and has a private practice specialising in women's health issues.

Professor Fiona Judd graduated in medicine from the University of Melbourne in 1978. She completed her training in psychiatry at the Royal Melbourne and Austin Hospitals, specialising in consultation-liaison psychiatry. Her clinical and research work has focused on anxiety and depression in the context of medical illness and in association with the reproductive stages of pregnancy and menopause. She has a strong interest in education and training of undergraduates, general practitioners and psychiatrists, and was a key participant in the development of the joint Monash University and University of Melbourne Graduate Diploma and Masters in General Practice Psychiatry. Fiona was inaugural professor of Rural Mental Health at Monash University, based in Bendigo, in central Victoria, before taking up her current role as director of the Centre for Women's Mental Health at the Royal Women's Hospital, Melbourne and professorial fellow in the University of Melbourne's Department of Psychiatry in 2007.

Dr Joanne Katsoris graduated in 1989 and completed her intern and resident years at the Austin Hospital, Maroondah Hospital and PANCH in Melbourne. In 1993, she started a career in medical management, working at the Mercy Hospital for Women and the Alfred Hospital while completing an MBA. In 1995, she joined the Red Cross Blood Service for 12 months, in a public health project, and in 1996 she joined the Medical Practitioners Board of Victoria (MPBV), where she stayed until 2010. While working for the MPBV, Joanne gained unique experience in all facets of regulation, including managing the registration department, investigating notifications, managing impaired and poorly performing practitioners, policy development and communications. While working at MPBV, she continued to work clinically in a part-time capacity at the Blood Bank. Joanne joined the Australian Health Practitioner Regulation Agency in 2010, where she provides policy, stakeholder and administrative support to the Medical Board of Australia.

Professor Christine Kilpatrick MD, MBA, MBBS, FRACMA, FAICO holds an undergraduate medical degree, Doctor of Medicine and Master of Business Administration from the University of Melbourne. Following her medical graduation she pursued a career in neurology, specialising in epilepsy. She worked in

both public and private practice, as well as enjoying an academic career at the Royal Melbourne Hospital (RMH), where she established and led its epilepsy program. Christine was appointed chair of the RMH senior medical staff in 1999 and a member of the Women's & Children's Health Board in 2000, of which she was appointed deputy chair in 2001. In the early 2000s, Christine's career developed into hospital management, and she was appointed executive director of Medical Services, Melbourne Health and later executive director of RMH. She became CEO of the Royal Children's Hospital in August 2008. In addition to her professional responsibilities, she has also chaired the Victorian Quality Council in Healthcare and the Methodist Ladies' College board. She was awarded a Centenary Medal for her contribution to healthcare in 2003.

Melissa Lee is in the final year of her Bachelor of Medicine, Bachelor of Surgery and Bachelor of Medical Science degrees at the University of Melbourne. She is a medical student at the Royal Melbourne Hospital and will be returning as an intern in 2014. Melissa has been extensively involved in student affairs; she was the president of the Med150 Student Ambassador Committee in 2012, part of the 150th anniversary of the Melbourne Medical School. Melissa is currently the president of the University of Melbourne Student Ambassador Program and president of the University of Melbourne Medical Students' Society. She serves on a number of Melbourne Medical School committees, and is a council member on the Australian Medical Students' Association and the Australian Medical Association, Victoria. She is particularly interested in research, mentoring and teaching. In addition to practising as a clinician, she hopes to have an academic career.

Dr Catriona McLean MBBS, BSc, FRCPA, FFSc (RCPA) is the head of Anatomical Pathology at the Alfred Hospital, professor of Anatomical Pathology at Monash University, director of the NHMRC Australian Brain Bank Network, director of the Victorian Neuromuscular Service and consultant pathologist for the CJD Registry and Australian Phenomics Network,

at the University of Melbourne. She is also on the scientific advisory boards of Neuroscience Victoria, the Multiple Sclerosis Society, the Victorian Brain Bank, Cancer Council Victoria, the Motor Neuron Disease Brain Bank and the ABBN. Catriona has more than 200 publications to her name and has a Scientific H index of 48. Her multiple awards include the Crawford Mollison Prize for Outstanding Service to Pathology in 2007, the Vice Chancellor's Special Commendation for Teaching Excellence in 2009, the Australian Learning and Teaching Citation (ALTC) national award and the Monash University TAMSS Teaching Recognition award. She has twice won BMed Sci Supervisor of the Year.

Dr Mary Anne McLean graduated from the University of Melbourne with an MBBS in 1981. She grew up in Cheltenham, attending Cheltenham High School, and has been a resident of Kew for the last 20 years. Mary Anne had an internship at Austin Hospital before entering general practice training via the FMP rotating residency program, which included rotations to rural areas. She has been in general practice or related areas for 30 years and is an associate member of the RACGP and has a Diploma of RANZCOG. As an extension of her general practice work, her role as GP liaison medical advisor at the Mercy Hospital for Women has enabled her to focus on education in women's health, and especially obstetric-related care. Mary Anne is also involved in developing an annual workshop for shared maternity-care GPs, held over the last ten years. A major focus of this role is communications, with a public health focus, giving the opportunity to offer strong advocacy for general practice in a large organisation. She is also involved in the Department of Health as the GPV representative and a member of the Victorian Perinatal Safety and Quality Committee.

Dr Merrilyn Leila Murnane AM, MBBS, MRACP, FRACP, FACLM, DCH, DDU has a long and distinguished career as a paediatric specialist. In the course of her career she has served as a consultant paediatrician at the Queen Victoria Hospital and the Monash Medical Centre. She carried out pioneering work in the field of child abuse, establishing a child

Medical students and graduates, c.1915; photograph, cardboard and paper; 24.7 × 29.7 cm; gift of Mrs Crombie; MHM03671. Thirteen women graduates and students, including Hilda Kershaw, Julie Hickford and Vera Scantlebury



protection unit at Monash Medical Centre. She was also a senior lecturer in paediatrics at Monash University. In 2003, Merrilyn received an AM for her work in the field of child abuse. She is a patron of the Australian Ballet Society and a member of the Chancellor's Circle at the University of Melbourne. Since retiring, Merrilyn has devoted a considerable amount of her time and resources to the welfare of disadvantaged and disabled children and their families in Papua New Guinea. She is especially concerned to assist disadvantaged and disabled young women to achieve their full potential. In Central Australia, Merrilyn is giving scholarships for Aboriginal young women at St Philips College Alice Springs.

Dr Sandra Neate graduated from Melbourne Medical School in 1985. She trained as a specialist in emergency medicine and has been an emergency physician at St Vincent's Hospital since 1996, with a special interest in the homeless, mental health and patients with challenging problems and behaviours in the emergency department. She assisted in developing a simulation course for emergency trainees and physicians on behalf of the Australasian College for Emergency Medicine, aimed at individual performance, teamwork and managing systems. Of late, Sandra has been involved in end-of-life issues and works as a medical donation specialist, with an interest in research into family experiences of the organ and tissue donation request at St Vincent's Hospital. She is also a consultant physician at the Coroner's Court of Victoria and the Victorian Institute of Forensic Medicine.

Dr Gillian Opie was born in Geelong, Victoria and educated at the Hermitage, finishing her HSC year at the Geelong College. In 1981, she graduated with an MBBS from the University of Melbourne. After her internship at the Royal Melbourne Hospital, she moved to the Royal Children's Hospital, embarking upon a lifelong ambition to practise paediatrics. In 1998, she achieved fellowship of the RACP and furthered her neonatal paediatric education at the Hospital for Sick Children, Toronto before returning to Melbourne as a consultant neonatologist at the Mercy Hospital for Women. In 1997, she became the first Australian paediatrician to qualify as an international board-certified lactation consultant. This led to

her election as an inaugural board member of the Lactation Consultants of Australia and New Zealand. To date, her most significant achievement has been the foundation of the Mercy Health Breastmilk Bank, whereby breast milk donated by volunteer mothers is screened, pasteurised and distributed to babies in the neonatal intensive care unit whose own mothers supply of breast milk requires supplementation.

Dr Georgina Phillips MBBS, FACEM spent two years working as a volunteer doctor in the remote Pacific island atoll nation of Kiribati shortly after graduating in 1993. She returned to Melbourne to complete her fellowship training in emergency medicine at St Vincent's Hospital, where she has continued to work full-time. Georgina is engaged in teaching, research and clinical care, with a particular interest in homelessness, substance abuse and acute psychosocial emergencies. Over the last ten years, she has been involved in emergency medicine development and building capacity in emergency care around the Pacific region and in Myanmar. She spent her sabbatical in Papua New Guinea to work on health education at the Divine Word University and Modilon Hospital in Madang, where she still coordinates an emergency medicine training rotation. Currently, Georgina is based in Yangon, Myanmar, co-leading a comprehensive emergency care development program, which commenced in 2009.

Associate Professor Marie Pirota PhD, M Med (Women's Health), Grad Dip Epid & Biostatistics, MBBS, DRANZCOG, FRACGP is an academic GP and an NHMRC career development fellow at the Department of General Practice, University of Melbourne. Her research interests include evidence-based complementary therapies, cancer in primary care and women's health. She is a chief investigator in an NHMRC Centre for Research Excellence in screening for bowel cancer. She is also involved in several NHMRC-funded randomised trials to test the effectiveness of acupuncture. Marie is currently chair of the Royal Australian College of General Practitioners' National Standing Committee—Research, and a member of the Therapeutic Goods Administration's Advisory Committee on Complementary Medicines. Her general practice is in Clifton Hill, Melbourne.

Dr Catherine Poliness graduated from the University of Melbourne in 1989. She trained in general surgery at St Vincent's Hospital, including a period of research in Barrett's oesophageal. Her admission to fellowship was in 2000. That same year she undertook a fellowship in surgical oncology and breast surgery. In 2001, she undertook further experience in breast surgery in the Edinburgh Breast Unit. In 2002, she returned to Australia and commenced teaching undergraduates at St Vincent's clinical school and began work at the Peter MacCallum Cancer Centre, specialising in breast surgery. In 2009, she was a fellow in the medical education unit at the University of Melbourne. She combines her clinical speciality of breast surgery with educating the next generation of clinicians.

Dr Emily Prewett graduated from the University of Melbourne in 1981, enjoying her clinical years at St Vincent's Clinical School. She undertook physician training in gastroenterology at St Vincent's and then at the Royal Free Hospital in London. Upon returning to Australia, she became the second gastroenterologist in Geelong, in 1991. She began the ERCP service and the Liver Clinic (providing therapy for patients with viral hepatitis) at Geelong Hospital. Both her private and public practice continue to be very busy and rewarding. The life-work balance is always a challenge, particularly for women doctors who love their work. Fortunately, Emily's husband was able to share the care for their two daughters, allowing a very early return to work after their births. Likewise, when she had breast cancer diagnosed in 1993 and required time for treatment and recovery, the support of colleagues, family and friends meant her practice and patients were there on her return. She continues to be involved with medical students—now students from Geelong's own Deakin University—and resident and registrar teaching, along with the now six other gastroenterologists in Geelong.

Dr Lena Sancì obtained her MBBS from the University of Melbourne in 1988 and her FRACGP in 1996. She trained as a GP in urban and rural settings and various hospital rotations, including women's health (Dip RANZCOG), paediatrics, psychiatry, emergency and aged care. Her passion for adolescent medicine and research grew after advanced primary care training at the Centre for Adolescent Health, at Melbourne's Royal Children's Hospital, where she continued academic

and clinical work for a decade. In 2000, she obtained her PhD for designing and trialling a training program for GPs in adolescent healthcare. Her post-doctoral fellowship (NHMRC) was completed at the Department of General Practice, where she is now deputy head, leading a research stream in young people's health, including a program in the Young and Well Cooperative Research Centre. She leads general practice teaching for the Doctor of Medicine and coordinates the third year. She works clinically in a youth sexual and reproductive health service.

Professor Judy Savage PhD, M Sc, Dip Mgmt, FRCP, FRACP, FRCPA graduated from the University of Melbourne Medical School with first-class honours in medicine. Judy was the first woman in Victoria and third in Australia to be appointed Professor of Medicine and head of a hospital campus, ten years ago, at Northern Health. At Northern, she was also chair of the Division of Medicine, director of Clinical Training and oversaw the establishment of a medical speciality consultative service, including accreditation for training in most medical specialities. Judy's major research interest is the genetics of inherited renal disease, and her laboratory identified the genes responsible for Thin membrane nephropathy, the commonest cause of persistent urinary bleeding. Judy chairs the RACP committee that coordinates the national weekly lecture series for physician trainees, when she makes sure that at least one-third of the speakers are women! She has twin daughters.

Professor Susan Sawyer MD, MBBS, FRACP (1985) is a paediatrician by training. She is the chair of adolescent health, in the Department of Paediatrics, Faculty of Medicine, Dentistry and Health Science, where she is also Associate Dean, International for the faculty. For the past ten years her efforts as the director of the Centre for Adolescent Health at the Royal Children's Hospital have helped shape global understandings of the importance of adolescents and their health, and influenced adolescent medicine in Australia and, increasingly, internationally. She is vice president of the International Association of Adolescent Health and a past president of the international chapter of the US Society for Adolescent Health and Medicine. Her current international advisory roles are with the World Health Organisation, UNICEF and the World Bank. She was inducted into the Victorian Honour Roll of Women in 2013.

Dr Catherine (Cate) Scarff graduated from the University of Melbourne, Austin Clinical School, in 1996, and subsequently worked in resident positions in Geelong and Melbourne. She gained a Master of Medicine in 2002 and undertook training in dermatology, which she completed in 2005. Catherine began further training in medical education and was appointed to her current position as an associate director of medical student services at St Vincent’s Hospital, Melbourne in 2011. She is currently completing a Master of Health Professional Education while working part-time in medical education and dermatology. Catherine is actively involved in work with the Australasian College of Dermatologists, supervising trainees and sitting on several committees. Catherine joined the RAAF in 1999 and remains a member of the Reserves, working largely in the area of education.

Associate Professor Jill Sewell AM, MBBS, FRACP, FAICD is a consultant paediatrician and deputy director of the Centre for Community Child Health at the Royal Children’s Hospital in Melbourne. Her interests include developmental, behavioural and community paediatrics, medical education, health workforce, health policy, service delivery and health regulation. Jill is the clinical lead of the Victorian Paediatric Clinical Network and a member of the Health Innovation and Reform Council. She is deputy president of the Australian Medical Council and chairs its Specialist Education Advisory Committee, and is a past president of the Royal Australasian College of Physicians. Jill sits on the board of Alfred Health. In 2005, Jill was made a Member of the Order of Australia for services to child health.

Dr Magdalena Simonis MBBS (Melb), FRACGP graduated from the University of Melbourne Medical School in 1986. A longstanding interest in community health, disease prevention and women’s health has led her into advocacy. She is president of the Victorian Medical Women’s Society, established in 1896, which advocates for equity in healthcare for women and children locally and globally. Magdalena sits on the board of the Australian Greek Welfare Society, which

delivers care in the home for Greek-speaking elderly and disabled Australians, through volunteer participation. She is an examiner with the Royal Australian College of General Practitioners, involved in training University of Melbourne medical students in general practice and active in the Royal Australian College of General Practitioners in the area of electronic health systems. Magdalena sits on the committee for the Medico Legal Society of Victoria and the University of Melbourne general practice-based research network.

Dr Sharon Wallace qualified MBBS BMedSc from Melbourne University in 1985 and FRCPA in anatomical pathology in 1993. She has worked at St John of God Pathology in Ballarat for the last 14 years, establishing an excellent rapport with clinical colleagues and a reputation for diagnostic acumen, diligence and attention to detail. Sharon is currently pathologist-in-charge of anatomical pathology for St John of God Pathology Victoria, with clinical and administrative responsibilities. She also participates in undergraduate and postgraduate teaching and is clinical associate professor at both Deakin and Notre Dame Universities. Pathology is an important part of evidence-based diagnosis, bringing laboratory data to our clinical colleagues. Sharon brings an evidence-based focus to all her work, improving patient care in our hospitals and the wider community. The title of this celebration of women in medicine is *Strength of Mind*, and this is certainly what she has brought to this exacting branch of medicine.

Associate Professor Katrina Watson calls herself an ‘odd jobs woman’: ‘I graduated from the University of Melbourne in 1977. My RMO and registrar years were at the Austin Hospital and most of my further career was based around St Vincent’s Department of Gastroenterology, where I spent 25 years happily treating people with liver problems. I also moved a bit upstream—not in a gastroenterological metaphorical context but in a that of public health; after doing a Master of Public Health at Monash

Cat. 11 **Fifth Year Medical Students 1921**, 1921; photograph, cardboard and paper; 44.4 × 53.3 cm; MHM00475.1. Women medical students, left to right: Kate Isabel Campbell, Kate Mackay, Otilie Noall, Lucy Meredith Bryce, Bessie Pitcaithley Darling, Ethel Kathleen Pitt, Annie Jean Macnamara, Jean Littlejohn, Constance Alice Finlayson, Ivy Camille Beaumont, Violet Polyzena Austin Evile, Florence Marjory Hughes, Eileen Muriel Higgins, Eleanor Lalla Alice Hillingdon Mills, Alexandra Margaret Annie Clark, Mary Journeaux Humphrey, Inez Josephine Parer, Maggie Hewitson, Alva Janet Boyd, Mrs Wright



University I realised that if you wanted to stop people drowning it was better to stop pulling them out of the creek, and go upstream to stop them being pushed in. I have had quite a few ‘odd jobs’ in my career; I worked in Samoa as an Australian Volunteer International; I volunteered at the Sydney Olympic Games and Melbourne Commonwealth Games; I currently work in Defence recruiting; and I am just commencing a new part-time job as alumni relations coordinator for the Faculty of Medicine, Dentistry and Health Sciences, at the University of Melbourne. ‘No job too big, no job too small—pensioner rates. I thank the many fine women I have met in my working life—doctors, nurses, admin staff, cleaners, politicians, patients and curators of catalogues—women who have provided support, friendship, inspiration and a lot of laughter.’

Dr Heather Wellington FAICD is a medical practitioner and lawyer, with a background in hospital management, health policy, governance and law. Previously director of Medical Services at the Geelong Hospital, she has also held the positions of assistant director Services Planning and Development, Acute Health, in the Department of Human Services, and chair of the board of Peter MacCallum Cancer Centre. She has held directorships with a number of statutory authorities and health-sector companies. For more than a decade she has conducted a specialist health advisory practice, with a focus on service quality, governance, legislation, regulation and strategic planning. She was a member of the Australian Council for Safety and Quality in Health Care from 2000 to 2005, and an elected councillor for the City of Greater Geelong from 2000 to 2004. She currently chairs IPG Holdings Ltd, which builds, owns and operates car parks co-located with public hospitals.

Dr Judith Whitworth AC graduated with an MBBS from the University of Melbourne in 1967 and subsequently gained an MD, PhD, DSc and LLD (*honoris causa*). She practised as a physician at the Royal Melbourne Hospital, specialising in nephrology and hypertension, and was professor of medicine at St George Hospital, University of New South Wales before moving to Canberra, as Commonwealth chief medical officer and then director of the John Curtin School of Medical Research at the Australian National University. She has served as chair of the Medical Research Committee of

the NHMRC and chair of the WHO Advisory Committee on Health Research. She has been made a Companion of the Order of Australia and holds honorary degrees from the University of NSW and Sydney, Glasgow and Charles Darwin Universities. She was ACT Australian of the Year in 2004, and is a past president of the Australian Society of Medical Research and the High Blood Pressure Research Council of Australia. Her current research interest is in the use of evidence to inform policy.

Dr Desiree Yap MBBS, FRANZCOG, MPHTM, FRCOG is a specialist obstetrician and gynaecologist, with an interest in public health. She was president of the Victorian Medical Women’s Society, and is currently president of the Australian Federation of Medical Women and on the board of Women’s Health Victoria.

‘I am very fortunate to love my career. Before specialising I spent a year travelling, working on the side in the UK. I have managed to specialise in obstetrics and gynaecology and undertake a Master of Public Health and Tropical Medicine. The latter provided me with opportunities to work in rural and remote Australia, as well as in a government-sponsored project in the United Arab Emirates. In addition, I qualified to work for the International Red Cross, worked for the World Health Organisation in China during the SARS epidemic, tried life as a senior lecturer at the University of Melbourne and have worked in a variety of large teaching hospitals. For the past 12 years, apart from having children, I have been involved with the Victorian Medical Women’s Society, and through them the Australian Federation of Medical Women and the Medical Women’s International Association. This has enabled me to meet wonderful medical women from all over the world and has opened my eyes to the issue of gender in medicine and how medical women can influence dominant paradigms of thinking.’

Dr Kim Yeoh graduated from the Melbourne Medical School in 2012, and was a medical student at St Vincent’s Hospital Clinical School while Associate Professor Beswick was clinical dean. Kim is currently a junior doctor at St Vincent’s. She also graduated from the Bachelor of Physiotherapy (Hons) at the University of Melbourne in 1999 and worked as a physiotherapist for eight years in Melbourne and London, with a special

interest in working in intensive care, neurology and neurosurgical units. Kim holds a number of leadership and committee positions at university and national level, including being a national executive committee member of Specialists Without Borders, a volunteer organisation that aims to improve healthcare in developing countries through medical education. She has also been on the Doctor of Medicine (MD) development committee at the Melbourne Medical School for a number of years.

Professor Doris Young was born in Shanghai, China and grew up in Hong Kong. She studied medicine at University of Melbourne, the only female of ten international students in 1967. She graduated with an MBBS in 1972 and obtained her GP fellowship in 1979 and Doctor of Medicine in 1998. She joined the University of Melbourne as a lecturer in 1984, after returning from, University of Washington, Seattle, having obtained training in adolescent medicine and academic family medicine. Doris took up the Foundation Chair of General Practice at the University of Melbourne in 1997. Her love of teaching and student engagement saw her become Associate Dean, Academic for the Faculty of Medicine, Dentistry and Health Sciences in 2009, and recently she was appointed Assistant Dean, China Strategy. Doris has been at University of Melbourne for nearly 30 years and she continues to work as a part-time GP at Broadmeadows.

Dr Shirley Zaklikowski moved to Australia at age five, the child of Holocaust survivors.

‘Like many children of migrant parents, my education was encouraged and I loved school. When I was 12, a close relative died of cancer and I naively thought that if I became a doctor I could find a cure. Following my training, I initially worked as a full-time partner in a group general practice. It was very rewarding, as it involved looking after several generations of families over many years. It was very stressful raising a family and working long hours, so I now work part-time at a large practice, but slowly and thoroughly to ensure that I provide optimal patient care. Many patients have followed me to my new practice, which is very satisfying. After 35 years I feel that I have finally achieved a perfect balance of rewarding general practice and family life, and I also have time for my hobbies of embroidery, decoupage, reading and travel.’

HISTORIANS

Dr Jacqueline Healy PhD, MBA, BA (Hons) is the curator of the Medical History Museum, University of Melbourne. She was the inaugural director of Bundoora Homestead Art Centre, the public art gallery of the City of Darebin, from 2002 to 2011. Previous positions include director of the Museum and Art Gallery of the Northern Territory and director of Public Programs, National Gallery of Victoria.

Dr Ruth Lee PhD has worked for many years as an Australian Studies tutor and a language and learning adviser at Deakin University. She has written, with David Nichols, “‘Life ... the manifestation of a purpose.” The uses of memoir in the writings of the De Garis siblings’, *Journal of the Royal Australian Historical Society*, 92, part 1, 2006, pp. 46–62. Ruth was awarded her PHD in 2011 (Deakin University) for her biographical study of Dr Mary De Garis, entitled, ‘Mary De Garis: Progressivism, Early Feminism and Medical Reform’. She is currently working on the biography of Mary De Garis for publication in 2014.

Professor Janet McCalman PhD, FAHA, FASSA teaches and researches in historical population health at the Centre for Health & Society, at the University of Melbourne. She is the author of three award-winning histories of Melbourne private life and health: *Struggletown* (1984), *Journeyings* (1993) and *Sex and Suffering: Women’s Health and a Women’s Hospital* (1998).

Dr Heather Sheard PhD has a B.Comm, Grad Dip Education, Grad Dip Ed Admin, MA and PhD, all from University of Melbourne. She was a secondary school teacher and assistant principal before retiring and completing an MA, which detailed the history of Victoria’s exceptional system of maternal and child health. This was published in 2007 as *All the Little Children: The Story of Victoria’s Baby Health Centres*. Her PhD is entitled ‘A Heart Undivided: A Biographical Study of Dr Vera Scantlebury Brown, 1889–1946’, and will be published in 2014 with the support of the University of Melbourne Faculty of Medicine, Dentistry and Health Sciences. She is currently researching the contribution of the more than 20 Australian women doctors who served as surgeons and medical officers during World War I.



EXHIBITION OVERVIEW

‘I wish to persuade women to endeavour to acquire strength, both of mind and body.’

— Mary Wollstonecraft, *A Vindication of the Rights of Woman*, 1792

Inspired by Wollstonecraft’s comment, the title *Strength of Mind: 125 Years of Women in Medicine* encapsulates the struggle of women to achieve equality in education. This exhibition traces women’s journey at the Melbourne Medical School and after, through key events and individuals. Material in the Medical History Collection has been crucial to telling their stories: photographs, notebooks and personal items. For example, the student photographs are visual evidence of women’s increasing presence across time.

Important items have been borrowed from the University of Melbourne Archives; major hospital archives, such as St Vincent’s Hospital and the Royal Women’s Hospital; university college collections, such as Trinity and Janet Clarke Hall; and community and private collections. This historical material brings to life the achievements and the challenges faced by these women.

Borrowed from a private collection, Mary De Garis’s (1899–1905) medals for service in World War I from the Serbian and British governments are proof of the contribution of an important woman graduate who commanded a medical field hospital in Serbia. They also reveal her conviction to use her medical training at a time when women doctors were prohibited from enlisting in the armed forces.

Of extraordinary significance are items from the Catholic Women’s League of Victoria and Wagga Wagga, part of The Glowrey Papers. Mary Glowrey (1887–1957) went to India in 1920 as a medical missionary and established a major hospital and system of healthcare and education that still flourishes today. In 2012, Sister Mary Glowrey entered the first stage of canonisation. The objects, letters and publications on display encompass local Indian remedies, correspondence with family, photograph albums and medical papers meticulously collected by her sister. These objects offer remarkable insight into Sister Glowrey’s determination to receive an education.

The stories of the women alumni of the Melbourne Medical School are enriched by these collections, which will be key sources for further research in the future. This exhibition increases our understanding of the history of women in medicine and their role in society through direct engagement with collections.

Dr Jacqueline Healy

Curator, Medical History Museum

Cat. 3 **Medical School Graduates**, 1906; photograph; 18.6 × 24.0 cm; gift of Nancy Bowman; MHM4363. Women graduates, left to right: Miss M.A. Henderson, Miss C.E. Henry [next four women unidentified], Miss M.G.S. Crutchfield, Miss M.E. Edelsten

LIST OF WORKS

All measurements are expressed height before width before depth.

MEDICAL HISTORY MUSEUM, UNIVERSITY OF MELBOURNE

GRADUATE AND CLASS PHOTOGRAPHS

- Fifth Year Medical Students 1893**, 1893 photograph 54.2×64.6 cm MHM00511 Women medical students, left to right: Miss E.M.P. Stone, Miss A. de Castilla
- Third Year Medical Students, including Professors C.J. Martin and H.B. Allen**, 1903 photograph, cardboard 24.3×34.1 cm MHM00303 Women students, left to right: second row: Mrs [M.G.S.] Crutchfield, Miss Bage, Miss [I.] Wilkinson, Miss [L.] Weir; front row: Miss [E.E.] Henry, Miss [M.A.] Henderson, Miss Talbot, Miss [M.E.] Edelsten, Miss Were Presented to Professor C.J. Martin on his leaving to take up the directorship of the Lister Institute of Preventative Medicine, London
- Medical School Graduates**, 1906 photograph 18.6×24.0 cm Gift of Nancy Bowman MHM4363 Women graduates, left to right: Miss M.A. Henderson, Miss C.E. Henry [next four women unidentified], Miss M.G.S. Crutchfield, Miss M.E. Edelsten
- University of Melbourne Senior Anatomy Class 1908**, 1908 photograph 29.8×35.6 cm MHM00440 Women medical students: Margaret Harkness McLorinan, Gertrude Clemes Buzzard, Mary Glowrey
- Fifth Year Medicine 1911**, 1911 photograph and ink 49.5×63.7 cm MHM00498 Woman medical student: Margaret Helen Urquhart Robertson

- Senior Anatomy Class**, 1911 photograph, cardboard 28.1×38.2 cm MHM00436 Third row: Miss H. Kelsey, Miss R. Champion, Miss A.R. Donaldson
- Senior Anatomy Class 1912**, 1912 photograph 77.0×33.0 cm MHM00443 Women medical students, left to right: Gweneth Wisewould, Ellen Maud Balaam, Ellice Jean Davies, Mary Lane
- Fifth Year Medical Students 1914**, 1914 photograph 53.6×60.9 cm MHM00495 Women medical students left to right: Gweneth Wisewould, Mary Lane, Ellen Maud Balaam, Annie Lister Bennett, Ellice Jean Davies
- Medical Students at Melbourne University, Jubilee Year, April 1914**, 1914 photograph, cardboard, wood, paint 36.0×55.0 cm, frame: 71.5×91.7 cm Inscribed in ink: ‘MEDICAL STUDENTS AT MELBOURNE UNIVERSITY./Jubilee Year, April 1914./PRESENTED TO MEDICAL SCHOOL/BY THE MEDICAL STUDENTS SOCIETY./Professor R.J.A. Barry/Professor Sir Harry Brookes Allen/President of M.S.S./Dr R.J. Bull/Sears Photo/T.A. Wright Hon Sec MSS MHM00448
- Fifth Year Medical Students 1915**, 1915 photograph 53.6×60.9 cm MHM00496 Women medical students, left to right: Miss V. Scantlebury, Miss H. Kelsey, Miss R. Champion, Miss A.R. Donaldson
- Fifth Year Medical Students 1921**, 1921 photograph, cardboard and paper 44.4×53.3 cm MHM00475.1 Women medical students, left to right: Kate Isabel Campbell, Kate Mackay, Otilie Noall, Lucy Meredith Bryce,

- Bessie Pitcaithley Darling, Ethel Kathleen Pitt, Annie Jean Macnamara, Jean Littlejohn, Constance Alice Finlayson, Ivy Camille Beaumont, Violet Polyzena Austin Eville, Florence Marjory Hughes, Eileen Muriel Higgins, Eleanor Lalla Alice Hillingdon Mills, Alexandra Margaret Annie Clark, Mary Journeaux Humphrey, Inez Josephine Parer, Maggie Hewitson, Alva Janet Boyd, Mrs Wright
- Fifth Year Medical Students 1923**, 1923 photograph 43.6×50.5 cm MHM00473 Women medical students, left to right: Miss [Margaret Ethel Playle], Miss Stephenson, Mrs Whittle, Miss [Winifred Iris Evelyn] Smith, Miss Stephens, Miss [Phyllis Margery] Tewsley, Miss [Sybil Jean] Hawkins, Miss Temperly, Miss [Jessie Baird] Simpson, Miss [Mary Allison] Ingram, Miss Varley, Miss L. Smith, Miss Murphy, Miss [Mona Margaret] Blanch, Miss [Bessie Alice] Thomas, Miss [Dorothea Laura Hill] Parker, Miss [May] Anderson, Miss [Bessie] Denney, Miss [Amanda Annie Gertrude] Liebert, Miss [Mary Elizabeth] Waite, Miss [Edith Margaret Winter] Ashton, Miss [Mary Atholl Stuart] Ham
- Third Year Medical Students 1934**, 1934 photograph 24.5×30.1 cm MHM00416 Women medical students, left to right: Elizabeth Nankivell, Elizabeth Constance Graham Miller, Lena Amy Lisbeth Thomas, Margery Elizabeth Smith, Joyce Margaret Euphan Bell, Clarinda Blodwin Abrahams, Dorothy Champion, Ethel Phoebe Roberts, Joy Helena Muller, Jean Alison Hutchings, Kathleen Katrine Blackwood, Patricia Frances Wellington, Elizabeth Holden Flaxman, Eileen Catarinich
- Graduation Class**, 1939 photograph 24.7×30.1 cm MHM00415 Women graduates, left to right:

- Eileen Veronica Brobridge, Jean Stanley Finlayson, Harriet Elizabeth Finney, Jean Mercy Gunson, Dorothy Mary McMichael, Mary Eva Meredith, Joan Janet Refshauge, Dorothy Meredith Patricia Rose, Gladys Marie Saunders, Una Shergold
- Final Year Medicine 1945**, 1945 photograph 30.2×24.7 cm MHM00420 Women medical students: Miss Lucy Blanche Biggs, Miss Edith Jessie Hewitt, Miss Isobel Mary Holder, Miss Cecily Faith Statham, Miss Jean Barbara Proud, Miss Helen Seymour Turner, Miss Lynn McArthur Reid, Mrs Norma Kelso, Miss Rosemary Amelia Williams, Miss Winifred Mary Long, Miss Joan Whyte Towns, Miss Janet Lucile Elder, Miss Lesley Joan Leask, Miss Sheila Wilson Hyland, Mrs Rena Ginter, Miss Ruth Ann Williams, Miss Rose Housey, Miss Berta Ungar, Miss Esther Marian Williams, Miss Margery Beth Wadds
- Graduating Medical Class**, 1945 photograph 19.8×13.5 cm MHM04389 Women graduates, left to right: Jenny Pascheeve, Mancell Gwenneth Pinner, Joan Mowlam, Nancy Brown, Joan Amelia Walker, Iris Alice Leber, Alice Elizabeth Wilmot, Dorothy Beatrice Hurley, Shirley Evelyn Amy Lorraine Francis, Mary Bennett, Charlotte Morrison Anderson
- Melbourne University Medical Graduates**, 1949 photograph, cardboard 29.8×24.3 cm Stamped on back: ‘THE UNIVERSITY OF MELBOURNE/ROYAL MELBOURNE HOSPITAL/CLINICAL SCHOOL’; above image: ‘MELBOURNE UNIVERSITY MEDICAL GRADUATES, 1949’; beneath image, list of names and ‘Sears Studio/St. Kilda’ MHM03568 Women graduates, front row: Drs Mary G. Asche, Joy E. Young, Hazel Y. Halse, Jessie C. Webster, D. Ann Bridge, M. Joy McCulloch, D. Jean Hailes, Patricia, M. Scrivenor, Lois C. Garrett, Pamela S. Triplett, Mary H. Bromner
- Royal Melbourne Hospital Final Year**, 1952 photograph 37.5×28.3 cm MHM03570 Women graduates, left to right: Nancy L. Ferguson, Shirley R. Coombes, Lorna I. Murfit, Margaret H. Nicol, Dorothy M. Bailhache

- Royal Melbourne Hospital Medical Graduates**, 1969 photograph 38.1×27.7 cm MHM03576 Women graduates, left to right: Margaret Pascoe, Diana Nash, Kate Jackson, Robyn Dawes, Pamela Fraser, Janet Harrison, Janne Bell, Hannah Parker, Christine Tippet, Janet Rothstadt, Julie Steinbok, Sandra Hacker, Robyn Mason
- Royal Melbourne Hospital Medical Graduates**, 1972 photograph and ink 38.0×28.9 cm MHM03579 Women graduates, left to right: M. Ronerts-Thompson, R. Drummond, D. Jakubowicz, D. Young, J. Smith, H. Carmichael, L.J. Branton, E.M. Flynn, M.P. Taft, R. Borenstein, L. Davies, N.L. Cameron, J.M. Knight, I. Szymanski, S.E. Martin, J.L. Kiel, V. Polgar
- First women students at the University of Melbourne School of Medicine**, 1887 photograph 28.0×33.0 cm MHM02037 Women students, left to right, with year of graduation: Helen Sexton (1892), Lilian Alexander (1892), Annie O’Hara (1894); Clara Stone (1891), Margaret Whyte (1891), Grace Vale (1894), Elizabeth O’Hara (1893)
- Victorian Medical Women’s Association, Brownless Memorial Supplement**, 1898, p. 6 photograph 11.8×15.3 cm MHM00992 Standing: Janet Greig, Constance Stone, Lilian Alexander Seated on chairs: Amy de Castilla, Emily Mary Page Stone, Helen Sexton, Clara Stone, Jean Greig Seated on steps: Alfreda Gamble, Bertha Main
- Lecture Class Anatomy, Brownless Memorial Supplement**, 1898, p. 21 photograph 12.5×18.6 cm MHM00992 Harry Brookes Allen lecturing Seated in front row: Effie Stillwell, Helen Shaw, Mary Baldwin
- Dr Wilkinson lecturing a first year physiology class**, 1902 photograph 19.0×23.5 cm MHM00412

- Album, featuring a photograph of woman student in laboratory**, 1903 photographs, paper, cardboard 18.8×25.3×0.5 cm MHM00410
- Mary De Garis (1881–1963) and other Melbourne Hospital residents**, 1905–1906 photograph 31.5×36.8 cm MHM04368
- Resident Medical Officers, Women’s Hospital [including Amelia Roberta Donaldson and Margaret Harkness McLorinan]**, c.1915 photograph 24.8×30.2×0.2 cm MHM04310
- Ellen Maud Balaam (1892–1985) studying with other students in the students’ room at the Melbourne Hospital**, 1916 photograph 8.3×12.6 cm MHM05918
- Resident Medical Officers, Women’s Hospital [including Amelia Roberta Donaldson]**, c.1916–1917 photograph 11.4×17.1 cm MHM04308
- Hilda Kershaw (MBBS 1917) with medical students holding babies at Women’s Hospital**, 1918 photograph 9.0×14.0 cm MHM04572
- Interns at the Children’s Hospital**, 1923 photograph 12.0×16.3 cm MHM02257 Front row: Kate Campbell (far left) and Annie Jean Macnamara (far right)
- Melbourne Hospital Resident Staff 1924–1925**, 1924–1925 photograph 33.9×26.8 cm MHM00424 Women residents, left to right: Beryl Oenone Bowman, Kathleen Bessie Daly, B. Wood, Mona Margaret Blanch
- Australasian Medical Congress**, 1927 photograph 15.2×19.9 cm MHM03914 Women present: 67 A.G. Patterson, 98 W.J. McDonald, 123 E. Gunn, 125 G. Wein Smith, 126 T. Ambrose, 127 E.B. Gunson, 135 A.R. Donaldson,

- 160 M.C. De Garis, 161 D. McClemens, 165 Beatrix Durie, 188 D. Gordon, 190 A. Mitchell, 196 G. Stevenson, 197 H. Easterfield, 220 D.G. Radcliffe, 265 Annie Jean Macnamara
- 34 Resident Medical Officers, Women's Hospital**, c.1929–1930
photograph
25.0×31.0×0.15 cm
MHM04309
Women medical officers, left to right: Bessie Pitcaithley Darling, Winifred Barbara Cameron, Barbara Grendon Wood, Vera Scantlebury Brown, Agnes Donaldson
- 35 Margaret Henderson, Fay Kincross and other physiology honours students**, 1935
photograph
20.5×35.0 cm
MHM04641
- 36 Dr Lucy Bryce (1897–1968) with Mr J. Harrison and Mr A. Hall, the first recipients of badges for 50 blood donations, and Nurse S. Gleeson**, 1949
photograph
13.1×17.5 cm
MHM02916
- 37 Conferral ceremony in Wilson Hall in 1962, marking the centenary of the University of Melbourne Medical School**, 1962
photograph
20.0×25.5 cm
MHM02881
- INDIVIDUALS**
- 38 Clara Stone (1860–1957)**, date unknown
photograph
17.6×12.8 cm
MHM02913
- 39 Constance Stone (1856–1902)** 'End of a hospital run by women', *Age*, 16 July 1986, p. 20
print on paper
MHM2013.93
- 40 Constance Stone (1856–1902)**, date unknown
photograph
17.8×12.7 cm
MHM02914
- 41 Mary De Garis (1881–1963)**, c.1911
photograph
11.4×17.1 cm
On reverse: 'To Robbie [A]lexander/from Auntie Doc/April 1911/
Dr. Mary C. De Garis'
MHM04369
- 42 Dame Kate Isabel Campbell (1899–1986)**, MLC Student, c.1912–1915
photograph
8.5×13.5 cm
MHM03728
- 43 Dr Jean Littlejohn (1899–1990)**, c.1930
photograph
18.9×14.5 cm
MHM04589
- 44 Barbara G. Wood and other Melbourne Radiologists**, c.1930
photograph
33.0×43.0 cm
MHM03248
- 45 Dr Margaret Jamieson (MBBS 1907)**, c.1907
photograph
19.4×14.0 cm
MHM01043
Topped the finals honour list in 1907
- 46 Dame Annie Jean Macnamara (1899–1968)**, c.1930
photograph
16.0×11.0 cm
MHM0 2185
- 47 Winifred McCubbin (1893–1967)** Australia
Vera Scantlebury Brown (1889–1946), 1943
oil on canvas
49.0×37.0 cm; frame: 62.0×43.0 cm
Gift of Catherine James Bassett, daughter of Vera Scantlebury Brown 2013
MHM2013.90
- 48 Lucy Bryce (1897–1968)**, 1949
photograph
13.1×17.5 cm
MHM02916
- 49 Mary De Garis (1881–1963)**, c.1960
photograph
15.2×12.0 cm
On mount: 'photography by Robert Pockley of Geelong'
MHM04562
- 50 Lorna Lloyd-Green (1910–2002), at the University of Melbourne**, c.1940s
photograph
14.0×9.0 cm
On reverse in pencil: 'snapped in University grounds'
Gift of Mrs Wendy Alexander
MHM04582
- 51 Lorna Lloyd-Green (1910–2002) with Margaret O'Reilly at Queen Victoria Hospital**, 1940
photograph
7.2×11.5 cm
Gift of Mrs Wendy Alexander
MHM04580
- 52 Lorna Lloyd-Green (1910–2002) at Queen Victoria Hospital**, 1940
photograph
7.2×11.5 cm
Gift of Mrs Wendy Alexander
MHM04581
- 53 Lorna Lloyd-Green (1910–2002) in RHCOC gown**, 1988
photograph
15.0×10.4 cm
Gift of Mrs Wendy Alexander
MHM04583
- 54 Dame Annie Jean Macnamara (1899–1968), Professor Paton and Dame Kate Isabel Campbell (1899–1986)**, c.1971
photograph
12.2×16.8 cm
MHM02198
- 55 Dame Kate Isabel Campbell (1899–1986)**, 1971
photograph
21.0×16.0 cm
MHM02197
K.C. Crabbtree
- 56 Dame Kate Isabel Campbell (1899–1986)**, 1971
pastel on paper
55.5×64.0 cm
MHM02908
- 57 Dr Kate Isabel Campbell (1899–1986) on the occasion of the Queen's Honours List**, c.1972
photograph
21.0×16.0 cm
MHM02197
- Third year class students and staff**, 1904 (detail); photograph; 20.0×31.3 cm. Medical History Museum, MHM00418

- 58 Dr Kate Isabel Campbell (1899–1986) examining a premature baby in isolette**, 1974
photograph
23.8×17.5 cm
Gift of Winifred Crick
MHM02260
Published in *Australian Paediatric Journal*, vol. 10, no. 2, April 1974, p. 50 (special issue marking Dame Kate Campbell's 75th birthday)
- 59 Dr Kate Isabel Campbell (1899–1986)**, c.1980
photograph
12.7×17.8 cm
Gift of Winifred Crick
MHM04081
- 60 Dame Annie Jean Macnamara (1899–1968)**, c.1960
photograph
24.0×14.0 cm
MHM01042
- 61 Dame Kate Isabel Campbell (1899–1986) and A.O. Beckman**, c.1981
photograph
18.6×26.5 cm
MHM02255
- OBJECTS, EPHEMERA AND PUBLICATIONS**
- 62 Calling card of Miss De Garis, MD, BS (1881–1963)**, date unknown
print on paper
5.0×7.0 cm
MHM03625
- 63 Brownless Memorial Supplement**, 1898
published by Raw Bros Photo-Process House, Melbourne
print on paper
24.5×19.2 cm
Printed on cover: 'Brownless Memorial Supplement/Being a Special Medical Supplement to "Alma Mater" Vol. iii No. 6, Sept. 1898'; written in ink on top right corner: 'D.D. Code'
MHM00992
- 64 Lamp**, c.1900
Mary De Garis's (1881–1963) lamp used for ear, nose and throat examinations
brass with glass flue
30.0×13.5 cm
MHM2013.91
- 65 The Hospital for Sick Children, Great Ormond Street, Bloomsbury, three months' student ticket issued to Miss Mary C. De Garis (1881–1963)**, 1903
ink, print on paper
9.0×12.0 cm
Stamped: 17 APR 1903
Signed: Stewart Johnson, Secretary
MHM04596
- 66 Mary De Garis's (1881–1963) clinical lectures in notebooks**, 1901–1904
ink on paper
18.7×12.2×1.8 cm (largest) (4)
MHM02030
- 67 Mary De Garis's (1881–1963) graduation hood**, c.1905
satin and cotton
95.0×90.0 cm (irregular)
MHM2013.92
- 68 Small book of medical reference notes**, 1906–1909
print on paper, leather, cardboard and metal
25.0×14.7×2.5 cm
Inscription on inside cover: 'IN MEMORIAM/MARY C. DE GARIS/ COLLEAGUE OF/THE CREDIT CRUSADE/P.O. Box 59 Geelong/ Victoria, Australia' and '3793'
MHM02033
- 69 Class Book of Practical Bacteriology belonging to Gertrude C. Buzzard**, 1908
print on paper
21.6×14.5×1.0 cm
MHM02748
- 70 12th annual report, Queen Victoria Hospital**, 1909
print on paper
21.7×14.0 cm
MHM02809
- 71 Mary De Garis's (1881–1963), Philadelphia Hospital case notes**, 1909
ink on paper
23.5×14.9×3.0 cm
MHM02032
- 72 Mary De Garis's (1881–1963) clinical lectures in notebooks**, 1911
ink on paper
16.6×10.8×0.5 cm (3)
MHM02029
- 73 Vaccination certificate signed by Clara Stone (1860–1957)**, 1915
print and ink on paper
18.3×17.3 cm
MHM02927
- 74 Letter to Dame Kate Isabel Campbell's (1899–1986) father from her teacher at MLC**, 1916
ink on paper
13.0×20.5 cm
MHM03737
- 75 Bound set of degree certificates, MBBS, University of Melbourne, Inez J. Parer**, 1917–1922
leather and ink on paper
19.5×11.0×0.6 cm
MHM04378
- 76 Letters of recommendation for Adelaide Gault**, 1923
print and ink on paper
26.0×20.8 cm (4)
MHM02803
- 77 Mary C. De Garis (1881–1963) Reprint of pamphlet concerning 'Normal Labour'**, 1926
print on paper
13.6×21.5 cm
Inscription on cover: 'The Application of the New/Definition of Normal Labour/to the Clinical Study of/Obstetrics: A New Outlook/on Midwifery./BY/MARY C. DE GARIS, M.D., B.S./ (Melbourne),/Geelong, Victoria'
MHM03609
- 78 Mary C. De Garis (1881–1963) Booklet entitled The Principles of a Credit Economy**, 1933
print on paper
13.8×21.0 cm
Inscription on cover: 'THE/ Principles/of/A Credit Economy/... With Especial Reference to a Credit Economy for Australia'
MHM03608
- 79 Walking stick belonging to a patient of Dame Annie Jean Macnamara (1899–1968)**, c.1934
wood
75.0 cm (length; tapers from 10 cm circumference)
MHM04385
- 80 Manikin and board**, c.1935
wood, fabric, cotton, plaster
4.7×32.5×11.8 cm (manikin)
6.3×37.7×13.8 cm (board)
Gift of Dame Annie Jean Macnamara
MHM02116
- 81 Enid M. Smith 'Marriage and Homemaking'**, c.1940
print on paper
15.6×10.4 cm
MHM02997
- 82 Record book of Division III students/November 1948 – August 1949**, 1948–1949
print and ink on paper
24.5×36.0×4.5 cm
MHM02010
- 83 Mary C. De Garis (1881–1963) Reprint of pamphlet concerning Vitamin B deficiency**, 1950
print on paper
Inscription: 'VITAMIN B DEFICIENCY/IN GENERAL PRACTICE/BY MARY C. DE GARIS.'
MHM03610

84	Dr Kate Campbell (1899–1986) Intensive Oxygen Therapy as a Possible Cause of Retrolental Fibroplasia: A Clinical Approach , 1951 print on paper 28.0 × 21.5 cm MHM02263	93	Menu for 125th anniversary of the Medical School and the centenary of the admission of women to the medical course, 1987 print on card 21.1 × 14.9 cm MHM02624	1904/Dr Mary Glowrey/second from left in back row' The Glowrey Papers	108	Letter to Mary Glowrey (1887–1957) regarding medical equipment to take to India, 15 October 1916 ink on paper 25.0 × 20.0 cm (6 pages) The Glowrey Papers	print on paper 17.0 × 11.0 cm The Glowrey Papers	125	A Glance at the Mission dioramas, c.1928 paper, cardboard, paint, tape, photographs, box: cardboard, paint, paper, tissue paper 47.0 × 28.0 cm (irregular) The Glowrey Papers		
85	Letter of introduction from Prime Minister Sir Robert Menzies for Dr Kate Isabel Campbell (1899–1986), 1951 ink on paper and wax 22.0 × 33.5 cm MHM03670	94	Smallpox and its Eradication, World Health Organisation, Donna Henderson contributor, 1988 ink on paper, imitation leather, silver, ribbon 28.5 × 9.0 × 20.0 cm MHM02012.103	101	Newspaper clippings regarding Mary Glowrey's (1887–1957) scholarships, 1905 print on paper 23.0 × 16.5 cm (irregular) The Glowrey Papers	109	Women's Social Worker, vol. 1, 1916–1917 print on paper, cardboard 27.0 × 21.0 cm The Glowrey Papers	118	Dr Mary Glowrey (1887–1957) Professional Fees blank template, c.1919 ink on paper 18.0 × 11.5 cm The Glowrey Papers	126	Reference for Mary Glowrey (1887–1957), 10 May 1928 ink on paper 20.5 × 13.0 cm (2 pages) The Glowrey Papers
86	Doctor of Laws degree, awarded to Dr Kate Isabel Campbell (1899–1986) from the University of Melbourne, 1966 print on paper 25.9 × 18.0 cm MHM02259	95	Simone Sakinofsky, Australia Post Design Studio Dame Kate Campbell (1899–1986) postage stamp, 2012 offset lithographic print on paper 3.75 × 2.6 cm Gift of Australia Post, 2012 MHM02012.63	102	'The Genesis of Medicine', handwritten university essay by Mary Glowrey (1887–1957), c.1906–1907 ink on paper, metal stud 25.5 × 21.0 cm (29) The Glowrey Papers	110	Letter from Archbishop, 14 August 1916 ink on paper 20.0 × 25.0 cm The Glowrey Papers	119	For Our Babies, design for funding raising cups, c.1920s ink on paper, metal pin sheet 1: 12.5 × 3.0 cm; sheets 2 and 3: 17.0 × 11.0 cm Inscription on back of sheet 1: 'clearer than one of the inscriptions sent on calendar/perhaps this could be pasted over the faint one' The Glowrey Papers	127	Reference from matron at Victorian Eye and Ear Hospital for Mary Glowrey (1887–1957), 1 June 1928 ink on paper 26.0 × 20.5 cm The Glowrey Papers
87	'Is there a doctor in the House?' Medical women's centenary seminar program, Friday 18 October 1991, 1991 print on paper 42.5 × 29.0 cm MHM2013.94	CATHOLIC WOMEN'S LEAGUE OF VICTORIA AND WAGGA WAGGA THE GLOWREY PAPERS		103	Mary Glowrey (1887–1957) graduation photo, c.1910 photograph 58.0 × 43.0 cm Inscription on front: 'PRESENTED BY GLOWREY FAMILY 24TH OCTOBER 1984' The Glowrey Papers	111	Mary Glowrey's (1887–1957) notes on baby clinics, c.1917 ink on paper 20.5 × 16.5 cm (2 pages) The Glowrey Papers	120	Streamer from the 'Orsova', on which Mary Glowrey (1887–1957) set sail for India, 21 January 1920 cord 840.0 cm × 0.5 cm The Glowrey Papers	128	Reference from secretary, Queen Victoria Memorial Hospital for Women and Children, for Mary Glowrey (1887–1957), 6 June 1928 print and pencil on paper 21.0 × 13.0 cm The Glowrey Papers
88	Illuminated address presented to Dr Kate Campbell (1899–1986) when made Dame of the British Empire, 1971 photograph 32.5 × 39.0 cm MHM03669	96	Mary Glowrey's (1887–1957) South Melbourne College Quarterly Report, Easter 1901 ink and print on paper 11.0 × 9.0 × 0.2 cm The Glowrey Papers	104	Dr Mary Glowrey (1887–1957), Dr Margaret Robertson, Dr Gertrude Briggs, Dr M. McLorrianane and babies, c.1911 photograph 11.5 × 15.5 cm; mount: 20.0 × 24.5 cm Inscription on back: 'Dr Mary Glowrey/ Dr Margaret Robertson/Dr Gertrude Briggs/Dr M (Poppy) McLorrianane' The Glowrey Papers	112	City of Camberwell Baby Health Centers pamphlet, c.1918 print on paper 19.0 × 13.0 cm The Glowrey Papers	121	Something New fundraising flyer, c.1922 print on paper 21.0 × 17.0 cm The Glowrey Papers	129	'Groetem uit Indie' album, c.1920–1930 paper, cardboard, postcards, photographs, pen 17.0 × 22.0 cm Inscription on front cover: 'Groetem uit Indie/Mrs M. Glowrey/Swan Hill/ Victoria' The Glowrey Papers
89	Ordinary Dame Commander of the Civil Division of the British Empire certificate for Dame Kate Campbell (1899–1986), 1971 ink on paper 38.8 × 32.4 cm MHM04101	97	Mary Glowrey's (1887–1957) South Melbourne College Quarterly Report, mid-winter 1901 ink and print on paper 11.0 × 9.0 × 0.2 cm The Glowrey Papers	105	Dr Mary Glowrey (1887–1957) at Christchurch Hospital, 1911 photograph 11.0 × 15.5 cm; mount: 18.0 × 23.5 cm Inscription on front: 'DR M.G./DR M.R./Dr Glowrey, stamp on front: J.P. Sewell; 2. School Road, Christchurch'; inscription on back: 'Christchurch Hospital/ ... /Dr Mary Glowrey + nurses/1911/23' The Glowrey Papers	113	Dr Mary Glowrey (1887–1957) in the Out Patients Department at St Vincent's Hospital, c.1919 photograph 15.0 × 20.1 cm; mount: 24.5 × 30.0 cm Inscription on back on mount: 'Dr Mary Glowrey among outpatients – Melbourne'; stamp on front of mount: 'Phone 4397/'DARGE"/175 COLLINS STREET/Melbourne' The Glowrey Papers	122	Mary Glowrey (1887–1957) with other nuns and Horse and Bandy postcard, c.1924 ink on cardboard 9.0 × 13.5 cm Inscription on front: 'Our horse bandy'; inscription on back: '69/19/ Per bandy naar de dorpen/Missien der Zusters/van het Gezeischap van J.M.J./"Marienburg"/'s-Hertogenbosch/c.20285/Druk: E. de Bont & Zoon, Rotterdam' The Glowrey Papers	130	Greetings from India album, c.1920–30 paper, cardboard, red cord, photographs, pen 16.0 × 22.0 cm inscription on front cover: 'Greetings from India/Mrs M. Glowrey/Swan Hill/ Victoria' The Glowrey Papers
90	Menu and program for valedictory dinner for Dame Kate Campbell (1899–1986), 1976 print on paper 28.9 × 23.0 cm MHM04079	98	Mary Glowrey (1887–1957) and South Melbourne College Students, 1902 photograph 22.5 × 28.0 × 0.5 cm Inscription on front: '–1902–/S.M.C./ M.G./ ... mphrey & Co.,/264 Collins St. Melb.'; inscription on back: '1902 – Mary Glowrey and College Students at South Melbourne College' The Glowrey Papers	106	Dr Mary Glowrey (1887–1957) and Dr Margaret Robertson among nurses, c.1912 photograph 14.5 × 19.5 cm; mount: 24.5 × 30.0 cm Inscription on front: 'M.G./ TEMPLETON & SAVAGE/ PHOTOGRAPHERS/349 COLLINS STREET/Melbourne'; inscription on back: 'Dr Mary Glowrey/Dr Margaret Robertson/among nurses' The Glowrey Papers	114	Lyceum Club, Qualifications for Membership and Rules booklet, 1919 print on paper 17.0 × 10.5 cm The Glowrey Papers	123	Mary Glowrey (1887–1957) and nuns at Temple and Nuns, c.1924 photograph 9.0 × 12.5 cm Inscription on back: '28/Heathen temple/Pata-Gunten/(separated from the neighbours houses by a mud or rough stone wall)/the small boys ran in crowds to get on the photo' The Glowrey Papers	131	The Angel Sister Ethel Pitt postcard, c.1934 print on card 9.0 × 14.0 cm Inscription on front: 'Vertellen/Madras-Missie/The "Angel Sister"; inscription on back: BRIEFKAART/DRUKWERK/45/ Ten bate van de Missie der Zusters van het Gezelschap van J.M.J. Marienburg's-Hertogenbosch/Repr. Ars. Catholica, Leiden' The Glowrey Papers
91	Certificate for Honorary Consulting Physician Dr Kate Isabel Campbell (1899–1986), 1979 print on paper 31.5 × 22.7 cm MHM02262	99	Telegram from Mary Glowrey (1887–1957), c.1904 print and pencil on paper 14.0 × 22.0 × 0.1 cm The Glowrey Papers	107	Protection of Infant Life Roll Book, 1915 ink on paper 19.0 × 12.5 × 0.4 cm The Glowrey Papers	115	Lyceum Club, By-Laws booklet, 1919 print on paper 18.0 × 11.0 cm The Glowrey Papers	124	Coo-ee! booklet, 1926 print on paper, photograph, white thin cotton, pencil booklet: 21.0 × 17.0 cm, photograph: 10.0 × 7.0 cm The Glowrey Papers	132	Greetings from the Two Australian Medicos card, c.1934 ink on paper, printed cardboard, photograph 12.5 × 11.0 cm The Glowrey Papers
92	Elizabeth Kathleen Turner (1914–1999) '100 Years Ago ...' poster for women's centenary , 1987 ink, paint on paper 45.5 × 65.0 cm MHM02501	100	University of Melbourne Arts Students, 1904 photograph 13.5 × 20.0 × 0.1 cm; mount: 20.5 × 29.0 × 0.5 cm Inscription on front: 'M.G./Alice Mills/ Melbourne'; inscription on back: '46/Melbourne University/Arts Students			117	Lyceum Club, Office-Bearers and Committee 1919–1920 booklet, 1919 Dr Mary Glowrey, noted in 'Office-Bearers and Committee 1919–1920', page 4				

133

Nutritional paper ‘Vitamin B.’, c.1936
print on paper
20.0×16.5 cm (9, pages 1–5, 7–10)
The Glowrey Papers

134

Fenugreek seeds in box, c.1936
fenugreek seeds, box: cardboard,
paper, pen, cotton wool
seeds: 0.3×0.1 cm each, box:
4.5×8.0×2.5 cm
Inscription on lid: ‘Fenugreek/(Jelegu
Menthula)/no commercial value’;
side of box: ‘THE ANGLO-FRENCH
DRUG CO. LTD./LONDON, W.C. 1,
238a, Gray’s Inn Road/PARIS, 5, Rue
Clauzel (9e)/BOMBAY, Yusuf Building,
Church Gate Street/NEW-YORK,
1270, Broadway/MADE IN FRANCE’;
side of box: ‘CHAQUE/GRANULE/
CONTIENT/Cinnamoarsinate de
Quinine/0g. 012/ Soude pure/Q.S./
Excipient/Q.S.’
The Glowrey Papers

135

Asoka seeds in box, c.1936
asoka seeds (3); box: cardboard,
paper, pen
seeds: 1.5×1.0 cm each; box:
4.5×8.0×2.5 cm
Inscription on lid: ‘Asoka seeds/no
commercial value’; side of box: ‘THE
ANGLO-FRENCH DRUG CO. LTD./
LONDON, W.C. 1, 238a, Gray’s Inn
Road PARIS, 5, Rue Clauzel (9e)/
BOMBAY, Yusuf Building, Church Gate
Street/NEW-YORK, 1270, Broadway/
MADE IN FRANCE’; side of box:
‘CHAQUE/GRANULE/CONTIENT/
Cinnamoarsinate de Quinine/0g. 012/
Soude pure/Q.S./Excipient/Q.S.’
The Glowrey Papers

136

Mary Glowrey’s (1887–1957)
obstetric problems notes, c.1939
print on paper
25.0×20.0 cm (14 pages)
The Glowrey Papers

137

Mary Glowrey (1887–1957)
performing surgery, c.1940s
photograph (reproduction)
15.0×20.0 cm
The Glowrey Papers

138

Mary Glowrey’s (1887–1957)
suitcase, c.1950
leather, metal, cardboard
60.0×40.0×20.0 cm
Inscription on lid: ‘Dr Mary Glowrey/
Sr Mary of the Sacred Heart’;
remnants of label on end: ‘... Rail ...
GGAGE ...’; inscription on underside:
‘MRS R.F. O’HALLORAN/“Tylden”/
BALRANALD/N.S.W 2715/Telephone/
PENARIE 495136’; label inside item:
‘ALCo/NATIONAL Trade Mark/
LEADFRITE COMPRESSED FIBRE’
The Glowrey Papers

139

Mary Glowrey’s (1887–1957)
notes on obstetrics and gynaecology
In India, 1952
print on paper
34.0×20.5 cm (4 pages)
The Glowrey Papers

140

The Catholic Hospital booklet,
September–October 1952
print on paper
22.0×13.5 cm
The Glowrey Papers

141

Sister Mary Glowrey (1887–1957),
c.1953–1954
photograph
12.0×5.0 cm
The Glowrey Papers

142

Student Nurses Association of
the Trained Nurses Association of
India, silver jubilee souvenir booklet,
1954
print on paper
24.0×18.5×0.5 cm
The Glowrey Papers
Mary Glowrey formed this association

143

Mary Glowrey (1887–1957)
autobiography, c.1956
print on paper
34.0×21.5 cm (33, pages 2–34)
The Glowrey Papers

144

Dr Lucy Connellan’s letter to the
Glowrey family, 1958
ink on paper
26.0×20.5 cm
The Glowrey Papers

145

St John’s Medical College,
prospectus, 1963–1964
‘History’, page 2, lines 4–7
print on paper
21.5×14.0 cm
The Glowrey Papers

146

A Nun Revolutionizes, biography
of Sister Mary of the Sacred Heart
Glowrey (1887–1957), 1972
print on paper and cardboard
18.0×12.0 cm
The Glowrey Papers

147

The Far East magazine, April 2009
‘Another saint in the making’,
pages 6–7
print on paper
26.5×20.0 cm
The Glowrey Papers

148

The Record newspaper,
Wednesday 8 December 2010
‘Culture of life pioneer’s sanctity
examined’, pages 1, 4–5
print on paper
43.0×30.0 cm
The Glowrey Papers

149

Messenger of Saint Anthony
magazine, April 2011
‘Witness to Hope’, pages 42–43
print on paper
28.5×21.0 cm
The Glowrey Papers

150

Kairos Catholic Journal magazine,
24 July – 6 August 2011
‘God’s great work through a
“dreamer”’, pages 22–23
print on paper
29.0×21.0 cm
The Glowrey Papers

151

Kairos Catholic Journal magazine,
4–17 September 2011
‘Our Father in heaven and on earth’,
pages 26–27
print on paper
29.0×21.0 cm
The Glowrey Papers

152

Commemoration flag of the first
stage of Mary Glowrey’s (1887–
1957) canonisation, March 2013
fabric
36.0×45.0 cm;
frame: 52.0×62.0 cm
The Glowrey Papers

153

Indian Link magazine, June 2013
‘The Saint of Guntur’, pages 8–10
print on paper
39.0×27.0 cm
The Glowrey Papers

JANET CLARKE HALL COLLECTION

154

Nicholas Purcell
Dr Margaret Henderson OBE
(1915–), College Fellow, Physician
photograph
55.0×43.0 cm
Janet Clarke Hall Collection

TRINITY COLLEGE COLLECTION

155

Caroline Williams b.1945
New Zealand
Lilian Alexander (1861–1934),
2005
oil canvas and pencil on linen
120.0×90.0 cm;
frame: 125.8×95.3 cm
Trinity College Collection
Courtesy of Trinity College
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by Viscopy, 2013

ROYAL WOMEN’S HOSPITAL
COLLECTION

156

Block Plan of the Women’s
Hospital, c.1884
ink on paper
82.0×72.0 cm
Royal Women’s Hospital Collection

157

Aileen Dent (1890–1979)
Australia
Dame Kate Campbell (1899–1986),
c.1970
oil on canvas
100.0×80.0 cm
Royal Women’s Hospital Collection

ST VINCENT’S ART GALLERY
COLLECTION

158

Shirley Bourne (1924–2006)
Australia
Margaret Garson, c.1970
oil on canvas
89.0×74.0 cm
Gift of Margaret Garson 2007
St Vincent’s Art Gallery Collection

ST VINCENT’S HOSPITAL COLLECTION

159

Resident medical officers, including
Dr S. Clifton, Dr M. Owens and
Dr L. Sisely (1916–2004), 1942
photograph, cardboard
110.0×80.0 cm
St Vincent’s Hospital Collection

160

St Vincent’s Clinical School Graduate,
2011
photograph
20.0×30.0 cm
St Vincent’s Hospital Collection

UNIVERSITY OF MELBOURNE ARCHIVES

161

Letter from Dr Flora Murray (1869–
1923) inviting Dr Vera Scantlebury
(1889–1946) to take an appointment
of Assistant Surgeon to the Endell
Street Military Hospital in London,
24 October 1916
typescript on paper
Vera Scantlebury Brown Papers
(2013.0058), University of Melbourne
Archives
Donated by Catherine James Bassett

162

Cablegram from Dr Flora Murray
(1869–1923) regarding appointment
of Dr Vera Scantlebury (1889–1946)
to Endell Street Military Hospital in
London, 1916
print, handwritten on paper
Vera Scantlebury Brown Papers
(2013.0058), University of Melbourne
Archives
Donated by Catherine James Bassett

163

World War I military uniform
buttons and insignia worn by Dr Vera
Scantlebury (1889–1946) at Endell
Street Military Hospital
metal
Vera Scantlebury Brown Papers
(2013.0058), University of Melbourne
Archives
Donated by Catherine James Bassett

164

Autograph book of Vera
Scantlebury (1889–1946), c.1906–
1907
ink on paper
Vera Scantlebury Brown Papers
(2013.0058), University of
Melbourne Archives
Donated by Catherine James Bassett

165

Dr Vera Scantlebury (1889–1946)
and her brother Dr George Clifford
Scantlebury, c.July 1918
photograph, leather frame
Vera Scantlebury Brown Papers
(2013.0058), University of
Melbourne Archives
Donated by Catherine James Bassett

166

Certificate that accompanied OBE
medal, 1936
print on paper
Vera Scantlebury Brown Papers
(2013.0058), University of
Melbourne Archives
Donated by Catherine James Bassett

HARRY BROOKES ALLEN MUSEUM
OF ANATOMY AND PATHOLOGY

167

Tramond (Paris, France)
Model of the facial nerves
comprised of a sagittal section
of a skull, overlaid with wax facial
nerves, c.1890
bone, wax, wood and metal
38.0×32.0×20.0 cm
Harry Brookes Allen Museum of
Anatomy and Pathology
516-200359

168

Tramond (Paris, France)
Model of a hemi-head showing
the course of cranial nerves,
c.1890
wax, hair, wire
17.0×26.0×24.0 cm
Harry Brookes Allen Museum of
Anatomy and Pathology
516-500238

PRIVATE COLLECTIONS

169

Ellen Balaam (1892–1985),
Annie Bennett (1891–1940),
Gweneth Wisewould (1884–1972)
and Nurse at Women’s Hospital
postcard, 1915
print on paper
14.0×9.0 cm
Collection of Lois Parr

170

Gweneth Wisewould (1884–1972),
Ellen Balaam (1892–1985),
Annie Bennett (1891–1940)
Playing Croquet postcard, c.1915
print on paper
14.0×9.0 cm
Collection of Lois Parr

171

Annie Bennett, Gweneth Wisewould
(1884–1972), Ellen Balaam (1892–
1985) postcard, c.1915
print on paper
14.0×9.0 cm
Collection of Lois Parr

172

Margaret (Maggie) Smallwood
(Hewitson) (1898–1968), c.1960
photograph
25.0×20.0×0.8 cm
Collection of Richard Smallwood

173

Margaret (Maggie) Smallwood
(Hewitson) (1898–1968) as a baby
(1899), young child (1905) and at
graduation (1922)
photographs
14.0×19.0 cm, 17.5×13.0 cm,
18.0×13.0 cm; (3) frame:
46.0×40.0×1.2 cm
Collection of Richard Smallwood

174

Vera Scantlebury Brown (1889–1946)
and Dr Kate Isabel Campbell
(1899–1986)
Victoria Department of Health, A
Guide to the Care of the Young Child
print on paper, hardcover book
24.5×16.0×1.8 cm
Collection of Heather Sheard

175

Order of St Sava (3rd class)
presented by King Alexander
of Serbia to Mary De Garis
(1881–1963) in September 1918
The British War Medal and the Allied
Victory Medal awarded to Mary De
Garis (1881–1963) by the British
Government in February 1917
paper, frame, metal, ribbon, print on
paper
frame: 59.0×42.0×4.5 cm
Collection of Kathy M. Hancock

176

Dr Main and Dr Vera Scantlebury
(1889–1946)
1926 Victorian Department of
Public Health, Victoria: Report to
the Minister of Public Health of the
Welfare of Women and Children,
1926
print on paper
34.0×21.0 cm
Collection of Heather Sheard

177

Gweneth Wisewould (1884–1972)
Outpost: A Doctor on the Divide,
1971
print on paper, hardcover book
23.0×15.0×2.0 cm
Collection of Heather Sheard

178

Dr Ida Bell Brodrick (1919–2011)
and baby, c.1955
photograph
9.0×9.0 cm
Collection of the Matthews family

190 STRENGTH OF MIND: 125 YEARS OF WOMEN IN MEDICINE, MEDICAL HISTORY MUSEUM

LIST OF WORKS: MEDICAL HISTORY MUSEUM, UNIVERSITY OF MELBOURNE 191

