

The Rockefeller Foundation and Australian Nursing

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On 13 December 1948 in New York, the Rockefeller Foundation (RF) officially approved Fellowship number 2770. It allowed Gwen Burbidge, the Matron of the Fairfield Infectious Diseases Hospital in Melbourne, Australia, to spend eight months observing and studying nursing and nurse education in Canada and the USA. Gwen Burbidge had a little over a month to prepare: she flew out from Melbourne on 23 January 1949, arriving in Vancouver four days later.

The award of Gwen Burbidge's fellowship was a momentous occasion as it was the first awarded to a nurse in Australia. As the RF Archives confirmed, Burbidge was also the last Australian nurse to hold one, although four Australian nurses were later awarded shorter travel grants. Why was Burbidge awarded this sole fellowship to an Australian nurse, and what did it reveal about the RF's hopes for Australian nursing?

On one level, the choice of Gwen Burbidge can be simply explained. From her return to Australia in early 1939 with a Diploma in Nursing from King's College (London), she had the highest nursing qualifications in Australia and was extremely personable and an articulate matron who had instituted major reforms at Fairfield Hospital. The main health focus of the RF was public health and Burbidge had helped institute a public health nursing course in infectious diseases at Fairfield. As inaugural President of the National Florence Nightingale Memorial Committee, she developed highly productive links with the Red Cross Society and the Rockefeller Foundation also worked co-operatively with the Red Cross.

For all her abilities and achievements, Gwen Burbidge was also a highly controversial figure, particularly due to her work for Manpower (a government board which managed Australia's war time labour needs) during the Second World War, and her advocacy of the training and official recognition of a second level of nurse, in Australia then called nurses' aides. She was the leader of the reformist 'New Guard' of nurses, as described by Maureen Minchen in her *Revolutions and Rosewater. The Evolution of Nurse Registration in Victoria, 1923-1973* (Melbourne: Victorian Nursing Council, 1977). The 'New Guard' was bitterly opposed by the 'Old Guard' led by Jane Bell, the President of the Royal Victorian College of Nursing, the Victorian state branch of the Australian Nursing Federation. These organisations were the leading professional organisations for nurses in, respectively, the state of Victoria and Australia. In supporting Burbidge, the RF actively intervened in a major controversy within Australian nursing.

The sources in Australia about this RF intervention were mostly limited to documents by Burbidge herself, describing and assessing her experiences during her fellowship. These documents include Burbidge's 1949 diary with her shrewd, conscientious commentary on events;

numerous reports she wrote on her return; and later oral history interviews. The extra information obtained about this period, in the RF Officers Actions books, diaries and correspondence files, gave a different perspective. As Sioban Nelson has found was usual, the RF records of Burbidge's visit confirm the detailed care that went into planning, supervising and, as necessary, adapting her fellowship program. Combined, the Australian and RF sources provide an exceptionally rich account of a RF fellowship. The combined sources also detail how Burbidge used her fellowship to build an international network of colleagues, a factor particularly important for Australian nurses given their geographical isolation. The main focus of my research however, was the reasons for, and the impact of her fellowship. What does Burbidge's fellowship reveal about the RF's plans and hopes for Australian nursing?

A preliminary search of the RF Archives soon revealed why Australia was comparatively absent in publications about the RF, and provided one reason for the solitary fellowship. In the post-war years, Australia largely slipped under the RF radar and its International Health Division (IHD) had 'withdrawn' from Australia to the extent that there was even confusion among the staff regarding which regional office Australia came under.

The reports and letters to and from the RF staff contain extensive and revealing assessments of Australian institutions and individuals. These candid reports revealed another dimension to this neglect of Australia: the intense irritation felt by at least some RF staff that Australians so fervently and reverently looked to England as the font of all wisdom. As fellowships were granted to study in North America, Australian anglophilia was a significant factor inhibiting the Rockefeller presence. Ironically, Burbidge had been born in England and had returned there to gain her Diploma in Nursing, so had added reasons for anglophilia. She

was, however, receptive to new ideas, loved American technological advances, and had been generally impressed during a visit to North America in 1947.

One of the first results of delving into the RF Archives was to realise that, while Burbidge was the first Australian nurse to hold a fellowship, she was not the first to be offered one – that honor belonged to Muriel Doherty, who had been offered a fellowship after working as Principal Matron for the United Nations Relief and Rehabilitation Administration. It was a surprise as there is no mention of this offer in Doherty's autobiography, nor in her extensive papers in Australian archives.

This earlier episode highlighted a major problem which Australian nurses had with the RF. As one RF staffer wrote in 1947, 'As a rule we do not provide fellowships or travel grants except at the request of official health agencies'. In the late 1940s Australians organised medicine was locked into a fierce battle against the federal Labor Government and its plans for a national health service. Nurses tended to strongly support their medical colleagues while some like Doherty equated the Labor Government with the menacing advance of communism. To cooperate with such a government was anathema, but the RF's had a policy of providing fellowships only for projects requested by 'official health agencies' - such agencies were generally within a university or governmental body. For Australian nurses, support from a university was out of the question because there were no nursing departments in Australian universities. That left governmental bodies, but an additional requirement was that the Fellows were expected to influence future national policies. This further criterion pointed to an Australian Fellow needing the support of the federal government. That was an unpalatable prospect for nurses such as Doherty. It is likely that for this reason, as well as personal commitments, Doherty turned down her second chance to take up a RF fellowship in 1946.

Thanks to the persistent lobbying of individual Australians, the IHD was reminded of Australia and New Zealand in 1947. RF staff member Dr. Robert Morison visited first, followed by Dr. Charles Leach in July 1948. Leach specifically sought out prospective candidates for fellowships. The term used in the correspondence by the Australian Director-General of Health and others was ‘young men’ at the beginning of an outstanding, influential career. While the language of the day was not gender specific, the RF’s correspondence files contain little indication that its Australian contacts considered women as potential fellowship holders, and no indication that nurses were considered. Unfortunately Leach’s field diary of his visit, though listed in the RF Archives, could not be located. Yet it is clear that Leach was interested in assisting nurses because he was the one who had first recommended Doherty for a fellowship. He also had a wide network of informants and like Burbidge, close links with the Red Cross Society. On 31 July 1948, Leach visited Fairfield Hospital ostensibly to inspect the public health nursing course, and also to meet Matron Gwen Burbidge.

Letters in the RF Archives revealed the subsequent events. While it was RF policy to respond to official requests, Burbidge’s case indicates that in practice, such a request could be solicited. On Leach’s urging, on 3 August 1948 Burbidge wrote to Mary Elizabeth (‘Betty’) Tennant, an Assistant Director of the IHD with responsibility for nursing. Burbidge invited Tennant to Australia to provide advice on the proposed national college of nursing.

After she received Burbidge’s letter, Tennant consulted Leach who confirmed that Burbidge was, in his words, ‘the outstanding nurse’ he had met in Australia. She then wrote both to Burbidge suggesting a fellowship, and to Arthur J. Metcalfe, the Director-General of Health for Australia, asking ‘if they are interested in requesting a fellowship for Miss Burbidge and if so to let us know’. Metcalfe responded predictably and so, once finances were sorted out and the

approval of Fairfield Hospital gained, Burbidge had her fellowship. Burbidge was not strongly identified with any one political party, but she had co-operated with the Labor Government during the war, and showed no inclination to sacrifice her or nursing's interests in the cause of the medical profession's fight against what they saw as the nationalisation of medicine.

The IHD's plans for Australian nursing turned out to be amorphous. The RF correspondence files relating to Australia revealed that in 1951 Elizabeth Brackett, an Assistant Director in charge of nursing at the RF, wrote that Burbidge's was considered a 'special' fellowship, justified by her 'participation on national committees concerned with nursing education ... [which] placed her in a strategic position of influence.' No strongly defined objectives were identified, although Dr. George Strobe, the Director of the IHD, indicated to Burbidge that the RF might fund the planned national college of nursing if located at the newly founded Australian National University in Canberra. As the RF discovered, however, founding key medical and nursing educational facilities in Canberra was not then a practical proposition as it lacked a large teaching hospital.

Overall, the impression left by the papers in the RF Archives is that Burbidge's fellowship was in the nature of a 'fishing' expedition. One of the strongest comments was a diary entry by RF staffer George Payne on 26 October 1948 that, if nursing reform in Australia 'continues to have government backing', Tennant would visit Australia 'and this might be followed by other fellowships' for nurses. As Tennant recorded in her diary, during her fellowship Burbidge consulted Tennant on the future of Australian nursing ('what can be done in Australia to raise the standard of nursing education so that university recognition may be possible') as well as suggestions regarding her best options after she returned home. Tennant urged patience and for Burbidge first 'to study developments' that had occurred in Australia

during her absence. Tennant would not reveal any definite plans by the IHD, most likely because there were none as it wanted to support local initiative rather than impose solutions.

The RF's methods and indefinite aims infuriated Burbidge's fellow nurses, particularly the Old Guard of the Royal Victorian College of Nursing (RVCN). Their annoyance increased when they unsuccessfully tried to find out the 'terms of reference' for Burbidge's award. One fear was that it heralded a further step in the federal government's encroachment into health care, as they had been informed that it had 'been made for a very definite purpose and will possibly be a forerunner to a Government appointment in Australia'. As so often happened, the RVCN had been excluded from the decision making process and therefore it feared other decisions might be contemplated, particularly about the proposed national college of nursing. Neither the RVCN nor the ANF gained much information from the RF. The fact that there were no detailed 'terms of reference' was something difficult to comprehend. All that George Payne would reveal to the RVCN was that, if the RF developed an Australian project, it would be through the Federal Department of Health. Australia's Director-General of Health, Metcalfe, was similarly unforthcoming. The result was considerable local ill-will. Catherine Dossetor, a nurse with the City of Melbourne's Health Department, privately complained to the RVCN Secretary about the RF that 'If anyone ever gives a straight forward reply to an honest question, I venture to say that the nursing fraternity would be unlikely to survive the shock.'

What then, did the Rockefeller Foundation Archives add to my understanding of the impact of Burbidge's fellowship on Australian nursing and the healthcare system? Sadly, the documents confirmed that the fellowship was ill-timed. Nursing was not high on either Morison's or Leach's agenda during their short, crowded visits. If it had been, they might have hesitated before suggesting that Burbidge absent herself from Australia during 1949.

Burbidge loved her time on her Rockefeller fellowship and its influence was evident during the rest of her career, but its timing was such a problem that she later recalled that she ‘did not want to go, but I did’. Her reluctance is understandable as she was deeply involved in trying to institute a number of major reforms in nursing education. One cause gave her the most reason to pause. When the fellowship offer was made, Burbidge was in the middle of highly controversial and delicate negotiations with the federal government about establishing a national college of nursing. The Director-General of Health, Metcalfe, offered to advise the Minister of Health ‘not to act’ on the college until she returned home but nurses took matters in their own hands. Burbidge’s dream of a truly national college was destroyed just before she left Australia with the formation of the New South Wales College of Nursing. Its rival, College of Nursing, Australia – a national college in name only – was founded in her absence and without federal government funding.

Nurses within the RF, despite internal problems, had relatively consistently and clearly expressed their professional ideals since Mary Beard’s 1934 Five Year Plan. Tennant wrote to Burbidge on 22 September 1948, reminding her of these ideals: a commitment to public health (‘the preventative and social aspects of nursing as well as the curative’) and to university-level nursing education. Set against these aims, Burbidge’s fellowship was a failure. It did not result in the foundation of another Rockefeller ‘lighthouse’ faculty of nursing, such as at Toronto and Yale Universities. Despite considerable effort, Burbidge could do little to promote public health nursing or to prevent the overall stagnation of Australian nursing education until the 1980s.

It is equally clear from the archival record in the RF that this failure was not due to any failing on Burbidge’s part. Tennant noted in her diary on 25 August and 21 October of 1949, that Burbidge had made ‘a good impression’ and ‘had been very highly thought of everywhere she

has visited'. Tennant concluded that if Burbidge 'receives any kind of help at all on her return to Australia, she should be able to bring about changes for the better.' Burbidge did not receive the necessary support. What no-one knew at the time was that when Burbidge returned to Australia at the end of her fellowship, she had just a decade remaining in active nursing. In 1960 her chronic illness and increasing difficulties as Matron led to her resignation from Fairfield Hospital and subsequent resignation from nursing professional organisations.

In Australia in 1949, the Rockefeller model of nursing was simply unrealistic. In 1947 Burbidge pointed out that while Canada, with a population of some 13 million, had over 6,000 nurses, with at least one year's university education, Australia, with a population of about 8 and a half million, had just six. In 1948 Tennant reported that there were around 175 schools of nursing in the USA connected to a university: Australia had none. Australia had not yet benefited from the massive increase in population due to postwar immigration and the low educational attainments of students entering nursing was a continuing challenge. A nursing degree was simply not feasible in Australia in the 1950s.

The problem of Burbidge's inability to fulfil her potential was also political. The defeat of the federal Labor Government in December 1949, and the 'split' within the Labor Party in 1955, ushered in a more conservative era. Medical and hospital interests dominated healthcare and nursing education, and restricted the search for national, as opposed to state solutions. The decline in the severity of epidemics and the seeming miracle of penicillin were interpreted as the end of infectious diseases, and so contributed to a decline in commitment to public health. In 1951, as the United Nations' World Health Organisation became more established and the Cold War intensified, the RF closed its IHD. The RF's fellowship and travel grants for Australians

indicate that it subsequently focused on laboratory-based clinical research, from which nurses were effectively excluded.

My research in the RF Archives revealed that Burbidge's fellowship was more of a hope than a plan. The hope was that an innovative nurse like Gwen Burbidge could attract governmental support and so provide effective leadership in implementing much-needed reforms in Australian nurse education. It was a doomed hope. The RF's vision of nursing was too radical for Australian conditions in the 1950s. As conservative governments began their decades-long tenure in the federal and state (Victoria) spheres, Burbidge's ill-timed fellowship had limited impact. Such stories of lost opportunities are as relevant to understanding the workings of the RF, and the history of Australian healthcare, as are chronicles of success. A fuller analysis of Burbidge's fellowship will be in my forthcoming biography of her, to be published by The College of Nursing (NSW). A paper for the Australian and New Zealand History of Medicine Conference, to be held in Perth in October 2009, will use Burbidge's fellowship to explore the impact of the RF on public health nursing and nursing education in Australia during the mid-twentieth century.

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