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About Provenance

The journal of Public Record Office Victoria

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The records held by PROV contain a wealth of information regarding Victorian people, places, communities, events, policies, institutions, infrastructure, governance and law. Provenance provides a forum for scholarly publication drawing on the full diversity of these records.

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Editorial

Welcome to the 2019 issue of *Provenance*. Issue 17 is small in size but nevertheless represents a range of thoughtful responses and insights stemming from archival research.

Two articles use judicial records to explore and reflect upon the personal and often private histories of women in nineteenth-century Victoria. Janine Callanan's peer-reviewed article 'Giving birth in the bush', analyses inquest deposition files and other publicly available family and community history sources to locate and contextualise moments in some women's individual experiences of childbirth in colonial Victoria. In the absence of written personal accounts from this period, Callanan's article sheds light on the potential uses for these types of records to understand and inform the construction of narratives of women's experiences in rural Victoria between 1850 and 1880.

In her forum article 'Attitudes to wife beating in colonial Victoria', Emma Beach explores the case of Elizabeth Scott, the first women to be hanged in Victoria in 1863 for the murder of her husband, in the context of present-day understandings of Battered Woman Syndrome. As Beach argues, Elizabeth was the victim of 'repeated and sustained domestic violence', or wife beating as it was then called. Details of the history of domestic abuse Elizabeth suffered is documented in court records, however these facts were not mentioned by her defence barrister during the trial and did not inform the subsequent verdict or prevent her execution.

The forum section also includes a reflective essay by Peter Andrew Barrett, which was prompted by Public Record Office Victoria's collection of photographs and plans of the grand former head office of the State Savings Bank of Victoria, which was located on the corner of Elizabeth and Bourke streets, Melbourne. In 'A visit to Lizzy and Miss Mac', Barrett recalls vivid childhood memories of dressing up in his best clothes to visit his aunt, 'Miss Mac', in the bank's Overseas Department with his mother and brother each school holidays. Demolished in 1975 to make way for a new commercial tower, the building known as 'Lizzy' was a symbol of the institution's role in the lives of many Victorians over sixty years and a significant architectural landmark in the City of Melbourne.

On a separate note, we were pleased to accept a Mander Jones Award for Issue 16 of *Provenance* (2018) from the Australian Society of Archivists for best publication to engage and communicate with clients or potential clients of an Australian archive or archival collection about Australia (Category 8). Thank you to all colleagues, authors, reviewers and the editorial board for their work in producing the issue. I hope that you enjoy reading the current issue of *Provenance*.

Tsari Anderson Editor, *Provenance*

Retereed articles			
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Giving Birth in the Bush

Colonial women of Victoria and the challenges of childbirth, 1850–1880

'Giving Birth in the Bush: Colonial women of Victoria and the challenges of childbirth, 1850–1880', Provenance: The Journal of Public Record Office Victoria, issue no. 17, 2019. ISSN 1832-2522. Copyright © Janine Callanan.

This is a peer reviewed article.

Janine Callanan is a Master of History student at the University of New England and resides in Melbourne. This article was taken from her minor research thesis which utilised Victorian inquest records, among other primary sources. Janine's areas of interest include the history of Australian domestic and family life, and the changing agency of women in Australian history. The author is currently using will and probate records held by Public Record Office Victoria to research the testation patterns of single women in Victoria in the early twentieth century as a reflection of developing female agency in Australian social and political life.

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Abstract

This article explores the common and unique challenges of early maternity which young migrant women faced in colonial Victoria. The private nature of pregnancy and childbirth in this era means that there are very few recorded personal accounts of their experiences. Using a range of primary sources which provide facts and clues and applying these to contemporary understandings to build a potential narrative of nineteenth-century childbirth in rural Victoria, this article provides insight into a fundamental female experience of colonial life.

Locating the personal in public records

Much of the existing Australian research on the early stages of maternity among young migrant women in Colonial Victoria has primarily focused on the history of nursing, midwifery and obstetrics. The individual experience of women giving birth has been largely overlooked. This article seeks to describe the physical, practical and emotional challenges which childbearing entailed, so far from the comforts and supports of family, often in places remote from village or town life, and the impact of the harsh physical environment on non-Aboriginal childbearing women. It considers birth in the context of personal history, available resources and prevailing culture, and explores ways in which some colonial women of rural Victoria managed the challenges they faced in their 'confinement'.

Pivotal to this study is the use of the Victorian coronial inquest reports, previously utilised in research to illuminate the tensions between nineteenth-century medical practitioners but which also have tremendous value in their capacity to provide description and voice to the birth experiences of pioneer women in Victoria, and thus in re-constructing personal experiences of childbirth. For this research, a small sample of twelve coronial investigations were consulted, from rural locations around Victoria. These exhibited some common

elements. In most of the events documented in these reports, both a doctor and a midwife or nurse attended the woman, however anecdotal and documentary evidence indicates that for the vast majority of rural births in nineteenth-century colonial Australia,[1] it was primarily a midwife, a nurse or a 'handywoman' who was engaged to provide support. Amongst poorer communities, a medical man[2] would be called upon if available, only when serious complications arose. In each of the inquest files consulted, witness depositions were included from a qualified doctor, a midwife or an experienced attendant, and a friend or spouse.

Certainly, the great majority of births in pioneer Victoria were successful for mother and child. Even in the absence of first-hand accounts, this article aims to demonstrate the potential to build a picture of individual women's experiences of childbirth and early maternity, using a range of public records and historical sources. There has been growing interest over recent years in the pioneering women of Australia. Scholars such as Clare Wright, Marjorie Theobald and Patricia Grimshaw have examined aspects of migrant women's experience in the nineteenth century and identified significant female agency within Australian colonial history, revealing the wider impact of choices pioneer women made in their domestic and social lives.[3]

A great many young women chose to leave behind the promise of lifelong drudgery, others turned their backs on the rigidity of Victorian life in Britain.[4] For most of the thousands of Irish migrants, coming from a country decimated by starvation, destitution and disease that held few prospects, emigration was their only alternative. For all these reasons and more, by the 1850s women arrived in their thousands, from England, Ireland, Scotland, Wales and elsewhere, seeking husbands and riches on the goldfields of Victoria, or security and good health in a land of promise and abundance. Life in early Victoria, however, was far from easy and rarely comfortable. While most migrant women were intent on a different kind of life to the one they had known, the inescapable task facing nineteenth-century women, particularly in a new colony, was to create a stable domestic family life, and thus a more 'civilised society', by producing children.[5]

Despite the extraordinary distance from birthplace, family and culture, these women essentially belonged to the Victorian era, with its gender constraints and expectations. Childbirth discussion belonged in the private domain only, and the subject of pregnancy and birth was not publicly spoken about, except in the most discreet, indirect manner. A woman's late pregnancy, labour and post-natal period was described euphemistically as her 'confinement' and even those who were highly literate did not provide much written detail about this time, particularly in regards to the process of birth itself.[6]

Surviving diaries from this era were generally penned by more affluent women.[7] This article is focused on the far greater number of working-class women, many of whom were semi-literate and time poor. Self-reflective journals were generally not part of their daily grind, and although many men and women exchanged letters with loved ones in their native countries (in an excruciatinglyslow process by today's standards), relatively few of these have survived across so many generations.[8] There is an additional impediment to gaining direct insight into nineteenth-century experiences of childbirth, in that while issues of decorum lent a secrecy to the realities of maternity, the ordinariness of childbirth also rendered mothers' voices mute. [9] So much about the lives of these women was new, different and challenging, while the trials of childbearing were simply a woman's lot in life; something to be endured.

However, there are several contemporary resources at hand which offer facts and clues to nineteenth-century labour and birth. Some diaries and letters do survive: one important example is the diary of Sarah Davenport, a semi-literate English migrant, who settled in the Victorian goldfields in the 1850s, and wrote her reminiscences in later years, including memories of her grief at her young son's ship-board death, her consequent miscarriage, and the birth of her child in Victoria.[10] Government documents and statistics, civil registrations, immigration records, newspaper reports and advertisements provide facts. Inquest depositions provide voice and detail. Records of local history, such as local council meetings and research of town planning and development, describe domestic arrangements such as housing and access to water, and trace the development of rural communities, including health services. Family histories provide further context and life detail. A combination of these sources can be used to provide insights into the practical, social and physical factors which played a role in each woman's childbirth story.

This article does not attempt to describe the essential birth experience for pioneer women, for certainly there is no such thing. Instead, following the lives of several young women, it aims to demonstrate how the utilisation and analysis of publicly-held records and reports can illuminate the physical circumstances in which this sample of colonial women lived, to gather together the fragments of fact and contemporary description which suggest both common and conflicting experiences of colonial maternity. In the spirit of 'history from below', this endeavour to reveal the daily life of ordinary people must be fuelled by details often ignored in histories which pursue 'the big picture' of nation building and momentous events.[11] In addition, family history is both enriched by the exploration of these records and provides valuable personal records which contribute to the construction of narratives. Thus, exploration of contemporary government records such as inquest reports may lead to the construction of individual and localised experiences and contribute to a more thorough understanding of colonial family life. Factual details of one woman's experience do not constitute evidence for another, but when applied to similar circumstances they are valuable, indicating how her labour and birth may have unfolded, and the challenges which other pioneer families may have also encountered.

Childbirth: a dangerous activity

Even with medical and family support, things often went wrong during and shortly after childbirth and there was a chance that mother, infant, or both, would not survive the event. Research by Janet McCalman and Madonna Grehan into the medical challenges and conflicts of nineteenth-century Australian obstetrics paint a stark image of jeopardy and suffering faced by so many young women in childbirth.[12] The most common difficulties faced in labour during the nineteenth century were described as infection, fever and convulsions, uterine rupture, placenta praevia (when the placenta is positioned across the cervix), retained placenta and blood loss.[13] Statistics of maternal death from abortion during this period are unclear, as death was often disguised as fever or blood loss.[14] In addition, many women in this era suffered from poor health, or had been subject to disease and malnutrition in their youth, which compromised both infant and maternal health.[15] Rickets, for example, was rampant in the industrial centres across Europe during the nineteenth century, where the urban poor saw little sunshine and ate a poor diet.[16] The disease impacted skeletal growth and development, and ultimately reduced the strength of women's pelvic bones, causing obvious complications in the natural process of birth.[17]

Likewise, famine and disease in Ireland throughout the 1840s and 50s meant that many Irish-born women in Victoria carried long-term physical issues which impacted their capacity to survive a difficult pregnancy or childbirth. McCalman claims that 'Pregnancy could be a death sentence'. Her research into women's health in early Victoria found that in 1860, one in fifteen pregnant Irish-born women who presented at the Royal Women's Hospital in Melbourne had a 'contracted or deformed pelvis' and had been children during the Famine.[18]

The danger was not over upon delivery of an infant. Infection following childbirth, or 'child bed fever', often claimed the life of a mother in the days after childbirth, and McCalman reports that infant mortality rates in colonial Melbourne fluctuated between 4 and 11 per cent. Her research draws on patient records from the establishment of the early Royal Women's Hospital in the 1850s, and finds that maternal death rates were around 4.5 per cent of births at the hospital between 1856 and 1874, while Wright suggests that these figures were likely to be much higher in the goldfields, where medical support was not available and clean water scarce.[19] In her article outlining the history of childbirth in Sydney, Featherstone points out that maternal nutrition also played a key role in successful labour, as illustrated by

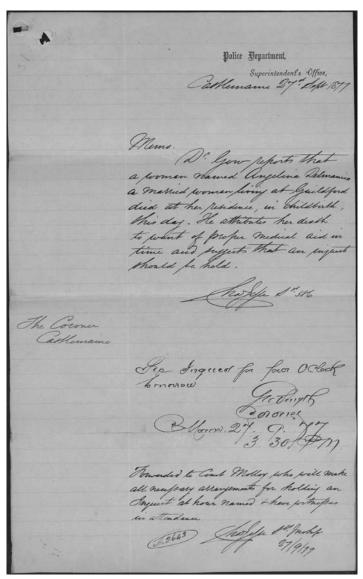
the very high levels of complication in births at the city's Benevolent Society.[20]

Coronial inquest reports: narratives of family tragedy

At a time when doctors and midwives were often in tense conflict and competition over the arena of birth, the death of a woman or her baby was regularly subjected to a coronial investigation.[21] Grehan provides fascinating examination and discussion of the role and standing of midwives in colonial Victoria, and describes the often tense relationship these women had with medical men who served the same localities. As doctors generally charged more for their services, they were often called to assist only when a woman's labour became complicated, or in case of post-natal emergencies.[22] Glenda Strachan contends that this was also reflective of a preference for women as attendants, due to tradition and a sense of delicacy.[23] Midwives were often unqualified, although a great many were highly experienced; in the event that mother or newborn died during or after birth, it was not uncommon for one medical attendant to declare medical or criminal negligence by the other.[24] In such cases, a coronial investigation was held, to identify cause of death and responsibility. At the root of this tension was the growing medicalisation of childbirth, which McCalman proposes partly arose from the introduction of obstetric instruments such as forceps, and which led to the popular negative characterisation of midwives, despite them often having strong community support.[25]

It is a consequence of this professional tension, and subsequent legal processes, that we now have open access to a greater number of detailed contemporary descriptions of each of these childbirth events, providing powerful insight into the realities of social, domestic and medical conditions in nineteenth-century Victoria. The described experience of one family's tragedy may provide clues to shared experiences within a community, regarding available resources and impediments to safe childbirth, and to the choices and accepted practices of labouring women and their attendants. For family historians, these inquest reports provide an intimate window into the domestic lives of colonial ancestors as few other records can do.

Coronial inquests were generally held in the days immediately after death, when witnesses made detailed statements, often describing the circumstances of the event and the actions of each person involved. Husbands, midwives, medical men, neighbours and other family members described the progress of the woman's labour, the help at hand, the presence of others, what the woman said, how she looked, and provided detail about physical



Police report from inquest into the death of Angelina and unnamed child Delmenico, PROV, VPRS 24/P0 Inquest Deposition Files, Unit 368, Item 1877/307.

and medical challenges which had combined to create disaster. Panic, despair, hopelessness, grief, anger, frustration and fear – these sentiments are each apparent in the witness statements of a birth gone tragically wrong. In this way, inquest documents provide valuable insight into the personal experience of childbirth and give voice to early Victorian settlers who are otherwise silent.

Grehan's paper, 'A most difficult and protracted labour case', uses the 1869 inquiry into the death of Mrs Margaret Bardon as a case study to discuss the professional tensions which existed between medical men and midwives. [26] This same inquiry also provides useful clues to Margaret Bardon's personal experience,

by describing such details as her pain relief, in the form of opium and brandy, and her previous confinements, as described by her husband, John.

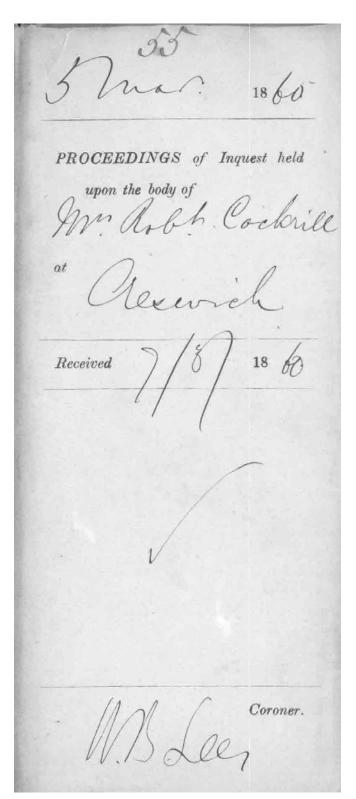
The deceased has had five children before this last. The first is still born and all the others are alive still. The deceased's last child was born alive without medical assistance. She was in labour for only three quarters of an hour on that occasion and was delivered of a full grown healthy male child which is alive still. She had medical attendance for the second, third and fourth children, and in the delivery of the fourth and fifth, no instruments were used.[27]

Indeed, when we read that Mrs Bardon cried out 'in a very loud voice', 'Look here, I am done for' upon seeing the 'dirty white' state of her amniotic fluid, it is easy to sense the couple's growing panic.[28]

Like the Bardon case, the following examples demonstrate how coronial inquest witness statements are valuable in illuminating the personal experience of labour, and particularly in combination with newspaper reports and local histories, fuel our understanding of childbirth experiences in a rural context through the mid-nineteenth century.

Such intimate first-hand accounts of a fundamental function in domestic family life, provide social and family historians with a closer understanding of the personal and community challenges which precipitated change. Clare Wright's comprehensive research into the participation and influence of women in the Eureka Stockade event is notable in its attention to the domestic and social activity of Ballarat women whose responsibilities as mothers, wives, sisters and daughters, were key motivating factors for political activity.[29] The story of colonial Victoria is expanded beyond the traditional masculine narrative when we give attention to the experiences of domesticity and family and integrate these with broader social and cultural histories.

Several witnesses were called to give their version of the events in 1860 leading to Susan Cockerill's death from haemorrhage, soon after delivery of her eleventh baby in the goldmining township of Creswick. Mrs Cockerill went into sudden and intense labour at 1.00 am and sent her husband to collect the untrained nurse she had earlier engaged. The nurse, Luisa Buckley was a married woman with seven children of her own and expected to be paid for her services. Buckley lived 'about a half mile' from the Cockerill home and came immediately. In the meantime, Mrs Cockerill had also sent her teenage daughter to a neighbour's tent for immediate assistance. [30]



Inquest into the death of Mrs Robert Cockrill, PROV, VPRS 24/P0 Inquest Deposition Files, Unit 90, Item 1860/55 Female.

The neighbour was Ann Whalley, who declared in her statement that she 'knew little about it' (childbirth), although she knew enough to recognise that there was 'no more bleeding than was usual'. The baby arrived before any of these people had returned to the family tent, and Susan Cockerill asked her friend Ann, to 'move the baby, that she might be more comfortable ... The cord was twice round the child's neck. I put it right, and just then Mrs Buckley arrived and took charge of her care.'[31] Luisa Buckley 'took the child to dress it and put it by, then spoke to the deceased and asked her how she was. [Mrs Cockerill] said she was rather weak and had felt so since her confinement.' Together, the women attempted to give her some warm tea, but she refused it. Her husband had better luck, feeding her 'a little gin and water', followed by some tea. The nurse finished dressing the infant before attending to Mrs Cockerill, when she discovered that the afterbirth would not 'come away'.[32] The witness statements of both women tell us that they waited for at least a couple of hours before the nurse decided that too much time had passed, and a doctor was fetched by Robert Cockerill. After his examination, Doctor Hasten applied a napkin which he asked the nurse to check frequently for 'flooding'. Susan Cockerill's hands and feet were very cold. She asked her husband to keep rubbing her cold legs, and Mrs Buckley applied 'hot water cloths' to her feet. Attempts to assist the placenta to come away from the uterus included holding the woman over a pot of hot water, which took the efforts of all three attendants and remained unsuccessful. The use of instruments was not suggested. The doctor advised Mrs Buckley to administer a teaspoon of brandy every ten minutes. Although her pain was described as 'excessive' and caused her to keep passing out, there was no other pain relief on hand. The doctor left after forty-five minutes to 'get medicine', but we are not told what this medicine may have been and Mrs Cockerill had died before he returned.[33] The medicine the doctor sought was possibly some form of pain relief, such as opium, as he had already advised Luisa Buckley that her patient would not survive.

Robert Cockerill's statement tells us that his wife 'always had easy labours and never had a doctor'. [34] We do not learn very much about their living arrangements, except that there were at least two rooms in the tent, most likely separated by a canvas sheet, and presumably more, as this was a large family. There is no mention of any children other than the teenage daughter, but as the labour came on so quickly, and had been straightforward in the past, it is possible that some of the other Cockerill children were present in the tent, and witnessed their mother's pain.

Robert Cockerill spoke of sitting on a box by his wife, which indicates rudimentary furnishings, and moving away to wait in the 'other room', from where he could hear disaster unfolding. His statement conveys the helplessness he felt witnessing his wife's pain and not knowing how it could be best alleviated, and ultimately his grief when he realised his wife had died.[35]

Overall, alcohol played a prominent role in pain management across each of the births investigated. In some coronial inquiries, including Mrs Cockrill's, witnesses were asked about the alcohol consumption of the female attendants, although in none of the investigations was the doctor's sobriety questioned. This is reflective of the dominant attitude of both the medical profession and the press towards untrained midwives, and their frequent characterisation as ignorant, drunken women.[36]

Martha Lithgow of Yering suffered a similar fate in 1864. Her attendant, Mrs Gordon, described herself as having 'been accustomed to attending women in their labours' but added that 'I attended her as a neighbour' and had not asked for payment. Strahan's research of birth attendants in rural New South Wales at this time found that about half the women in her sample were attended to by female neighbours or family members, in an unpaid and often reciprocal arrangement.[37] Mrs Gordon had tried to bring away the afterbirth 'but I did not use much force'. she said. For her state of weakness, Mrs Lithgow was fed a thin gruel, and 'a few spoonfuls of sherry for the pain'.[38] Grehan's research tells us that the 'worst examples of midwifery practice have been preserved for posterity', including the crushing of infant heads and breaking of bones, the pressing of body weight on the abdomen to hasten birth, forcible dilation of the cervix and pre-emptive slicing of delicate pelvic tissue. Contemporary newspaper reports indicate that doctors too could be rough in their examinations and when undertaking the manual removal of afterbirth. One self-styled medical man on the goldfields was charged with manslaughter in 1859, after he severed the infant's arm using crude forceps. Included in his bag of instruments were scissors, needles, bodkins and a pair of tooth forceps. For his services, he demanded £5.[39] McCalman's research of obstetric and maternal health at the new Melbourne Lying-in Hospital describes both the female misery and medical advances taking place at this time. However, in the overcrowded shanty towns around Victoria, there was an absence of many medical options and modern equipment, and with a lack of real obstetric knowledge, birth attendants were not well equipped to manage serious birth complications, even when they were fully 'qualified', rendering the woman and her infant hopelessly vulnerable.[40]

In 1856, seventeen-year-old Fanny Treadwell was the young wife of a blacksmith in Muckleford, 'said to have possessed uncommon personal attractions'. Muckleford had in 1852 become a 'rush', and quickly attracted up to four thousand hopeful miners.[41] Contemporary descriptions indicate that at the time of Mrs Treadwell's confinement, the locality was still heavily wooded, with just a small grassed clearing cut through the very dry forest.[42]

Fanny Treadwell's husband and her mother were present when she became ill in the late stage of her first pregnancy. [43] Arrangements had been made for a midwife, but when she could not attend, she recommended another. [44] The midwife attending the birth, Mrs Lawson, declared that she 'had midwifery qualifications from Glasgow' and explained that she had 'left the certificates in Adelaide'. [45] Fanny Treadwell delivered her infant daughter safely, but her condition deteriorated a couple of days afterwards. To combat the shivering, Mrs Treadwell's mother wrapped her up, and gave her a little brandy. Mrs Lawson declared that everything was fine, and bathed her patient's head and breasts in vinegar and cold water 'to allay the inflammation'. [46]

A doctor was eventually fetched by the husband, and diagnosed inflammation of the bowels – a common symptom of dysentery, a disease which swept through Victorian goldmining communities in the 1850s and 60s.[47] Dr WF Preshaw described himself as a 'duly qualified medical practitioner, residing at Castlemaine', about seven kilometres from Muckleford, a distance which may have taken at least an hour by buggy, over poor roads.[48]

Diseases were rife around the central Victorian goldfields. This was in part because medical knowledge was thin on the ground, and many unqualified men treated local families with various brews and concoctions. Often these were simply unhelpful, others were quite poisonous. Drinking water was shared for all purposes and often contained human effluent. [49] Without clean water for drinking and washing, childbirth became a much more dangerous event, and many women and new infants died quickly in this region. When young Mrs Treadwell died six days after giving birth, the coroner's finding was that 'natural causes' were to blame. Her infant daughter died two months later, as was often the way. [50]

Thirty-three-year-old Angelina Delmenico gave birth to her sixth child in Guildford, near Castlemaine, in 1877. Her husband, Giovanni was away at the land selections and so her sister-in-law (with whom she had journeyed from Switzerland ten years earlier) slept with her for four weeks before she went into labour. It assisted her in the night time, looking after the children, so as not to disturb her rest. When Mrs Delmenico's labour pains began she had said It am all wet and you had better go for Mrs McHeeny', and her sister-in-law 'got this lady to stay with her, then went for the nurse lender – she came in less than half an hour'.[51] Mrs McHeeny declared in her statement that she had only been present at a couple of other births before, when she was 'called upon suddenly'. It became clear that the infant was presenting as breech as 'one hand was protruding from the womb', so Mrs McHeeny sent for Mrs Goss, a more experienced woman who had attended four of Mrs Delmenico's previous confinements.[52]

Guildford at this time was much less populated than during the goldrush of the 1850s and 60s.[53] Clearly, however, there were several people who Mrs Delmenino could have chosen as a birth attendant. It appears that she may have opted for the less experienced, less costly attendant for her sixth confinement, with the added support of her sister-in-law, mistakenly expecting it to be straightforward. Several hours after being summoned, a doctor arrived. He found the poor mother to be 'almost pulseless' and provided her with stimulants (most commonly opium or cocaine), while he manually removed her stillborn son.[54] Maternal death was determined to be due to 'exhaustion', in the event of delayed medical assistance.

The above accounts are drawn from inquest reports which reveal an abundance of details relating to the birth experience of five pioneer women, their families and their communities. The witness statements of each inquest capture the voices of ordinary colonial Victorians and their actions under difficult and emotional circumstances. The statements also reveal the living conditions in these places, the resources available to women in birth, and the kinds of actions that were taken in a health emergency. These are personal manifestations of the broader historical narrative and as such, details gleaned from these statements contribute to the research of social relationships and arrangements within communities in nineteenth-century Victoria. They provide a window through which to glimpse a crucial aspect of colonial family life and the impetus for social change, particularly in the provision and regulation of rural community health services.

Annie's Story: Birth and death registrations, local and family history sources

Inquests were held only in the event of some maternal deaths, but other public records and sources help provide a scaffolding within which we can construct the more general experiences of childbirth and early motherhood of Victorian pioneer women.

Annie Dixon had four healthy infants in Hobart and Port Albert before she and her husband Charlie developed gold fever and moved to Castlemaine around 1853. Once there, they erected a tent home alongside thousands of others at the Little Bendigo diggings.[55] By 1854, two of their children had died from dysentery, including their nine-year-old son.[56] When Mrs Dixon went into labour in August 1856, their canvas tent would not have been easy to keep warm, with the temperature as low as 3 degrees Celsius.[57] While some established residents of the Castlemaine diggings had erected bark huts, birth and death registrations tell us that the Dixon family had moved about the diggings, and so they are more likely to have had a tent, which was essentially sheets of canvas thrown over a simple frame of timber which were then pegged to the ground. The floor was dirt, and often a mudbrick fireplace with chimney was added for cooking and warmth. Depending on the floor space, a sleeping roll or a grass-stuffed mattress on the ground served as a bed.[58]

Like Fanny Treadwell, Mrs Dixon was fortunate to have her mother Frances on hand to offer physical and emotional support. Experienced birth attendants were costly; demand was high in these overcrowded locations, and this pushed the price out of the reach of many struggling families.[59] Annie Dixon safely delivered her daughter, with perhaps willow-bark infusion or laudanum (an opiate which was widely available, and often dangerous) to assist with the pain.[60] Sadly, sickness and disease regularly swept through tent communities like this, and both Annie and her baby girl died in the months ahead, of dysentery and intestinal inflammation.[61]

Childbirth attendance was often not limited to the labour itself. 'Monthly nurses', as some midwives advertised themselves, were sometimes trained at the Melbourne Lying-in Hospital, and performed a variety of other supportive tasks including 'cooking, feeding, washing, assisting with ablutions and sometimes sewing clothes for the infant'. [62] The population of rural Victoria was young and overwhelmingly migrant. Many women did not have older family members available to assist in their confinements as they would have had in their country of origin, and experienced birth assistants were

in high demand as the population surged.[63] However, experienced midwives charged for their skills, and the level of care which they provided was almost always reflected in the fee that was charged.

Of course, childbirth did not usually end in tragedy – it is partly its ordinariness which lends the confinement experience a cloak of invisibility. Constructing narratives of less dramatic birth experiences is achieved by consulting and combining a set of primary, family and localised sources, and applying these to create a picture of the childbirth experience – the environment, resources and access to medical support. The following case study is illustrative of this approach.



ST Gill, Zealous Gold Diggers, Castlemaine, 1852. State Library of Victoria, Picture Collection, H141536.

Ann's Story: Civil registrations, passenger records, family history sources and newspaper reports

Despite the dire nature of some challenges faced by pioneer women in Victoria, there were many women whose experience of maternity was improved as a consequence of emigrating. Young immigrant couples were often seeking an escape from a difficult life, which sometimes included the grief of a lost child or unsuccessful pregnancies. Settlement years for these families may in fact have been more stable, perhaps because of improved maternal health or, in some regions, less contact with disease than was experienced in overcrowded industrial cities in their countries of origin.

Ann Battersby and her husband David travelled to Victoria from the British industrial hub of Manchester. The couple sailed on the Southern Ocean with their eight-year-old daughter, Elizabeth, and left behind years of sadness,

having lost both their young sons as infants. [64] In their home county of Lancashire, and particularly in the highly urbanised, industrialised towns, rates of infant mortality were the highest in the country for much of the nineteenth century. By the 1870s, health activists, politicians and academics agreed that infant mortality was directly related to increased levels of industrial work for young married women, and to overcrowded living conditions in towns such as Liverpool, Manchester and nearby Sheffield. [65] For Ann, who worked in a woollen factory with very little money to spare, living and workplace conditions would have had a direct impact on her experience of pregnancy, labour and early motherhood. [66] Like many other women, she chose to leave all this behind and try her luck in a new colony.

Like Sarah Davenport's diary, the Battersby's shipboard journal records the sad deaths of young children.[67] After 140 days at sea, circumstances quickly improved for the Battersbys once in Victoria. They initially settled in the goldfields stopover township of Kyneton in central Victoria, where they became farmers, adopting a life far removed from the factories of Lancashire. Ann gave birth in 1864 to a healthy daughter, Mary Jane and thereafter produced six more children in fairly quick succession. Each of these children survived childhood, and the family prospered as pioneer farmers in central Victoria.[68] Their immigration story is overwhelmingly positive. As she did not write them down, we cannot know Ann's experiences of childbirth but there are clues to follow, within birth and death registrations, immigration records, family history sources and newspaper reports.

The registration of births in Victoria was compulsory from 1853 onwards and required the inclusion of the names of those who witnessed the birth and their role. Strachan explains that any number of people could be present during the course of a woman's confinement, including 'Female midwives, male midwives, nurses, druggists, dentists, herbalists and surgeons.' She describes it as a pluralist arena, although in very remote areas a woman may labour alone, or in the presence of her husband, or sometimes with the assistance of a local Aboriginal woman.[69]

Ann Battersby's first two Australian births took place in Kyneton. The 1864 birth registration details tell us that she was attended by a nurse, Mrs Pennington, with no doctor or other witness listed.[70] Mrs Pennington also nursed at the local Kyneton bush hospital.[71] In September 1863, she was charged with 'injuring the child of William O'Brien, in her professional capacity'. Pennington was found by the

judge to have no case to answer, but the reported details of Mrs O'Brien's confinement provide us with insight into the midwife's practice, her approach to supporting women such as Ann in their labours and afterwards. A newspaper article of the court proceedings reports that Mrs Pennington had charged the O'Briens £1 for her attendance in 1863. Mr O'Brien had declared in court that 'I did not cry poor - I would have paid two if she had asked', which perhaps indicates that Pennington had charged him less than expected. At her death, Sarah Ann Pennington was remembered as generous, offering people loans without documentation.[72] She may not have required payment for all her services, and perhaps asked only what she felt a family could reasonably afford, without loss of pride, although this is speculation. This midwife also originated from a heavily industrialised town in the Lancashire region, and in the absence of kith and kin, an experienced woman with the same regional birthing traditions and a familiar accent may have been some comfort. Pennington attended Ann Battersby's next confinement also, in 1866.[73]

Like the O'Briens, Ann and David Battersby had 'pegged out' a piece of farmland near Kyneton.[74] The mud slab hut described in court was typical around the township, a form of shelter that could be quickly erected.[75] David was a factory worker rather than a labourer, so their hut, built upon arrival only months before Ann's confinement, may have been of the more austere variety, with a dirt floor and minimally insulated. Unlike her neighbour, Mrs O'Brien, who had the midwife, her sister and a neighbour in attendance, with her husband fetching spirits and clergy, Ann Battersby is recorded having had just the midwife with her through the birth.[76] The family were new to the township and perhaps had no firm acquaintances in the community, but we see from her later confinements that only one attendant was listed, so it could well have been her preference.[77] It is also possible that her young daughter assisted the midwife. With an established hospital nearby there were local doctors available, but these most certainly charged more than Mrs Pennington, and Ann had given birth safely three times before.

The court witness statements in the case of O'Brien v. Pennington indicate that it was the midwife's practice to arrive a day or so prior to a labour, or in the very early stages. With her nine-year-old daughter at hand, the Battersbys may not have required practical help with child care and housework, which were often part of the extended services midwives provided in rural areas.[78] The pain relief used by Mrs Pennington was likely to be brandy and cool water, which is what she administered for

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Birth registration of Mary Jane Battersby, born 8 July 1864, showing attendants at the birth, Victorian Birth Register, registration no. 1864/16028.

the O'Brien labour. Good quality water was in abundance around Kyneton, to the great advantage of those pioneer women. Local newspapers of that time reported an unusually dry spell of weather that July – it was midwinter and with clear skies, temperatures regularly dropped to somewhere around zero degrees or below overnight. [79] Slab huts in this area, with wattle and daub bedroom, were heated with an open fire, which the midwife would ensure was maintained during labour and afterwards, in order to keep mother and baby at a safe temperature. [80] Grehan reminds us that keeping track of

time during the stages of birth was made less reliable by the lack of accurate clocks, and often the inability of the working-class poor to read the time. In addition, she points to the quality of light by candle as being detrimental to the work of the midwife in complicated labours.[81] Of course, this only became important when events or actions of those in attendance were under scrutiny. While some buildings in Kyneton at this time did benefit from early gas lighting, in the hut, tallow lamp or candlelight provided low levels of lighting, and the slab hut may not have had a clock to track the passage of time.[82] Traditionally. childbirth in England was conducted in low light, to assist in soothing the mother and maintaining a low blood pressure, so in fact it is probable that many midwives such as Sarah Ann Pennington were accustomed to managing the birth in these conditions.[83] An experienced midwife, even if unqualified, would have a sound sense of appropriate timing and progress in birth, regardless of her education.

For many men in colonial Victoria, the hard work of establishing farmland meant that they were absent from the home for all but their sleeping hours. In addition, childbirth was the domain of women, and David Battersby is not recorded as being present on any of his children's birth registrations. Witness statements from inquest files, such as that of Susan Cockerill, indicate that in the event of complications, or if the labour was not progressing. the midwife would most likely have sent Elizabeth for her father to fetch a doctor.[84] Ann Battersby's newborn, however, was safely delivered. While she recovered in the immediate aftermath, and waited for her placenta to come away, Sarah Ann Pennington may have called Elizabeth to fetch some water, and wrapped the infant in muslin. As the only other attendant, Elizabeth may have held the baby while the midwife dealt with the third stage of labour and checked that Ann was comfortable and well. The water would be warmed over the fire until it was the correct temperature for the infant to be immersed. Mrs Pennington would wash baby and dress her in the cotton shift which Ann had prepared, perhaps having hand-sewn it herself, or brought it on their journey. Should Ann have suffered tears during delivery, it was common practice for the midwife to apply clean strips of cloth, boiled in water or scorched.[85]

Again, the O'Brien court hearing provides clues as to the routine the midwife would have followed in the days after Ann Battersby's confinement. Pennington's practice was to visit regularly, to ensure that the breastfeeding was established and that mother and baby continued to thrive in the dangerous period immediately after birth. In the

case of the O'Briens, Pennington had made several home visits. [86] These follow-up visits were included in the initial charge negotiated between midwife and client. In the months after their daughter's birth, we can imagine that Ann and David were most concerned about their infant's welfare having already lost two infant sons to disease. Fresh water, living space and good nursing care with potential access to medical support nearby, along with local food produce, undoubtedly contributed to the health of their Australian-born infants.

Facts gleaned from later family birth registrations and local newspapers begin to construct a narrative of changing social attitudes to pregnancy, birth and maternity, such as increased accessibility of qualified medical attendance and specialised health products targeted at mothers.

In the land selections of 1869, David Battersby was allocated farming land in Dargalong, 110 kilometres north of Kyneton.[87] The nearest village, Murchison on the Goulbourn River, was a very new settlement most of its few permanent buildings were erected in the 1870s. Family fortunes improved, but later birth registrations indicate that Ann continued to prefer the attendance of just one woman at each of her subsequent four confinements. In fact, for two of her labours, Ann was attended by a Mrs Ewart - her own newly-married daughter, eighteen-year-old Elizabeth, who now resided on a neighbouring property. Despite this, when Elizabeth herself went into labour four months after her mother, she and her husband elected to have both 'resident surgeon and accoucheur of the district', Dr McMillan, and local midwife Mrs McKay, in charge.[88]

The small township of Murchison was close to Shepparton, and with its 'goodly array of commodious hotels and stores', Ann and Elizabeth both had access to the remedies of the day to ease the discomforts of pregnancy, to provide some pain relief to themselves and care for their infants.[89] By 1875, druggists were advertising Kruise's Fluid Magnesia for the relief of women's heartburn and 'the vomiting, which is so distressing in the early months of pregnancy', syrup of iodised Horse Radish for 'weakness of the constitution' and powders, pills or elixirs of Pepsine, a cure-all for 'Women's and Children's illnesses'. [90] Mothers of this time were subject to public censure and criticism regarding their consumption and behaviour during pregnancy. British newssheets, such as the National Food and Fuel Reformer were largely driven by agendas for single-issue reform and were reprinted in Australian local papers.[91] The Mercury newspaper in 1876 reprinted an

article which was essentially a warning on the 'evil effects of tea-drinking' in pregnancy.

But perhaps the worst use to which tea is applied by women is the practice of drinking copiously of strong tea during pregnancy, with the idea that it will render their milk abundant. A most unfounded, absurd, and disastrous practice. It is alike injurious to the mother and her offspring; and it may originate the hereditary diseases of successive generations – far beyond the third and fourth.[92]

Pregnancy and childbirth began its march out of the private domain and into the public forum from the 1880s. Medical interest and obstetric intervention, and the pressure which was mounting on unqualified midwives, began to gain traction amongst young rural women at this time. [93] The different attitude towards childbirth, between Ann Battersby and her daughter is perhaps reflective of this growing shift of preference, to engage qualified doctors at confinement. We do not have their first-hand accounts, but the details included in birth registrations, when located within the social context provided by local and regional newspapers, create a sense of their engagement with childbirth practices in the later nineteenth century.

Conclusion

Endeavours to reveal the force of women upon the development of Victoria are enhanced by considering the circumstances faced by these young women building family life in the physically demanding conditions of rural settlements. The women examined in this article had each been dealt a different hand and they each encountered a range of challenges in their experiences of childbirth and mothering. For a great many families, childbirth in the bush was ultimately successful, despite the added hardship and difficulties that the unfamiliar and often harsh physical environment presented. For too many women and their families though, the physical demands of pregnancy and childbirth proved insurmountable, and they were failed by their geographic and temporal place in Australian history.

Birth itself is an event which is both universal across generations and cultures, and unique to each woman. We can never know the truth of another woman's maternity; the event of birth is one which is mediated by individual experience, culture and personal meaning. Childbearing in nineteenth-century Australia was a fundamental aspect of family and community life and is worthy of focus when considering the challenges of family life in pioneer

communities. Despite a dearth of first-hand accounts of childbirth from this era, the construction of individual biographical narratives is made possible with information gleaned from government records and contemporaneous sources. This paper has demonstrated the inherent value of coronial inquest files in illuminating social, domestic and medical details surrounding a woman's labour in Victoria during the nineteenth century. Other birthing experiences and practices can be pieced together using the facts from a woman's locality, environment and individual circumstances. Facts and contemporary descriptions of isolation, physical conditions, lack of medical knowledge, the very real threat of death and loss, and the almost complete absence of effective pain relief, help us to appreciate the level of anxiety, danger and discomfort associated with nineteenth-century birth among Victorian woman in bush communities. By examining this evidence, we are able to construct a picture of female pregnancy and childbirth in early rural Victoria and create an informed narrative; an amalgam of personal accounts, facts and a speck of imagination. A hitherto hidden aspect of colonial Victoria is revealed, a reality which appears to have little bearing on the construction of 'big' histories but which connects us to the lives of families who came before us; the challenges they confronted and the choices they made. By appreciating the experiences of everyday Victorians of this era, our understandings of the broader, bigger themes of Australian family and social histories become more meaningful.

Endnotes

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- [2] My usage of the terms 'medical man' or 'medical men' is purposeful, as not all men practicing medical treatment in the colonial era were qualified doctors, and they were often referred to in this way in the primary sources, especially newspaper reports and some anecdotal records. Particularly in remote communities, the qualifications of these men may have been dubious.
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- [4] Wright, Forgotten Rebels, pp. 45-66.
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- [6] Madonna Grehan, 'Heroes or Villains? Midwives, Nurses and Maternity care in Mid-nineteenth Century Australia', *Traffic*, issue 11, January 2009, p. 57.
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- [9] Grehan, 'Heroes or Villains?', p. 57.
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- [12] Madonna Grehan, 'A most difficult and protracted labour case', *Provenance*, issue 8, 2009, available at https://prov.vic.gov.au/explore-collection/provenance-journal/provenance-2009/most-difficult-and-protracted-labour-case, accessed 4 September 2019; Grehan, 'Heroes or Villains?'; Janet McCalman, *Sex and Suffering: Women's Health and a Women's Hospital*, Melbourne University Press, Carlton, 1998, p. 23.
- [13] Grehan, 'A most difficult and protracted labour case'.
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- [15] McCalman, Sex and Suffering, p. 23; Grehan, 'Heroes or Villains?', p. 58.
- [16] Anne Hardy 'Commentary: Bread and alum, syphilis and sunlight: rickets in the nineteenth century', *International Journal of Epidemiology*, vol. 32, no. 3, June 2003, p. 339, available at https://doi.org/10.1093/ije/dyg175, accessed 15 February 2019.
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- [18] Ibid.
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- [20] Lisa Featherstone, 'Birth in Sydney', Sydney Journal, vol. 1, no. 1, March 2008, p. 22, available at https://epress.lib.uts.edu.au/journals/index.php/sydney_journal/article/view/587, accessed 23 October 2017.
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- [22] Ibid.
- [23] Strachan, 'Present at the Birth', p. 18.
- [24] Grehan, 'Heroes or Villains?', p. 55.
- [25] McCalman, Sex and Suffering, p. 22
- [26] Grehan, 'A most difficult and protracted labour case'.
- [27] PROV, VPRS 24/P0 Inquest Deposition Files, Unit 232, File 1869/119, deposition of John Bardon, inquest into the death of Margaret Bardon.
- [28] Ibid.
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- [31] Ibid., deposition of Ann Whalley.
- [32] Ibid., deposition of Luisa Buckley.
- [33] Ibid., deposition of Dr William Hustin.
- [34] Ibid., deposition of Robert Cockrill.
- [35] Ibid.
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- [37] Ibid., p. 13.
- [38] PROV, VPRS 24/P0, Unit 152, Item 1864/321 female, deposition of Mrs Gordon, inquest into the death of Martha Lithgow.
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- [45] PROV, VPRS 24/P0, Unit 37, Item 1856/29, deposition of Mrs Lawson, inquest into the death of Fanny Treadwell.
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Forum articles		

Attitudes to wife beating in colonial Victoria

The case of Elizabeth Scott, husband murderer

'Attitudes to wife beating in colonial Victoria: The case of Elizabeth Scott, husband murderer', *Provenance: The Journal of Public Record Office Victoria*, issue no. 17, 2019. ISSN 1832-2522. Copyright © Emma Beach.

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Abstract

This article questions stereotypical assumptions regarding why a colonial woman did not leave a situation of domestic violence in colonial Australia. By analysing the 1863 case of Elizabeth Scott, the first woman to be hanged for a domestic violence related murder, I explore how an understanding of Battered Woman Syndrome would have been a means of lessening her sentence, had the syndrome been recognised at the time. Elizabeth was a victim of repeated and sustained domestic violence, commonly termed 'wife-beating' in the 1860s. Similar cases were constantly brought before the local courts and gruesome details faithfully reported in colonial newspapers. Husbands in the Colony of Victoria were routinely arrested and punished for beating their wives in the mid 1800s and into the 1900s. However, the judiciary struggled with how to deter and deal with the abusers. Colonial Victorian common law provided that a husband could subject his wife to punishment or chastisement, so long as no permanent injury was done. Surprisingly, judges dealt with this type of marital violence regularly and often sympathised with the battered partner. Men who assaulted their wives were usually 'bound over to keep the peace' by a short period of incarceration or a small fine with the abuser returning home, often to repeat the beatings. Mysteriously, Elizabeth did not prosecute her husband.

Elizabeth Scott is not famous. However, as the first woman hanged in the Colony of Victoria in 1863, you would expect her tragic tale of domestic abuse to be better known.

Elizabeth was a victim of repeated and sustained domestic violence; in the 1860s this type of assault was called wife-beating. To escape her abusive husband Robert, Elizabeth allegedly coerced two lodgers, David Gedge and Julian Cross, into killing him. The murder took place about midnight on 11 April 1863. Charged as an accessory after the fact, Elizabeth was nevertheless, in the eyes of the colonial judiciary, a murderer.[1]

If the Crown prosecution were to try Elizabeth today, she could have presented evidence of having suffered from Battered Woman Syndrome (BWS) as grounds for self-defence in the murder of her husband. Even in 1863, this line of defence would likely have mitigated her sentence given the experience of other abused women. But, unfortunately, Elizabeth's defence barrister,

George Milner-Stephen, made no attempt to introduce her history of abuse as a defence to mitigate her sentence. The presiding judge, Chief Justice William Stawell, therefore, had no other option but to follow the law, and sentenced her 'to be hanged by the neck until dead.'[2] The Executive Council declined to commute her sentence and the new Governor of the Colony, Sir Charles Darling, did not offer Elizabeth a reprieve. Thus Elizabeth Scott became, on 11 November 1863, the first woman executed in the Colony of Victoria.

Attitudes to marriage

At the age of twelve, Elizabeth had been sent to the remote northwest of the colony as an indentured servant on Goomalibee station, which was located near Benalla in Victoria. She was there less than a year before her contract was bought out by Robert Scott, supposedly for the price of six bullocks. Scott, more than 20 years Elizabeth's senior, then married her, with her mother's blessing.

Elizabeth was a child bride, married at 13 to a man three times her age. Even in the context of the colonial era, when girls married young, age 13 was very young to be a bride. However, marriage was a desirable state. It was a woman's entrée to society, the supreme personal and social act of her destiny. For Elizabeth, marriage was a Victorian girl's pathway to respectability and founding a household of her own:

Marriage was the only acceptable outlet for sexual relations, ensured women's social, legal and economic dependence ... and maintained the moral fabric of society ... Women's respectability came through the performance of the role of wife, mother and helpmeet, and marriage was intended to ensure, establish and maintain status.[3]

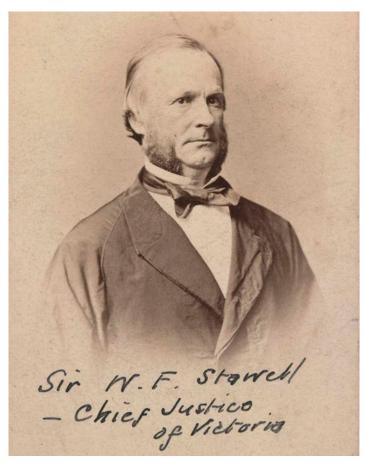
Elizabeth gained respectability, perhaps, but as a married woman, she was – like her peers – little more than her husband's personal possession. Women could not sue or take out contracts in their own name and had no rights over property or the custody of their children. It was only in the last century that women have gained the rights to buy, sell and own property, run their own businesses and gain access rights to their own children.

The young mother of two little boys, Elizabeth was dominated by the much older Robert, who in time became an alcoholic and a serial abuser of his child bride. She would later confess 'she would never have married him except for her mother.'[4] Before colonial newspapers revealed these intimate details, however, the couple ran a successful, if illegal, sly-grog shanty at the crossroads to the Mansfield and Jamieson townships in Victoria's high country. Fuelled by unlimited access to the shanty's stock of alcohol, Robert would become seriously drunk and brutally beat his wife. Around midnight on 11 April 1863, he paid the ultimate price for his escalating violence when a single shotgun blast shattered his skull, killing him instantly.

Judicial records

The murder initially puzzled police, as there was no clear motive for the killing. Local gossip led police to suggestions of a liaison between Elizabeth and the lodger David Gedge. Elizabeth's response to the allegation insinuating her husband was a 'jealous drunk' [5] was probably unhelpful to her situation; to police, it sounded like she was admitting Robert had something to be jealous about. Police believed they now had their motive for murder. [6]

Victorian judicial records document her tragic story of domestic abuse, but it was the Crown prosecution's focus



Batchelder & O'Neill, photographers, *Sir William Stawell – Chief Justice of Victoria*, 1864. State Library Victoria, Pictures Collection, H6061.

on the supposed illicit affair – not the wife-beating – that framed the prosecution's narrative of the case. The Crown prosecutor convinced the all-male jury that the husband's murder had cleared the way for Elizabeth's affair with David Gedge.

She was labelled an adulteress and depicted as a 'female monster' who had lured Gedge and her cook Cross to kill her husband with pretty promises.[7] Although there was no evidence that she had fired the fatal shot, Elizabeth was characterised by the prosecution as the cold-hearted instigator of the killing in a case that tantalised the Victorian public with its story of adultery and murder.

During her trial, Elizabeth's legal team was inept in failing to offer an alternate explanation for her alleged complicity in the murder. The only defence her barrister offered was 'that she didn't look like a murderer'.[8] The public record tells us that Elizabeth hid her shame behind what appeared to the authorities to be a cool exterior. When questioned by the police and the magistrates, she played down the battering and the threats to her life (this is no

different from today where less than 20 per cent of women who have experienced violence report it to authorities). [9] When confronted with similar situations, victims often deny violence or psychological abuse has occurred.[10] Elizabeth was not dissimilar; in fact, she sought to protect her abuser. In her statement to the police, Elizabeth said, 'My husband ... used to blow me up now and then.'[11] In colonial Victoria, 'to blow one up' meant to beat them. Robert even 'threatened to take her life'.[12] Elizabeth covered up her humiliation with a brave offhand remark: 'but I never took any notice of it'.[13] Like most victims, Elizabeth modified her statements and made excuses for her husband's violence – 'he always did it' and 'he never meant it, but he was always sorry for it'.[14] But perhaps tellingly, 'There was always a pistol lying on the shelf within his reach.'[15]

Why did Elizabeth seem to not view her husband's threats as a serious risk to her life? The answer is easy to grasp. She had nowhere to go, and no-one she could ask for help. When Robert attacked Elizabeth with insults, taunts or accusations, there were no neighbours to corroborate her stories other than Gedge and Cross. For their part, they heard, saw and said nothing. Only later they admitted to hearing heavy falls and dull thuds, and the later declarations of affection from her husband. It is also possible they considered Robert's apologies a satisfactory conclusion to the beatings. The indifference they initially showed was unremarkable for the times in which they lived.

Public perception, moral values and the law

Of course, in the Victorian era, marriage was sacrosanct, and no-one would interfere in the hierarchical relationship of husband and wife. Also, Victorian society conditioned colonial wives not to expose their shame to strangers. However, the press did report the prevalence of wifebeating in society, usually 'with a distinct mix of moral approbation and lurid detail'[16] about both perpetrators and victims.

As the head of the household, Robert's status entitled him to moderate 'correction' of his wife. His violent blows were not entirely illegal. Too often his state of intoxication was the excuse for his actions. Colonial Victorian common law provided that a husband could subject his wife to punishment or chastisement, so long as he inflicted no permanent injury.

In a reflection of the moral values of society, if wives did seek help, judges took a dismal view of abuse and the abuser. Most courts sought to protect women within the confines of the law, but 1860s legislation did not provide judges with effective remedies for wife-beating.

The only recourse judges had were to prescribed fines and incarceration as deterrents, 'binding the offender over to keep the peace'.[17] The authorised penalty for common assault was a fine not exceeding £5 and in default, imprisonment not exceeding two months.[18] For example, Malcolm Littlejohn appearing in court in December 1858 seemed.

... very sorry for what he had done, and stated that he would sign the pledge and never abuse his wife in future. The bench accepted his promise, and ordered him to find two sureties in £25 each to keep the peace towards his wife for the next six months.[19]

It is likely that Elizabeth did not ever charge her husband with wife-beating because she had seen first-hand the agony her sister went through prosecuting her alcoholic husband in the Melbourne courts. After completion of his sentence, the protagonist simply returned home to his wife and children – chastised or resentful but unchanged in his behaviour. In reality, the colonial courts were powerless to stop the cycle, and her sister's only option therefore was to leave with a new man.

Like today we know that most wife-battering is hidden from view. On average, women are assaulted 35 times before their first police contact. [20] Perhaps the answer to why Elizabeth did not charge her husband is much simpler: she may have thought that no-one from the local police camps – who were Robert's shanty customers – would believe her.

Certainly, wife-beating was an assault but it was typically treated as a 'one-off altercation rather than an ongoing pattern of violence'.[21] Colonial courts identified spousal violence as a specific type of abuse but had no specific legislation to deal with it. Magistrates conceded that justice to the husband spelled injustice to the wife and children. So even when the abuser was brought before the court, the wife often changed her mind when faced with the personal cost of a husband's conviction, frequently stating, 'I do not want to prosecute'.[22] Wives worried about the impact upon themselves of the court's judgement: 'if my husband is sent to gaol I have no means of support but by my own labour'.[23] If she sought redress, or if the courts forced redress upon her, she must endure further suffering deprived of the breadwinner, and in seeing her children deprived. Like many women, Elizabeth suffered in silence.



'Fearful quarrels, and brutal violence, are the natural consequences of the frequent use of the bottle', George Cruikshank, Plate VI, The Drunkard's Children: A sequel to The Bottle, In eight plates, 1914. British Library, General Reference Collection HS.74/1107.(1.).

Battered Woman Syndrome (BWS)

Legislation in the twenty-first century better recognises the pattern of violence which Elizabeth endured – and her subsequent psychological state – as Battered Woman Syndrome (BWS). Since 1991, women victims of abuse in Australia can invoke BWS as evidence supporting self-defence against their abuser. Psychologist Lenore Walker developed the theory to describe the behaviour and state of mind of a woman who kills her violent partner.[24] Usually, this line of self-defence must prove that the accused's life or physical well-being was threatened and they responded with like force. The introduction of evidence of BWS as a defence strategy

has assisted the courts in understanding why females resort to using stealth or delayed tactics instead of combating the abuser directly. For many women like Elizabeth, she has had no means of physically defusing any threat against her life.[26]

For example, years of living with a violent person conditions the woman to an acute perception of danger and the need for self-protective responses such that she may perceive danger where others might not. Further, her only opportunity to defend herself violently may come when her partner is sleeping or passed out, or when she has access to a weapon like a knife or gun.[27]

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Had Elizabeth been tried today, she may have employed this defence by producing evidence that she suffered from Battered Woman Syndrome. BWS explains why, in her demoralised situation, the female's reprehensible actions seemed reasonable to her at *the time*. In 1863, this kind of defence would not have saved Elizabeth from a murder conviction but could have saved her from the sentence of execution.

In colonial newspaper reports, only a few enlightened judges were recorded to have taken into account the woman's history of being abused as a defence argument in partner-murder cases.[28] Their judgements are reflected in mandatory death sentences being commuted to life imprisonment and hard labour. In one such case, just three years before Elizabeth's trial, Mrs Ann Hayes had been convicted of the murder of her husband. Chief Justice William Stawell observed that her crime was 'the most disgraceful of its class – the murder of a husband by a wife.'[29] As in Elizabeth's case, the prosecution had sought to explain the unwomanly behaviour of the defendant in killing her husband by alleging adultery, but due to Mrs Hayes's battered history, the trial judge took the abuse into account and her sentence was mitigated. More often, women who had been abused and killed their husbands did not generally receive mitigated sentences, but had to rely on petitions to the Governor pleading their case for a commuted sentence.

Adultery and the law of coverture

The reliance on illicit affairs as a motive surfaced continually in colonial cases where abused women conspired to kill their spouses. In Elizabeth's case, the Crown prosecutor made much of the defendant's involvement with a man outside the marriage. And, like the general public, he presumed the motive for the killing was sexual in origin. Other colonial women condemned in this fashion included Annie O'Brien, who was convicted of poisoning her de-facto husband so she could run off with another man,[30] and Selina Sangal, who was sentenced to hang for conspiring with a lover to kill her husband although she ultimately avoided the noose.[31] The prosecution had painted these women simply as adulteresses, not taking into account their histories as abused wives. As in Elizabeth's case, the prosecution argued that the removal of the husbands had cleared the path for illicit affairs to flourish. This was an easy case to make, especially as no other motive or history of abuse was presented to the Victorian all-male juries. Certainly no-one took the trouble to educate juries about the traumatic psychological state the defendant was in at the time of the murder. Jurors of today are educated

in the nature of BWS to help them understand the violent lead-up of events and the victim's psychological state at the time of the partner-murder.

In colonial times, not unlike today, the murder of a man by a woman was rare. [32] This was typically seen by all-male juries as against the natural order, and they commonly considered it 'an extreme affront to the patriarchy'.[33] In Elizabeth's case, there was a further impediment to a just course: a colonial doctrine prohibited the accused from giving evidence under oath in their defence if they had a barrister. Even if Elizabeth's barrister had her take the stand, he would have been prohibited by the law of coverture.[34] This meant that Elizabeth did not have the opportunity to defend herself in person because the status of femme covert or married woman applied to her. Under the law. Elizabeth had become her husband's property upon her marriage, and consequently she did not have a separate legal status. Hence, the law considered her actions petit treason against her husband; as a wife. she was both protected and harmed by her married status.

Elizabeth's silence, whether enforced or not through her status as femme covert, made it easy for the prosecution to insinuate the idea of her as the scheming older woman, beguiling her alleged younger lover, David Gedge, and co-defendant, Julian Cross, to murder her husband. Her barrister did not present any evidence supporting Elizabeth's history of abuse as a reason for killing her husband. Had he done so, it may have enlightened the jury as to why Elizabeth may have believed this was her only option to escape his blows.

Three stages of Battered Woman Syndrome

According to the notion of Battered Woman Syndrome, violent relationships go through three stages: a period of mounting tension, an acute battering incident, and a period of loving contrition.[35] Some professional researchers in the field argue that not all women experience the repetitive three stages in the cycle of violence, and not all cases of domestic violence fit neatly within these three stages. There is also no clear demarcation of when stage one becomes stage two. The psychologist Lenore Walker surmised 'that each stage will repeat over time with the violence increasing in severity.'[36] In Elizabeth's case, the battering had turned into deadly threats, 'During his late illness, he has threatened to take my life ...'[37]

Stage one: a period of mounting tension

Every domestic violence event is unique. Research shows that domestic violence occurs when a perpetrator exercises power and control over another individual.[38] From the evidence available, Elizabeth had lived with Robert's controlling psychological and physical abuse for years. Arguably, no police statements could have exposed the invisible, intangible constant fear Elizabeth experienced. Elizabeth came to disclose 'that she was afraid to leave the place without him.'[39] She honestly believed he would come after her. What we now know is that when women say they are too terrified to leave the marriage, they 'may be very accurately assessing their own risk.'[40] A recent study has supported Elizabeth's intuition, finding that 'such men are known for their relentless pursuit of their victims and that they are resistant to court control'.[41]

Stage two: an acute battering incident

Several witness statements provide evidence of wifebeating being present in Elizabeth's case, when she said her jealous drunk of a husband often 'assaulted her ... He was always drunk when he threatened to take my life.'[42] During that fateful evening, her alleged lover David Gedge was heard by Julian Cross to exclaim that 'Bob is scolding the missus [again]!'[43] As Lenore Walker's research highlights, violent episodes increase with each incident.

Stage three: a period of loving contrition

Robert apologised for his threats and violent behaviour, and 'when he was sober, he was always sorry for it',[44] and he became a loving and apologetic husband after his abusive periods. This was the fairytale romance stage Elizabeth had craved, defined as the honeymoon stage in BWS. Elizabeth desperately wanted to believe him, but the apologies did not last long. Robert's loving behaviour soon deteriorated when he returned to the bottle, and the wretched cycle of wife-beating began again.

Learned helplessness

Elizabeth had no way of knowing when Robert's violent abuse would return and when it would escalate. 'This exacerbates her state of terror' and reinforces her 'learned helplessness'. [45] Learned helplessness is the term applied to individuals who have endured situations of chronic terror; as a consequence of which they lose their ability to make good life choices. For some, domestic violence psychologically prevents a victim leaving the abusive relationship; suffering at the hands of a wifebeater is no different. In fact, this 'learned helplessness' goes part way to explain Elizabeth's reluctance to leave the relationship due to the effects of continual abuse.

The landmark case of *R v Raby*, 130 years later, is instructive in circumstances where a wife – a victim of BWS – stood trial for murdering her abuser, and the syndrome was drawn upon in evidence for her defence. Like Elizabeth, she had suffered degrading abuse over a number of years. In *R v Raby*, an expert was called to give evidence before the jury as to how this degradation might have led the wife to arrange her husband's murder. The jury found the wife not guilty of murder, but guilty of manslaughter on the grounds of provocation. It is worth recalling that being systematically threatened and 'blown up' were Elizabeth's grounds for provocation.

In the 1860s alienists (as early psychiatrists were called) were not called upon to give evidence on Elizabeth's psychological state. Even if able to be called upon, these professionals would not have been able to explain to a jury why Elizabeth did not leave her abusive relationship. It is only now that psychiatrists would be asked to explain to the court how Elizabeth's actions exhibited the signs of BWS and constituted evidence for self-defence by describing what is a reasonable action for someone in an abusive situation.[46] In Elizabeth's mind, it was entirely reasonable that she could not leave. There was no easy way out:

The average member of the public can be forgiven for asking: Why would a woman put up with this kind of treatment? Why should she continue to live with such a man? How could she love a partner whom beat her to the point of requiring hospitalisation? We should expect the woman to pack her bags and go. Where is her self-respect? Why does she not cut loose and make a new life for herself?[47]

Of course, this is a twenty-first century view. For a colonial woman, expectations and options were markedly different than they are today. If she had left, where would she have gone? What would she have done for an income? And what about her children? In reality, the colonial wife may have had no other abode to move to, or by virtue of emigration, no family or close friends for support. Women's support groups did not exist. Women's refuges, and financial and emotional assistance outside the narrow circle of family life also did not exist.

A woman's isolation in the bush would have been an additional barrier to leaving. Living in the bush, Elizabeth could not just rent a room in a boarding house. Her reputation was no doubt already sullied as the mistress of a sly-grog shop; to run away would have ruined her socially beyond redemption.

Another option to escape her violent marriage was divorce.[48] By 1863 males in all colonies were allowed to petition for divorce on the grounds of the wife's adultery. Later amendments to the *Marriage Act* allowed women to petition for divorce on the grounds of adultery or cruelty, drunkenness and criminality. This was rare and costly; often in the upper classes, husband and wife lived apart to save the embarrassment of public proceedings. Generally, divorce was viewed as ruinous to both parties and scandalous for the family, and it meant Elizabeth would have had to prove physical abuse like rape or incest. If the courts did grant a divorce, she could not remarry and re-establish a family unit with her own children. Elizabeth would not have been able to keep them with her; they were her husband's property. And even though children were the husband's possession, society would look upon her as having abandoned her children. Furthermore, any income she earnt to support her estranged living arrangements would not have been solely hers, and her husband would have been able take it away from her.

So, a victim of BWS, Elizabeth stayed with her abusive husband. [49] Researchers have identified that a trigger typically breaks the cycle, culminating in the final reckoning between the abuser and the victim. It may be only a small, seemingly negligible incident to an outsider, but to a terrified victim of abuse, it may be the last devastating incident they can handle.

Flight of femininity

Throughout the trial and leading up to her execution, Elizabeth's apparent insouciant demeanour engendered no sympathy. Unfortunately,

some women are ... treated more harshly by the criminal justice system because they fail to live up to stereotypical female roles.[50]

It could be said that 'what was female, was subject to more scrutiny than what was male'. [51] Simply put, Elizabeth's outward demeanour did not conform to expectations of Victorian propriety. She did not cry, nor break down in hysterics, and she was consequently condemned for her 'cool' behaviour by colonial officials and the public. The police reported she 'exhibited ... apparent indifference to the death of her husband and to her own position.' [52] To the press, she did not act like a 'proper woman' [53] mourning her husband, nor fearing for her life during the trial and afterwards. As the *Leader* newspaper reported, Elizabeth 'appeared quite unmoved ... she alone preserved an air of the most perfect unconcern as to what was passing around her.' [54]

Seemingly withdrawn and aloof, Elizabeth outwardly appeared to show a callous disdain for her husband's death. The *Herald* printed that she was no longer a woman, having been 'unsexed by her crimes'.[55] Unsympathetic to her plight and ignorant of her psychological state, Justice Stawell condemned Elizabeth's demeanour as that of a traitor to womanhood.

Sentencing and execution

After Elizabeth's conviction for murder, trial judge Justice Stawell handed down the mandatory sentence of death. In his sentencing remarks, he concluded Elizabeth 'acted contrary to the expectations of her gender and betrayed her "feminine" role.'[56] A woman had never been executed in Victoria until this time; women previously condemned to death had had their sentences commuted to periods of imprisonment. This happened to Mary Silk, for example, who successfully argued self-defence in killing her husband when he threatened to shoot her.[57] Silk's defence counsel had raised her history of abuse and saved her from execution. Elizabeth, therefore, had strong grounds for thinking that through an appeal to the Governor of Victoria, she could escape the hangman's

On 11 November 1863 the closing scene of the tragedy took place. Standing on the gallows platform, Elizabeth realised there was no reprieve forthcoming from the Governor. Neither her gender nor her youth would save her. In the last desperate moments she pleaded with her co-convicted, David Gedge – 'Davey, will you not clear me?' In his silence she had her answer. The hangman pulled the lever; Elizabeth Scott was hanged by the neck until dead.

The problem remains

In the twenty-first century, though the terminology has changed over time from wife-beating to domestic violence, the problem remains the same. Under the *Crimes Act 1958*, Victoria has abolished the common law rule that defensive force must be proportional to the threatened harm that is being defended against – but *only* for domestic violence cases. This means it is now not necessary to prove that the accused is responding to an imminent, immediate threat of violence.

Since 1991, cases presented before the courts have used self-defence, provocation, duress and Battered Woman Syndrome as part of a defence for victims who have been tried for killing their partners.[58] In 2005, the Victorian Parliament introduced a new offence of 'defensive homicide' for those who kill in response to domestic violence.[59] It is the only state where in cases where family violence is alleged, a wide range of evidence is

relevant to the subjective and objective aspects of the self-defence requirements. The legislation also makes it clear that violence includes not only physical and sexual abuse, but also psychological abuse, intimidation, harassment, damage to property, threats, and allowing a child to see, or putting them at risk of seeing, their parent being abused. [60] In accordance with BWS, it specifies that violence can comprise a single act or a pattern of behaviour, which can include, in turn, acts that in isolation might appear trivial to others.

Australia's first Royal Commission into Family Violence handed down 227 recommendations which the Victorian Government has committed to implementing over the next ten years. It focuses on building a future where Victorians will live free from family violence. For Elizabeth Scott, the recommendations came 150 years too late.

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Endnotes

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A Visit to Lizzy and Miss Mac

Memories of the State Savings Bank of Victoria Head Office

'A Visit to Lizzy and Miss Mac: Memories of the State Savings Bank of Victoria Head Office', *Provenance: The Journal of Public Record Office Victoria*, issue no. 17, 2019. ISSN 1832-2522. Copyright © Peter Andrew Barrett.

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Abstract

The head office of the State Savings Bank of Victoria was a Melbourne landmark, situated diagonally opposite the General Post Office (GPO) at the intersection of Bourke and Elizabeth streets. Built in stages between 1912 and 1935, the bank's solid stone façade represented to the community the security of this institution; where the savings of its customers were guaranteed by the bank's owner, the State Government of Victoria. Through a range of financial services that included mortgage lending, a school banking program, and an extensive network of branches found in almost every suburb and town in Victoria, the State Savings Bank of Victoria had a relationship with most Victorians at some stage in their lives.

The Elizabeth Street head office of the State Savings Bank of Victoria, fondly known by staff as 'Lizzy', stood as a silent witness to the day-by-day activity of a city evolving and modernising around it. The demolition of this building in 1975 was a significant loss to the architectural landscape of Melbourne, as well as to the historic and social fabric of the city. The destruction of the building, to redevelop the site with a new headquarters, was a precursor to the eventual demise of the State Savings Bank of Victoria itself, which was sold to the Commonwealth Bank in 1990.

Without a physical presence, the former head office of the State Savings Bank of Victoria is no longer able to speak for the institution it represented, the employees it housed, and the customers it served. In understanding this place, we must now rely upon the memory of people who had contact with it, who over time will, like this building, be gone. In this respect, the vast collection of photographs and architectural plans of this building, held by Public Record Office Victoria, not only prompts the memory of people that knew this place, but provides a valuable narrative to others on the history of this building and its importance in the lives of Victorians.

Our city buildings exude a look and personality of their own. Like people, some are better looking than others; while some emanate more character and charm than others. Some are memorable, and some are best forgotten as soon as they have been encountered. And like people, each has their own story to tell: a story about the institution that they were associated with, the people that they served and accommodated, and the events that they witnessed as the city evolved around them.[1]

The head office of the State Savings Bank of Victoria was built in stages over three decades. No sooner was one part finished, more room was needed and additional levels added; or a length added to its Elizabeth Street frontage, resulting in its facade eventually extending close to the length of a city block.

With such a piecemeal method of construction, one would think this would lead to an architectural monstrosity, a hotchpotch of elements and parts. Cleverly, the architects added each additional part sympathetically, such that when the last piece of stone was finally added in 1935, it was a seamless architectural composition. The bank was a masterpiece of what is known as the Commercial Palazzo style, that was popular with the banking houses of Australia in the first half of the twentieth century.[2]

As a child, a trip to the city was always scheduled by my mother each school holidays. It was during these visits that my interest in the urban environment was nurtured. This coincided with a period of great change in Melbourne, when, during the 1960s and 70s, much of the human-scale Victorian and Edwardian city was making way for sleek new high-rise buildings. One of my earliest memories is of holding my mother's hand as we walked along Collins Street in the late 1960s, to the deafening



Head office banking chamber circa 1912. PROV, VPRS 8935/P1, Unit 10, Item 1698.



State Savings Bank of Victoria Head Office,139 Elizabeth Street, Melbourne. PROV, VPRS 8935/P1 State Bank Victoria Archives – Photographic Collection, Unit 10, Item 1717.

thunder of jack hammers ending another building's life. It was this sense of loss from the ongoing destruction of my environment that would lead me into the field of heritage conservation.

On our visits to the city, my brother and I would be made to wear our smartest clothes, as we seemed to be on display as much as the stock in the shops and department stores that we visited. Looking our best was especially important if we were to visit my father's business in Collins Street; or visiting my Aunty Stella, who worked at the head office of the State Savings Bank of Victoria. It was a time when people dressed up when *going into town*.

Aunty Stella, or 'Miss Mac' as she was known in the bank, worked in the Overseas Department on an upper floor of the building. To visit her, my mother, brother and I would enter the building through an arched entrance in Elizabeth Street, and into its banking chamber where customers made their deposits and withdrawals, and conducted other transactions. By this time in the early 1970s, the chamber had been modernised, removing and concealing much of its early ornate decoration and finishes. So high was the ceiling of the banking chamber, that a mezzanine floor had been added a few years earlier to provide additional floor space. Photographs of the banking chamber from around 1912, which are part of the PROV State Bank Victoria Archives Photographic Collection, show its original cavernous and palace-like appearance, with double-floor ceiling height, and marblefinished pillars. This use of stone was symbolic, a subtle reminder to its customers of the financial soundness of this institution.



State Savings Bank of Victoria Head Office in the 1970s. PROV, VPRS 8935/P1, Unit 3, Item 1486.



State Bank of Victoria Overseas Department in 1974. PROV, VPRS 8935/P1. Unit 3. Item 1558.

At one end of the banking chamber were lifts, and a man operating the lift would take us up to the floor of my aunt's department. In the Overseas Department there was a long counter, where my aunt, a tall figure in her chartreuse-coloured uniform, would appear from a sea of staff seated at rows of desks. On summer days, sun streamed through the large windows of her department, which were open and allowed a gentle breeze through the office. Accompanying this breeze was the noise from the city below, which resonated through the room. This noise, with the activity of all the people in the office and the noise from their typewriters and adding machines, made for chaos of a theatrical quality.

A cafeteria was provided for bank staff on another level of the building, and this we reached by stairs. These stairs were arranged around the lift shafts, with a metal grille providing separation between the two. When using the stairs, a startling effect would occur when a lift-car suddenly swished past the stairwell without warning; no sooner had it appeared, it was gone. Mrs Affleck, the cafeteria 'manageress', kept a watchful eye as an army of bank staff were served lunch. When seated, my brother and I would devour a pie-and-chips washed down with Coca Cola, while Aunty Stella and my mother exchanged gossip.

In addition to the openable windows in the various departments and offices of the bank, staff could also get fresh air at lunchtime on the flat roof of the building. After lunch, Aunty Stella would take us to the roof, where we leaned over a steel railing and viewed the busy intersection of Bourke and Elizabeth streets below. If



'Miss Mac' Stella McDonald of the Overseas Department with a customer. The photograph featured in an article in the bank's staff magazine *Progress* in October 1967. PROV, VPRS 8935/P1, Unit 7, item 5819.

Aunty Stella had timed our rooftop visit well, the clock of the General Post Office (GPO) opposite would strike, temporarily muffling the noise emanating from the streets below. After our rooftop visit, we would bid our aunt farewell, as 'Miss Mac' returned to her office and paperwork, and us to the city below.

Situated in the centre of Melbourne, the head office of the State Savings Bank of Victoria stood witness to sixty years of a city evolving amid historical and social change. The first part of the bank was completed in the years immediately before the commencement of World War I; a war when Australians in large numbers enlisted and served their nation and the Empire. In contrast, sixty years later, it was outside this bank that people questioned our nation's involvement in war, sitting in their thousands on Bourke Street in the Vietnam War Moratoriums of the early 1970s. It was from the windows of the bank that people observed and reflected upon these momentous days of protest.

Rather than being a casualty of war, it was Modernity that eventually led to the demise of the head office of the State Savings Bank of Victoria. The post-war drive to rebuild Melbourne delivered it to its fate in late 1975, at which time it was demolished to make way for a 41-storey tower that was to become the new head office of the bank.[3] This came at the tail end of a development boom, led initially by insurance and oil companies in the 1960s, and followed by banks, which saw the redevelopment of their sites with striking high-rise buildings. By the early



State Bank of Victoria staff cafeteria, 1974. PROV, VPRS 8935/P1, Unit 3, Item 1571.



Staff photographed on the roof of the head office shortly after the outbreak of World War I. The Union Jack in the background demonstrating the patriotic fervour to the British Empire at this time. PROV, VPRS 8935/P1, Unit 1, Item 8.



The roof was a popular place for staff to relax and to get some fresh air. Here, women staff of head office stand on the roof of the bank circa 1940, with the GPO clock visible behind. It is one of many photographs in the State Bank Victoria Archives Photographic Collection taken on the roof of the bank. PROV, VPRS 8935/P1, Unit 9, Item 8555.



Vietnam Moratorium, corner of Elizabeth and Bourke streets, Melbourne, May 1970. The State Savings Bank of Victoria is partially visible at left. Photographer: Bruce Povey. Courtesy Povey Photographs, http://www.poveyphotos.com.



The windows of the bank provided a vantage point for staff and the media to view the Vietnam Moratorium in Bourke Street in May 1970. At left, a man has climbed out on to the ledge on the exterior of the bank for a better view. PROV, VPRS 8935/P1, Unit 7, Item 6310.



Head office staff in the Premises Department at work in 1913. Staffed solely by men, this department featured a spacious and tranquil environment. PROV, VPRS 8935/P1, Unit 3, Item 1439.

1970s, new premises had been built, or were underway, for the ANZ, Commonwealth Bank and Bank of New South Wales (now known as Westpac).

The purpose of redevelopment of the bank's site was to maximise the returns from the land it occupied, which was one of the best commercial sites in Melbourne. By annexing neighbouring sites in both Elizabeth and Bourke streets a larger site was formed, and a complex was built that contained the bank headquarters, and also lettable commercial and retail spaces. The rental returns from the new tower and the retail spaces subsidised the cost of the bank's new headquarters, which was to be known as the State Bank Centre.[4]

The PROV State Bank Victoria Archives Photographic Collection includes photographs showing staff moving from the old bank.[5] The photographs capture the huge scale of the task of vacating the building; shifting files, furniture and office equipment to temporary premises leased during the redevelopment of the site. The photographs are tinged with a mixture of feelings: sadness at the demise of the old place; and humour and camaraderie as staff assist with moving files, office machinery and furniture. Added to this was a sense of optimism with regard to the rebuilding program, with the end result being a brand-spanking new head office befitting a large and modern financial institution.

Unlike the original building, the monolith that replaced it was built in one go; and unlike the old bank, the architects did not assemble all the pieces to fit together to create as

equally lovely a composition as the old 'Lizzy'. Rather, the existing tower sits awkwardly at a diagonal of 45-degrees to the intersection of Bourke and Elizabeth streets; jarring with the polite siting and scale of the GPO and London Stores buildings on opposite corners of the intersection.

The sale of the State Savings Bank of Victoria to the Commonwealth Bank in the 1990s was described by one newspaper as the 'passing of a great institution'.[6] Its expansion in the 1970s and 80s, from purely a savings bank to a financial institution that provided a broader range of banking services, had left the bank exposed to a greater level of risk, and this led to its eventual demise. However, it can be said that the passing of this institution occurred long before these events transpired. It occurred when the jack hammers began removing the old head office, which, with its human scale and character, typified the essence of this institution, as a personable financial house – the people's bank.

Granted, the 41-storey tower does have hundreds of windows from where expansive views of Melbourne can be appreciated, but unlike the old 'Lizzy', the windows are not designed to be opened to let the breeze in on a warm summer day. Nor can you hear the noise of life in busy Elizabeth and Bourke streets below. It was this sensory quality, this connection with the city and its people, that Miss Mac and I missed most about the old 'Lizzy'.



Clearing Section of the Accountant's Department, Head Office, 1971. By the time this photograph was taken, women made up a greater proportion of the staff of various departments, and worked, in contrast to earlier generations, in increasingly cramped conditions at head office. PROV, VPRS 8935/P1, Unit 3, Item 1553.



Office of Mr W Anderson, Manager, Mortgage Loans Department, 1974. Many of the offices of head office still retained their original furnishings and fittings at the time of the bank's demolition. PROV, VPRS 8935/P1, Unit 3, Item 1562.



Mortgage Loans General Office, Head Office, 1974. In an era of platform shoes and wide ties, the bank was looking dated and neglected in its final years. PROV, VPRS 8935/P1, Unit 3, Item 1563.

The move from the head office in 1975, in preparation of its demolition, was covered in great detail in the bank's staff magazine *Statesman*, August 1975, p. 16. Photographs from this article are now part of the State Bank Victoria Archive Photographic Collection held by PROV. The magazine can be accessed at the State Bank of Victoria Social Networking Site, http://www.statebankvictoria.org.





Removalists worked throughout the night shifting the last of the files to be removed from the old head office. The GPO clock is visible at top right, showing the time of this photograph to be 2.30 am. PROV, VPRS 8935/P1, Unit 8, item 6728.



The State Bank Centre, corner of Elizabeth and Bourke streets, circa 1980. The State Bank's 'hamburger' style logo of that time has been superimposed onto the tower. PROV, VPRS 8935/P1, Unit 10, Item 8685.



A view of the State Savings Bank of Victoria Head Office, framed by an arch of the colonnade of the GPO. This photograph was taken in the 1920s, after additional levels were built and the Elizabeth Street frontage extended. In the 1930s, further additions were made to the building, extending its frontage all the way to the corner of Bourke Street. PROV, VPRS 8935/P1, Unit 3, Item 1461.

Endnotes

- [1] Public Record Office Victoria, VPRS 8935 State Bank Victoria Archives Photographic Collection, various units and items as noted in captions of photographs; and book of plans, titled 'Head Office of the State Savings Bank of Victoria', dated 1935, in VPRS 8934/P1 State Bank Victoria Archives Map/Plan Collection, Unit 4.
- [2] The first stage of the bank, which opened in 1912, was designed by Grainger and Little architects. The final stage, designed in the 1930s, which extended the bank to Bourke Street, was designed by Stephenson and Meldrum architects. The architect of an intermediate stage, completed in 1926, is not known. 'Extension to Savings Bank', *Argus*, 1 October 1926, p. 9; 'Savings Bank Buildings', *Argus*, 23 November 1933, p. 11; 'Victorian Savings Bank. New Head Quarters', *Leader*, 21 December 1912, p. 18; 'Opening of the New State Savings Bank, Elizabeth Street, Melbourne', *Punch*, 19 December 1912, p. 21.
- [3] Designed by Eggleston, McDonald and Secombe architects.
- [4] Robert Murray and Kate White, A Bank for the People: A history of the State Bank of Victoria, Hargreen Publishing, North Melbourne, 1992.
- [5] State Savings Bank of Victoria, staff magazines *Progress* and *Statesman*, various editions, retrieved online from the State Bank of Victoria Social Networking Site, available at http://www.statebankvictoria.org, accessed 24 September 2019.
- [6] 'The State Savings Bank: The Passing of a great institution', *Sunday Herald Magazine*, 23 September 1990.

