

# *St John History*

## **Proceedings of the St John Ambulance Australia Historical Society 2006–2007**



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The St John Ambulance  
Australia Historical Society



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# INTRODUCTION

St John History: the 6<sup>th</sup> edition

The sixth annual edition of St John History, otherwise known as the Proceedings or Journal of the St John Ambulance Australia Historical Society, covers the year 2006–2007.

St John History appears annually and aims to cover the Society's important developments and events. The Society's principal publication, it is distributed to all financial members. Included in each edition are the papers delivered to the Society's most recent annual history seminar, in this case the papers from the eighth annual seminar, which took place in Perth, Western Australia, on 22 June 2006.

## Papers of the society's 2006 Perth history seminar

The Society's eighth annual history seminar in 2006 took place in Perth at the Duxton Conference Centre on St George's Terrace on Thursday 22nd June. As the Society's President, Dr Harry Oxer KStJ, remarked in opening the seminar, by returning to Perth for its annual seminar, the Society was completing a cycle because the initial seminar had taken place there in June 1999. The eighth seminar maintained the very high standard of content and delivery achieved in the previous seven. For the first time there were so many papers on offer that the program had to occupy a whole day, with the Society's annual general meeting being conducted on another day. There were two chairpersons: Beth Dawson of Queensland and Kevin Young of Western Australia, who did an excellent job of keeping the program moving throughout the day without delays. The range of topics was broad and varied, with something of interest for the large audiences attending each session, morning and afternoon. During the course of the day the following nine papers were delivered:

- Harry Oxer: 'A Shocking Affair — Defibrillation: A short history' (keynote paper)
- Tom Hamilton: 'The "Hill of Fechan": Torphichen, the Scottish Preceptory of the Knights Hospitaller'
- Allan Mawdsley: 'An Australian Record: the 25 years Maj.-Gen. Rupert Downes spent as the St John Ambulance Commissioner in Victoria, 1921–45'
- Loredana Criniti & Betty Stirton: 'The 80<sup>th</sup> anniversary of the Australian Cadet movement'
- Ian Howie-Willis: "'Jolly good show. Carry on": the St John's Gate emissaries to Australia — from Sir John Hewett in 1928 to Tim Everard in 1991'
- Pamela Willis: 'How to promote St John Heritage through a museum: The St John's Gate experience'
- John Pearn: 'The Dispensarium: The origins of the modern outpatients' department'
- Vince Little: 'The Literature of First Aid: A history'
- Ian Howie-Willis: 'A gap-filling exercise: (1) Dan Brown, The Da Vinci Code and the Knights Templar; (2) A history of the published St John histories in Australia'.



*Paper presenters and session chairpersons from the History Seminar in Perth on 22 June 2006: left-right are John Pearn, Beth Dawson, Pamela Willis, Harry Oxer, Ian Howie-Willis, Vince Little, Betty Stirton & Allan Mawdsley. (Not in the photograph were Tom Hamilton and Kevin Young.)*

These papers now follow, in the above order. Where appropriate and feasible, selected images from the authors' 'PowerPoint' presentation are included. Unfortunately, however, not all images were available and some could not be used because of difficulties in translating them into a print format.



# *A Shocking Affair — Defibrillation: A short history*

by Harry Ozer

The author: Dr Harry Ozer ASM KSJ is the President of the Historical Society. A medical specialist with expertise in ambulance, pre-hospital care, anaesthesiology, aviation medicine, diving and hyperbaric medicine, he was born in Yorkshire and after his medical education spent 16 years as a medical specialist in the Royal Air Force. He emigrated to Western Australia in 1975 to join the anaesthesia teaching staff at Fremantle Hospital. He also joined the Western Australian branch of St John Ambulance as Medical Director, serving in the position for the next 26 years. Since stepping down as Medical Director, he has worked part time as a medical consultant, in research and teaching, and as a volunteer in remote country areas. In retirement, Dr Ozer has retained his St John connections by serving as the Western Australian Commandery Librarian and Museum Curator as well as Deputy State Commissioner of the St John Ambulance Volunteer First Aid Service.

Many might feel that having a heart attack is a shocking affair. The management of a heart attack if the heart stops is undoubtedly a shocking affair! The device known as a defibrillator has to be used, to shock the heart back if possible into a rhythm that will allow the heart to produce a blood flow again.

There are about 1200 heart attack patients a year in Perth - a third of these die before help arrives. Some patients we get to - about 100 per month in Perth - of these 12 go into ventricular fibrillation - we save 2 to 3 each month. So although we all know about heart attack, it isn't actually a very frequent event.

What can happen? The heart suddenly stops beating and starts shivering - this is ventricular fibrillation.



If we get to it early and heart hasn't been irreparably damaged, an electric shock from a defibrillator can stop the shivering, and restore the heart to a normal beating rhythm. However after 4 to 6 minutes of no circulation, time is running out.

*The 'Heartstart 3000' defibrillator.*

Sappho in 612 BC was clearly describing ventricular fibrillation when she said 'This sets my heart to fluttering in my breast.' Another quote from Melville 1851 in *Moby Dick* perhaps set the tone for this paper by saying 'How then can this heart beat but by some invisible power?' He was clearly talking about electricity there.

Before defibrillation one of the managements for heart attack and sudden death was to blow tobacco smoke into the rectum! This was a highly recommended technique, and was in fact used in the attempt to save Abraham Lincoln, when he was shot in Ford's Theatre. He also received Sylvester style artificial respiration.

## **Who started it all?**

Ventricular Fibrillation was probably described in the Ebers papyrus of 1500 BC, when he described it thus:

'When the heart is diseased, its work is imperfectly performed, the vessels proceeding from the heart become inactive, so that you cannot feel them..... if the heart trembles, has little power and sinks, the disease is advanced, and death is near.'

This looks to me like a very good description of the heart in ventricular fibrillation, and death arising when it is untreated. 'All that mighty heart is lying still' as Wordsworth put it in 1802.

3,000 years later Andreas Vesalius described worm-like movements of the heart in animals, prior to death. Ludwig and Hoffa in 1850 demonstrated that fibrillation of the heart could be caused by a faradic current i.e. an electric current. Vulpian, a French physiologist called it 'movement fibrillaire.'

As early as 1776, Kite recommended electric shock to restart the heart. He used silver electrodes, one in the stomach and one on the front of the chest, connected to a Galvanic Pile (battery). Interestingly he added this to ventilation!

John McWilliam at Aberdeen University described and studied ventricular fibrillation in 1887 and showed that it could be stopped in animals by a series of shocks. Prevost and Batelli, Swiss Physiologists, pioneered electrical defibrillation around



1900, repeatedly stopping and re-starting the heart in animals. The shock was applied directly to the heart. However he never suggested this for humans.

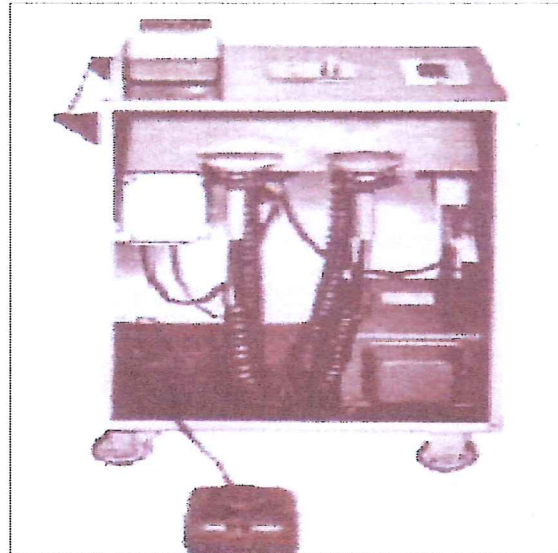
Negovsky from Russia, after World War II regularly achieved external defibrillation in dogs. He had previously in 1900 achieved internal defibrillation in animals, but again never tried it in humans.

French physician Claud Beck noticed that the heart which had stopped in asystole was all blue, whereas the heart that had stopped in ventricular fibrillation was chequered pink. He coined the phrase 'hearts too good to die.' In his experiments in 1938 he achieved a 2 hour survival, in 1939 - a 4 hour survival and in 1947 achieved long term survival.

In the 1950's Zoll first carried out the first successful human external defibrillation using alternating electric current. In 1951 he carried out closed chest defibrillation research and this first worked for him on a 51 year old. Initially he used alternating (mains) current then stored it in capacitors, first 3 capacitors then two, then one! In 1958 he tried direct current defibrillation.

Others were working at the same time and in 1958 defibrillation was rediscovered at Johns Hopkins University by two electrical engineers - Kouwenhoven and Knickerbocker. They tried it on 20 cases - the first was an obese lady and an external shock was successful. They reported a further 118 cases.

*The first Johns Hopkins defibrillator.*



When I was training at King's College Hospital they had a defibrillator in the Cardiac Theatre and this was in about 1959. This had metal pads covered in saline soaked gloves, and was operated from a switch on the wall. The first coronary intensive care unit was 1959 and we had one in 1963 at the major hospital at Royal Air Force, Akrotiri, in Cyprus. Over the years there have been many defibrillators, and we have changed from monophasic shock to a biphasic shock, where the direction of the current is changed half way through. The later is now used on almost all defibrillators - not only because it seems to work as well, but the defibrillators are smaller and lighter and therefore cheaper and easier to manufacture.

## What of defibrillation in St John Ambulance in Western Australia?

We had probably the second Heart Ambulance in the world after the one designed by Pantridge in Belfast.

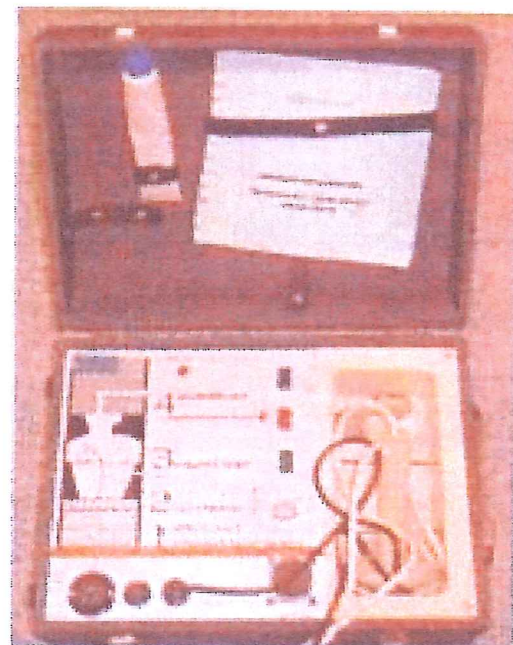
*Western Australia introduced the world's  
second  
'Heart Ambulance',  
after Belfast, Northern Ireland.*

We then had a series of different defibrillators in ambulances, including the LifePak V, the LiteGuard, HeartStarts 3000, 4000, the Zoll series and various Automated External Defibrillators.

Again defibrillation does not happen often. We do 120 a year in a city of 1.6 million. This means one for every 60,000 people a year. When you look at the country this means that it is one every 6 years in a town of 10,000.

Many of our towns are much smaller than that! However as Longfellow said in 1875 'Ah, nothing is too late till the tired heart shall cease to palpitate.'

You must defibrillate early.





There have been many descriptions which could be ventricular fibrillation. Nathalia Crane in 1913 in *The Flathouse Roof* said 'But my heart is all aflutter like the washing on the line.' And Melville again in *Moby-Dick* said 'How then can this small heart beat but by some invisible power!'

The Defibrillator in our first heart ambulance was a large and fairly simple device and, like all the equipment in the early heart ambulance in Perth and the EMU (Emergency Medical Unit) down in Fremantle, was heavy and by modern standards, clumsy.

In the late 1970's, 2 Ambulance Officers, Bill Bryant and John Lockett, started to raise money to buy defibrillators for the ambulance service. They went to community organisations such as Lions, Rotary, local Councils and Shires, and they bought all the original defibrillators until we had a defibrillator on every large centre front line ambulance in Western Australia by 1978.

This was probably the first service in the world to have this, and by 1980 we were regularly defibrillating using a machine called a LifePak V. When they worked, 'It sets my heart a'clickin like the tickin' of a clock.'



By 1981-81 'LifePak V' defibrillators were in every large ambulance centre in Western Australia

We used the LiteGuard which was made in Ireland, and was unique in that it had only one obvious paddle! However the other was on the base of the machine.



The 'LiteGuard' defibrillator.

In the country quite soon we had semi automatic defibrillators in most of our 150 volunteer ambulance officer sub centres and sub branches. It is also taught and used in Public Access Defibrillation, and the use of the AED is taught in First Aid and Basic Life Support Courses.

Currently in the ambulance service is the Zoll 'M' Series.



It is vital to defibrillate early, the earlier the better. CPR helps, but survival falls off with time and there is almost no survival without defibrillation. In my view the monitor function is almost irrelevant. A modern automatic defibrillator is better at identifying a rhythm of shockable or not than humans including Cardiologists, according to some research! A monitor will tell you that the heart has stopped but so can any first aided. In modern terms if there are no signs of life, you start CPR (30:2), and get a defibrillator as soon as possible to shock them. The machine will not allow you to shock them unless it is appropriate, and will advise you accordingly.

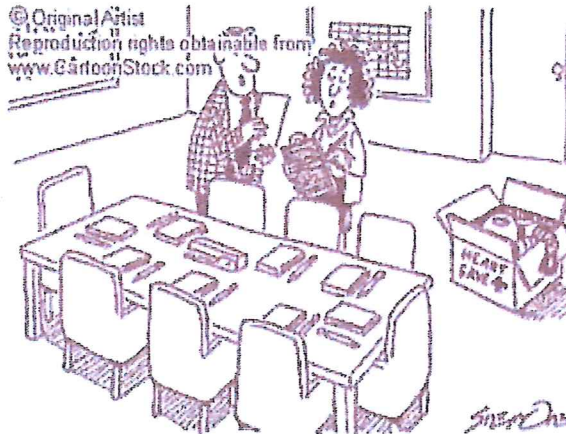
The Zoll 'M' Series.



If you keep the machine simple, the training is extremely simple and can be done in a very short period time. In the modern automated defibrillator there are two switches - one to turn it on and the other to charge the device when you are advised so to do by the equipment. There is nothing else to do - it is all automatic.

The current 'Lifepak' defibrillator:  
minimal intervention —  
'On/Off', 'Shock'.

Longfellow summarized it by saying 'Ah, nothing is too late till the tired heart shall cease to palpitate.'



"Pencils?" "Check." "Pads?" "Check." "Stapler?" "Check." "Automated external defibrillator?" "Check." Setting up for a Priory Conference?



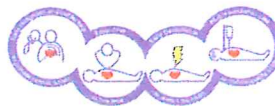
Shocking the fibrillating heart is now Basic Life Support. With the increasing availability of AED's, we should teach and use this simple skill in our service to the community. When needed at a collapse, the arrival of St John members, when necessary, should be 'A Shocking Affair!'

Promotional flyer for the modern 'HeartStart' FR2 defibrillator, emphasising its ease of operation.



Do it yourself? (Harry Oser doesn't recommend self-administered defibrillation.)

## How HeartStart® FR2 can help improve survival from Sudden Cardiac Arrest

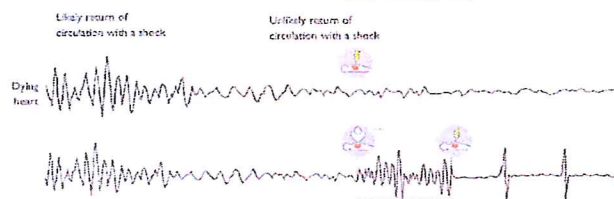


### SMART CPR™ can decide whether the better initial treatment is CPR First or Shock First?

Until recently the focus for sudden arrest patients in ventricular fibrillation has all been around getting the AED to the scene and to give a shock as quickly as possible. However, recent evidence indicates that this approach can be sub-optimal for patients where the response interval before arrival of the AED is more than 4-5 minutes (1,2). Because bystanders are to a large extent either not willing or able to do CPR, most patients will not have been given effective CPR from the time of collapse until the AED arrives. This patient group, therefore, effectively formulates a delay to benefit from 2-3 minutes of CPR by the professional responder before receiving a shock (3,4). In such cases, therefore, the professional responder should start to provide CPR rather than give a shock to maximize the chances of survival. But how does the professional responder know if CPR has been done effectively before the arrival? Some response systems have decided to "play safe" and now give CPR before defibrillation in all cases of delayed response, where this is not welcomed by the professional responder but they may result in unnecessary delay in giving a shock for some patients where the response time has been short enough bystander CPR has been given. So what is the answer?



For the first time an AED is now capable of making the decision on whether the appropriate treatment should be CPR first or shock first. The SMART CPR feature introduced in HeartStart FR2 evaluates the patient's heart rhythm and makes the decision for the responder. The FR2 can now be configured either to give a shock first - for systems that always respond in under 4 minutes, CPR first - for systems that always take a very long response time, or the AED decides when the AED decides on the appropriate therapy for each individual patient regardless of response interval or whether good bystander CPR has been done.





# The 'Hill of Fechan' — Torphichen: The Scottish Preceptory of the Knights Hospitaller

by Tom Hamilton AM CSTJ

The author: Dr Tom Hamilton AM CSTJ is a Scottish-born and -trained medical practitioner who migrated to Western Australia many years ago. He has served St John Ambulance in Western Australia in many capacities for many years. A keen student of history of both his homeland and his adopted land, in 2005 he visited Torphichen, the village between Edinburgh and Glasgow that was once home to the Knights Hospitaller. He illustrated his presentation with a range of the photographs he took on that visit.

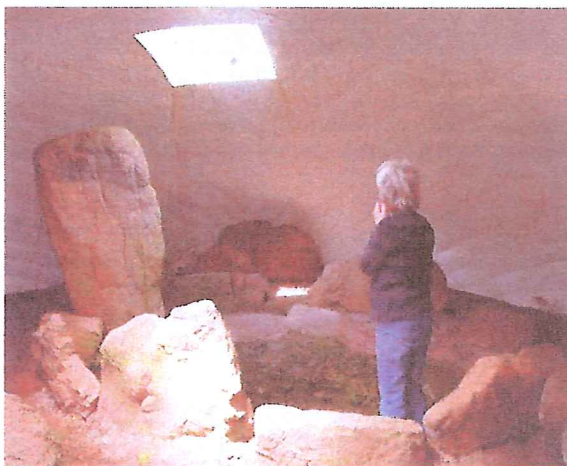
Midway between Edinburgh and Glasgow lie the Bathgate Hills from which the viewer can look east to Bass Rock on the estuary of the river Forth; west to the isle of Arran; north to the peaks of Schiehallion and Ben Vrackie guarding the entrance to the Scottish highlands; and south to the Lammermuirs in the border country between Scotland and England.

This bleak and windswept terrain, however, has held an air of spirituality for man since he first trod these hills –and today provides a suitably elevated location for modern communication relays. Archaeological surveys suggest that the site was used by 'early' and 'late' neolithic peoples for ceremonial purposes. Evidence remains of burial grounds and their associated rites from the Copper and Bronze Ages (3500BC to 1400BC); times when in faraway Ancient Egypt others of humankind celebrated the journey of their kinsmen and women to an afterlife with more grand and time-defying monuments.

However, the neolithic occupants of this area left traces of their way of life and death in a henge of stones and ditches at Cairnpapple, a knoll from which the panoramic view is stunning. A burial ground of the later "Beaker Men" (believed to be the forebears of those known as the Picts) is now protected by a grass-covered concrete dome.

*The North Grave (beaker pots)*

Access is by a steep ladder evoking in the traveller a feeling of descent into 'Middle Earth' and into a past in which the burial sites which, when first excavated, contained remains of pottery vessels presumably for food and drink to sustain the body on whatever journey lay ahead. There are also suggestions of these cists (stone tombs) having been used for later Christian burials.



*Cists, henge post holes; looking north.*

On the foothills near the historic town of Linlithgow lies the Scottish Preceptory of the Knights Hospitaller near the village of Torphichen which once sported a loch whose waters helped sustained a population of farmers, miners and monks. St Ninian is credited with being the first to bring Christianity to Scotland. After some time in Rome he built (397AD) the first church - Candas Cassa or white house - in south-west Scotland at Whithorn in Galloway, thus bringing Christianity to the Celts and Picts in the early fifth century; some 150 years before the better-known St. Columba landed in Iona. Ninian also built a



wooden church at Torphichen – “hill (tor) of Fechan”. St Vigeon , an Irish monk and patron of Scottish churches, was also known as ‘Fechan’ (Gaelic for raven) on account of his dark appearance. The monks of the early church lived an essentially

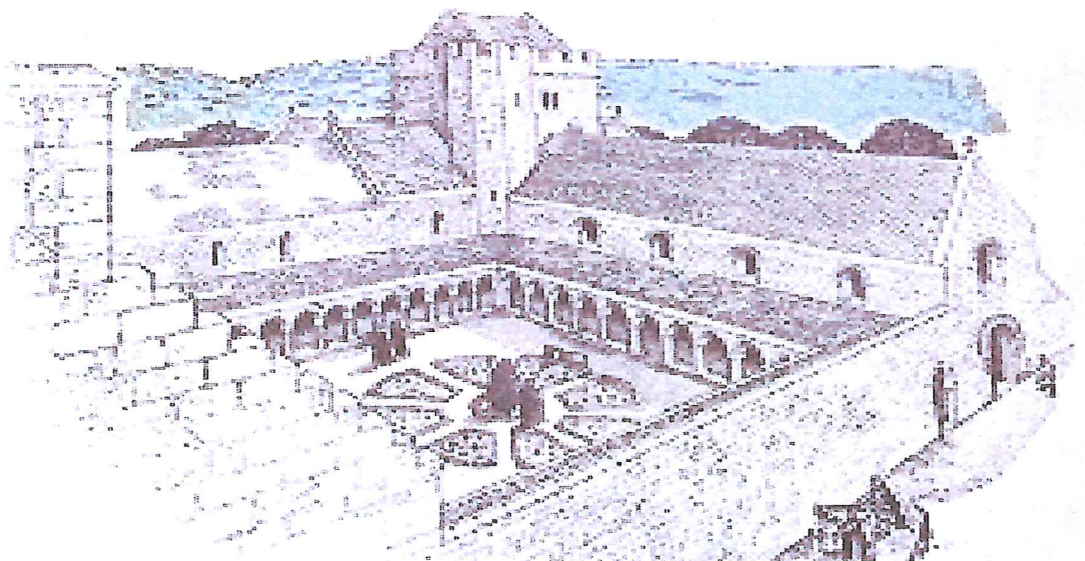


hermitic existence in beehive shaped stone cells or “clochans” of which there is evidence around Torphichen.

*The remnant of the Scottish Preceptory of the ancient Order of St John, as it was in 2005. The Preceptory is managed by the Priory of Scotland of the modern Order.*

In the years after the first crusades the Templars (the first Order to come to Scotland in 1128 with Headquarters in the appropriately-named Temple in East Lothian ) together with the Hospitallers had spread across Europe to raise recruits and funds to support further excursions to the Holy Land. King David I of Scotland granted to the Knights Templar and Hospitallers lands and properties which they farmed and managed and from which they raised revenue as they had done throughout Europe.

Torphichen Preceptory is first mentioned in a charter by Malcolm IV of Scotland in 1168. The monks, overseen by a Preceptor, managed their estates and the collection of rents as well as attending to their spiritual duties and rituals. There was a small hospice and, from the herb garden, plants with medicinal properties were cultivated.



*The Preceptory as it might have been.*



In consequence the area occupied by the Preceptory was originally quite large including buildings for administrative, monastic and domestic functions. Only the central tower, chancel and transepts remain of which a striking feature is the vaulted roof.



*The vaulted roof, north transept.*



*The Sanctuary Stone, in the Kirkyard.*

Another feature of the Preceptory probably predates the Christian era. The 'Right of Sanctuary' is believed to be of Celtic origin and the "Sanctuary Stones" were possibly located originally at nearby Cairnpapple where later Druid ceremonies and burials were conducted. Miscreants and other accused who reached the 'Sanctuary' were granted the rights of fair trial or reprieve. The site was marked by a central 'Sanctuary Stone' and the area bounded by four other stones set about a mile away on each of the four points of the compass. Part of what is believed to be the original Cairnpapple 'sanctuary stone' now rests in the kirkyard of Torphichen.



*The dome over the Cairnpapple burial sites.*

In 1238 the Pope decreed that the 'right of sanctuary' be limited to monasteries and churches. There are records up to the mid-16th century of those who sought sanctuary in Torphichen and were later taken to trial in Edinburgh - with varying degrees of success.



In earlier times the natives of what is now the parish of Torphichen were often engaged in resistance to invaders from across the North Sea as well as in recurring feuds with the 'auld enemy' across the southern border with England. Among early visitors of historical renown was King Arthur who fought twelve successful battles in Scotland for the Picts and other Celts against marauding Saxons; the last of these at nearby Loch Cote, in the Bathgate Hills, in 516 AD.

*The Bathgate Hills, looking East to Edinburgh.*



Eleven years later at Camelon he was slain in a hand-to-hand struggle. Accurate details of his life of feuding and wandering are, however, shrouded in the mists, mysteries and mythology of the folklore of later generations.

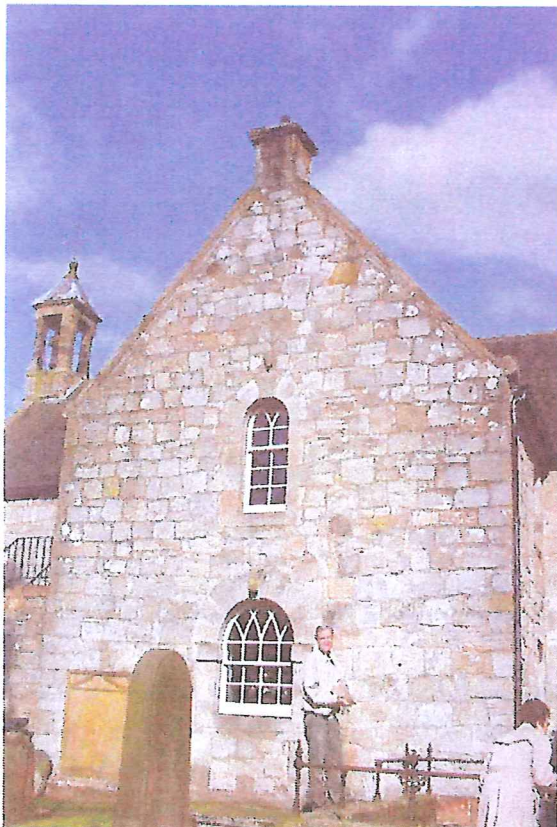
Most of the Knights Templar and Hospitallers were of English or European origin, had their headquarters in England and fought on the side of the English king Edward 1<sup>st</sup> in his battles with Sir William Wallace, lionised by the movie industry as 'Braveheart'. Wallace had camped at Torphichen prior to the fateful battle of Falkirk (1298) in which the then Master of Torphichen, Alexander of Wells, perished fighting on the English side. Edward was injured when kicked by his horse and returned to Torphichen for treatment of the injury to his chest. He had obviously fully recovered to rout the Scots at Bannockburn in 1314.

On the other side of the known world the Hospitallers, attacked and displaced from Jerusalem by their Muslim protagonists, settled further westwards over three centuries via Acre, Cyprus, Rhodes to Malta which became their headquarters until Napoleon invaded en route to Egypt in 1798. The Templars had earlier fallen into disgrace, their Grand Master was burned at the stake in Paris (1314) and their lands fell to the Hospitallers. There had always been some disquiet in Scotland about being subordinate to the English Priory and the Brothers became answerable to Malta.

The Scottish Order remained Roman Catholic until the Reformation when the monastic properties were destroyed. Apart from the transepts, chancel and tower which remain to this day the buildings of the Torphichen Preceptory all but disappeared.

To save his skin in these turbulent times the Preceptor, Sir James Sandilands, gave over the Preceptory baronies to the Queen - but the lands were returned to him two days later by Royal Charter on payment of a large sum of money! He became a protestant, befriended John Knox, sold some properties to clear his debts and remained in Scotland as the first Lord Torphichen.

The Priory in England was dissolved in 1540 after Henry VIII's falling out with the pope over some matrimonial difficulties. The Order in both countries, as elsewhere, fell into abeyance until the 19<sup>th</sup> Century when Queen Victoria granted a Royal Charter and established the Most Venerable Order in 1888.



*The Torphichen Kirk.*

The present kirk was built in 1756 on the site of the nave of the Preceptory – at a cost of 300 pounds. The congregation and their ministers were involved in the "secession" movement which objected to the selection of their minister by the local laird rather than by the members. This dispute resulted in the establishment of the 'Free Church' of Scotland which divided the Presbyterian church for nearly 100 years – and enmities persist to this day in some quarters.



*The Gatehouse, with the Kirk in the background.*

The main feature of the Gatehouse guarding the entrance to the kirk is its lack of windows. In the early 19<sup>th</sup> century it was used to store corpses for several weeks to foil the grave-robbers then active across central Scotland providing bodies for anatomical studies. The infamous 'resurrectionists' Burke and Hare circumvented the problems of digging up the deceased by murdering their victims. The Anatomy Act of 1832 effectively abolished the practice.



Not until 1947 was the Priory of Scotland reconstituted at the Palace of Holyrood in Edinburgh on 23rd June and a special service was held at Torphichen attended by the Grand Prior, the Duke of Gloucester.

The Order in Scotland conforms to the basic principles of service to the sick and needy; has its headquarters in St John's House, St John Street, Edinburgh; supports the St John Eye Hospital in Jerusalem and has close links with the St John's Hospital in Livingston, near Edinburgh. Other activities include

- palliative care clinics
- sheltered residential accommodation
- respite homes
- vehicles and bases for mountain rescue teams
- active groups of St John Cadets
- currently sponsors the Medical Director of the Eye Hospital in Jerusalem.

There is also an active St John Association with branches throughout Scotland and the local committee members of Torphichen provide guides to the Preceptory (open at weekends) which is maintained by Historic Scotland.

St John does not provide an ambulance service in Scotland.

The Scottish St Andrew's Ambulance Association was formed in Glasgow in 1882 to provide not only instruction in First Aid but also ambulance services – recognised in 1904 by the formation of an Ambulance Corps. With the advent of the National Health Service (NHS) in 1948 the St Andrew's and the Red Cross Scottish ambulance services were combined. The Red Cross withdrew in 1967 and St Andrew's became the sole provider and was taken over by the NHS in 1974.

Last year my wife and I went back to Scotland for the Quincentenary of the Royal College of Surgeons, Edinburgh which had received the 'Seal of Cause' from King James IV in 1505. For a visit to my birthplace, Bo'ness in West Lothian, we stayed with friends on their farm (Wairdclaw) in the Bathgate Hills and re-visited Torphichen and Cairnpapple. A chance conversation with Professor John Pearne, AM, KStJ, at the Priory Meeting two years ago had stimulated my resolve to return to the area in which I spent many happy hours exploring the Bathgate Hills as an enthusiastic Boy Scout, putting to test the skills in map-reading and other aspects of 'fieldcraft' by which enthusiastic tutors also instilled notions of self-reliance and service to lads whose fathers, uncles and older brothers were mostly engaged in the horrors of World War II.

At the Preceptory I was fortunate to meet Jack Smith CStJ, elder of Torphichen Kirk and historian, from whose 1997 publication "Torphichen" I gleaned much valuable information and to whom I am grateful for his kindly welcome and scholarship.

The visit also afforded the opportunity to further explore the Bathgate Hills which reinforced how serendipity can reveal illuminating historical pleasures. I was intrigued by some clearly man-made excavations in the hillsides pointed out by my host, farmer Stanley Peake, which turned out to be the remains of an 17<sup>th</sup> Century entrepreneurial enterprise. In 1606 Sandy Maund, a miner prospecting for a new coal seam, came across some "redd-mettle" which contained "small stringes like unto haiers or threads". Subsequent assay by Sir Bevis Bulmer identified the material as silver "and it proved wondrous rich".

The landowner, one Sir Thomas Hamilton (to whom the author can claim no kinship) who was King's Advocate in Scotland, obtained the lease on all minerals in the district from King James VI (of Scotland) and I (of England) in 1607. Mining began at Hilderston (a valley to the south of Cainpapple) under the supervision of Sir Bevis Bulmer. Initial results were promising and within a year the King had rescinded Hamilton's lease with 5000 pounds compensation. Little has changed in the ruthless world of commercial greed.



*Local historian, Jack Smith CStJ,  
with the Kirk and Preceptory in the background.*



The early promise, however, was not maintained and the enterprise closed in 1616. In the 18<sup>th</sup> and 19<sup>th</sup> centuries some lead and nickel were extracted from these hills - but no silver! The main activity of the area remained as quarrying limestone for calcination. Examples of kilns are still to be seen at Wairdlaw Farm, which dates back to 1720, and is now owned by Christa and Stanley Peake to whom I am grateful for their hospitality, research interest and some of the photographs for this presentation.

The latest development in the area is a result of Government environmental policy of reforestation with the planting the more profitable trees on slopes once home to sheep.

Thus the Quincentenary celebrations of the Edinburgh College of Surgeons provided an opportunity to revisit old haunts; to become familiar with a nine hundred year old monument to St John's activities in Scotland; and to reflect upon man's influence on terrain with a visible history stretching back more than five millennia.

#### References.

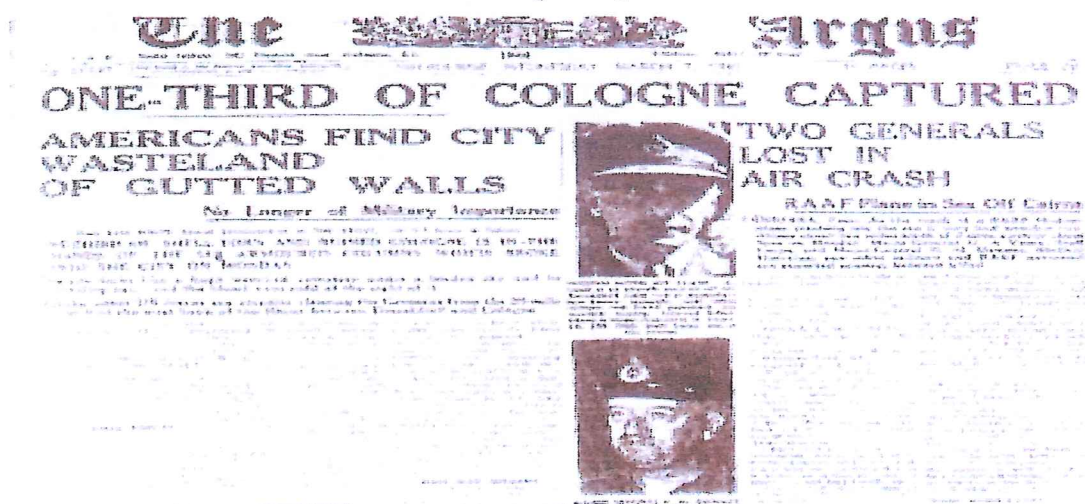
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2. [www.stjohnscotland.org.uk/ONE.htm](http://www.stjohnscotland.org.uk/ONE.htm)
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## An Australian record: the 25 years Major-General Rupert Downes spent as the St John Ambulance Commissioner in Victoria, 1921-45

by Allan Mawdsley

The author: Dr Allan Mawdsley(KStJ) joined the Malvern Division of the then St John Ambulance Brigade in Melbourne in 1949 as an 11-year-old Cadet. Since then he has held most positions available to a volunteer, including three years as Commissioner, many years as a Victorian State St John Council member and more recently as the council's Deputy Chairman. He spent his professional career as a psychiatrist but has always been interested in history and is a frequent presenter of papers at the Historical Society's seminars. He is also prominent among the group who have developed the Victorian St John Ambulance Museum at Williamstown.

On 5<sup>th</sup> March 1945, in a severe rainstorm, an RAAF Hudson crashed into the sea two miles north of Cairns airstrip, killing all on board. The pilot had advised against flying in the storm but his high-ranking military passengers, particularly Major-General George Vasey, who was on his way to the battlefield in the closing stages of the War in the Pacific, were keen to travel. In all, eleven military passengers died, including Major-General Rupert Downes, the subject of this paper. This tragedy cut short the life of one of the most remarkable men in St John history.



The Argus newspaper announces the death of Major Generals Vasey and Downes, 7 March 1945.



Rupert Major Downes, surgeon and soldier, was born on 10 February 1885 at Mitcham, Adelaide, youngest of fifteen children of Major General Major Francis Downes and his wife Helen Maria, nee Chamberlin.<sup>1</sup> Only five of the children survived infancy.<sup>6</sup>



*Major General M. Francis Downes,  
father of Rupert Downes.*

Major-General M F Downes (1834-1923) was a graduate of the Royal Military Academy at Woolwich in 1852, initially appointed to the Royal Artillery.<sup>3</sup>

He served in the Crimean War and later became an Instructor in gunnery. Whilst in command of a troop of horse artillery he was offered the post of Military Commandant in the colony of South Australia for which he was promoted to Lieutenant-Colonel. After four years, instead of returning to Britain, he agreed to continue in the role and retired from the British Army as an Honorary Major-General.

He remained as Commandant in Adelaide until 1885, the year of Rupert's birth, when he took up an appointment as the inaugural Secretary of the Department of Defence of the Colony of Victoria.

This appointment is an important event in Australia's Defence history because Victoria was the only colony ever to have maintained a Department of State concerned solely with matters of Defence. The present Commonwealth Department of Defence has its historical origins in this Department.

Downes senior initially had his office in the Treasury Place building occupied by the Minister for Defence, whence it had been moved from Victoria Barracks two years earlier in the midst of a conflict between the Minister and the Victorian Military Commandant who saw himself as answerable to the Governor rather than to politicians.

Downes not only had to deal with the residual sensitivities of this issue but also with the perceived threat of a Russian invasion requiring fortifications and artillery emplacements at point Nepean and Point Lonsdale covering Port Phillip Heads. Two circular gun emplacements can be seen on the headland in this picture of Point Nepean.

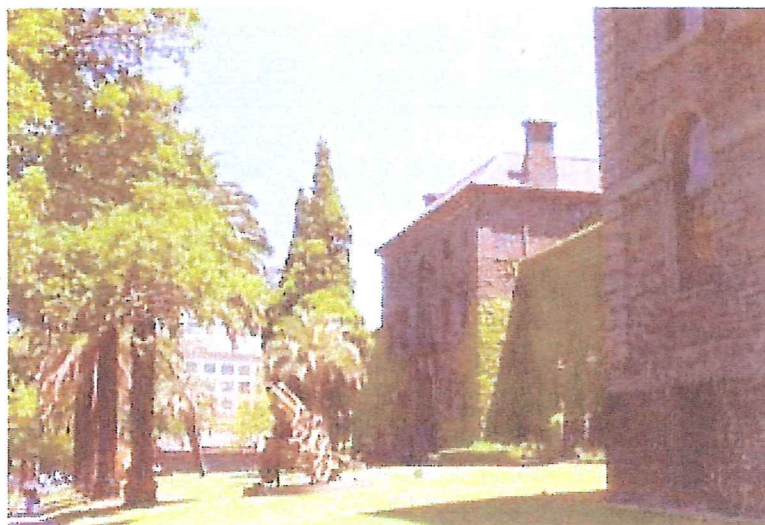
In 1885 he was also a prime mover in the campaign to erect a memorial in Melbourne to the death of General Gordon at Khartoum. They had been friends at Woolwich College, had served together in the Crimean War and later at Sandhurst.

A year later, in November 1886, his office was moved back to Victoria Barracks. Downes managed these issues well, and his services were greatly valued, but he was unhappy with 'paper work' and he declined to renew his appointment at the end of his three year term.

He was immediately offered his old post as Military Commandant in South Australia, which he accepted.

He remained there from 1888 to 1893. He retired at the age of 59, to live near his son, Robin Downes, at Geelong. He and his wife moved to Brighton two years later on advice about his wife's health.<sup>3</sup>

*Victoria Barracks, St Kilda  
Road, Melbourne: headquarters  
for father and son, Major  
Generals M.F. Downes  
and R.M. Downes.*





In 1899 the Victorian Government sent a contingent to the Boer War at the same time as the Military Commandant retired and they were negotiating the transfer of the Victorian Army into the Australian Army at federation. As a transitional measure they prevailed upon Downes to serve temporarily as Military Commandant of the Victorian Army until permanent arrangements were made after federation. He remained in this post until final retirement in 1902. By this strange quirk of fate he thus became the last Commandant of the Victorian Army and the Commanding Officer of Surgeon-Major George Horne. Horne was in charge of the Militia medical service and became the first Commissioner for St John in Victoria.

It was in this quintessentially British military household where Rupert Downes spent his childhood, and from an early age it was clear that he would follow his father's footsteps. When the family moved to Brighton he was ten years old.<sup>3</sup> Rupert was educated at Haileybury College, Melbourne'

When still at school, he had joined the Victorian Voluntary Field Artillery (St.Kilda 'B' Battery) as a trumpeter, and in that capacity at the age of 16, took part in the ceremony of the opening of the first Australian Federal Parliament by the late King George V (then Duke of Cornwall and York) in 1901



*The opening of Federal Parliament 1901: the painting by Tom Roberts.*

He entered the University of Melbourne Medical School and was resident at Ormond College.

*The University of Melbourne  
medical school,  
opened 1885.*

He graduated M.B., Ch.B. in 1907. Also shown in this group is Dr Arthur Sherwin, who was to become Victorian St John Commissioner after the death of Rupert Downes. As a student Downes served in the Melbourne University Rifles, and in July 1908 he was commissioned as a captain in the Australian Army Medical Corps.'

The first six years of his career were fruitful and happy ones. Army medical activities could occupy only a part of his time while he was in the volunteer forces, and so his remaining time was occupied in private practice, in teaching as a demonstrator in anatomy at the University of Melbourne, in tutoring at Ormond College, and working as a clinical surgical assistant at the Melbourne and Children's Hospitals.







*Melbourne University's graduating medical class of 1907 .*

*Rupert Downes's graduation photograph, 1907*



In 1911 he obtained the MD higher degree in medicine.

In 1912 he was successful in the examination for the Master of Surgery degree in the University of Melbourne. At the same time he threw himself into the work of the Australian Army Medical Corps, being promoted major in 1913.'

On 20 November 1913 he married Doris Mary Robb, the daughter of Arthur and Ethel (nee Richardson) Robb. The wedding took place at St John's Church, Toorak. They subsequently had three children : Rosemary (Mrs Campbell), Valerie (Mrs Howse), and John.

It seemed likely that before very long he might look forward to an appointment on the honorary surgical staff of the Melbourne Hospital. This, however, was not to be, for with the outbreak of war in 1914 he joined the Australian Imperial Force and went abroad.<sup>5</sup>



When the Australian Imperial Force was raised in 1914, Downes was given command of the 2nd Light Horse Field Ambulance and promoted lieutenant-colonel, the youngest in the AIF. Before sailing for Egypt he was transferred to the 3rd Light Horse which he led on Gallipoli where he won a name as an outstanding commander.'

*The 3<sup>rd</sup> Light Horse Field Ambulance at Mena camp, Egypt, 1915.*



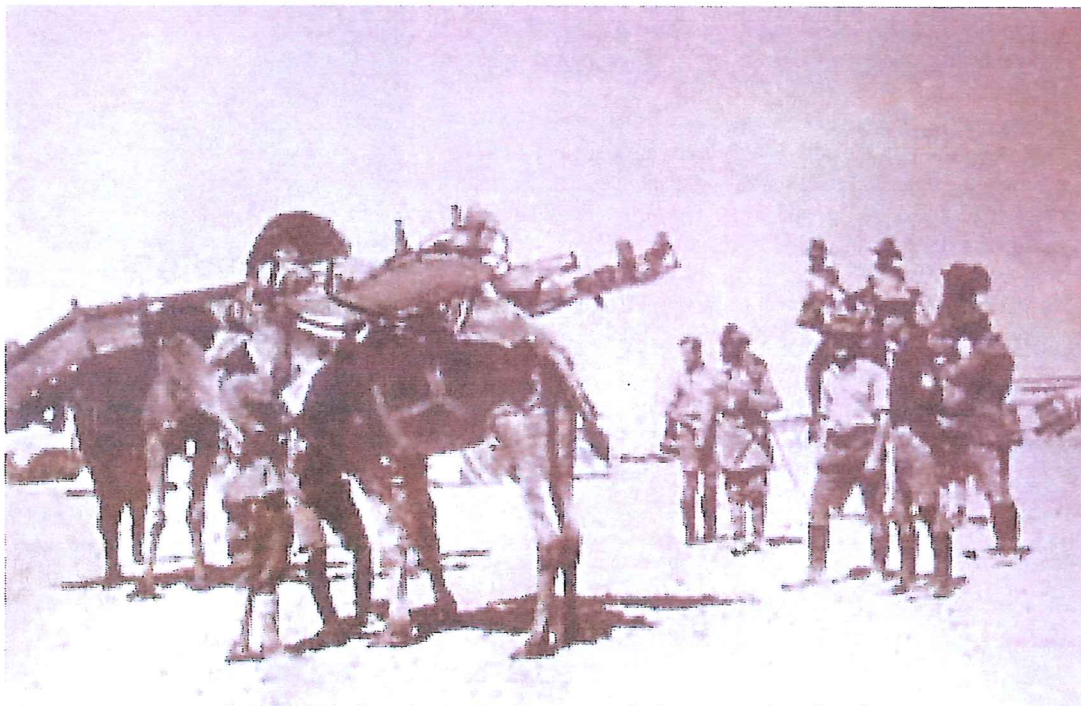
On the formation of the Anzac Mounted Division in March 1916, Downes became its Assistant Director of Medical Services with the rank of colonel.

In Palestine General Harry Chauvel had a policy of placing proved Australians in key administrative positions affecting the wellbeing of the troops. Thus, when he formed the Desert Mounted Corps in 1917 he brought Downes with him to run his medical services.<sup>6</sup> Downes was appointed Assistant Director of Medical Services of the Desert Mounted Corps, LHFA in camp and also Assistant Director of Medical Services of the Australian Empire Force (Middle East), based in Egypt, successfully combining the two roles for the remainder of the war.<sup>6</sup>



*A Light Horse Field Ambulance in Palestine, 1917.*

Downes was remarkable as innovator and organizer.' He devised methods such as the use of camel cacolets and sledges for transport of casualties over the soft sands of the Sinai Desert. By division of a light field ambulance into two sections, a mobile and a tented, he was able to overcome the lack of a casualty clearing station and provide immediate treatment for casualties at the scene of action before conveyance back over the long stretches of desert to the tented section.

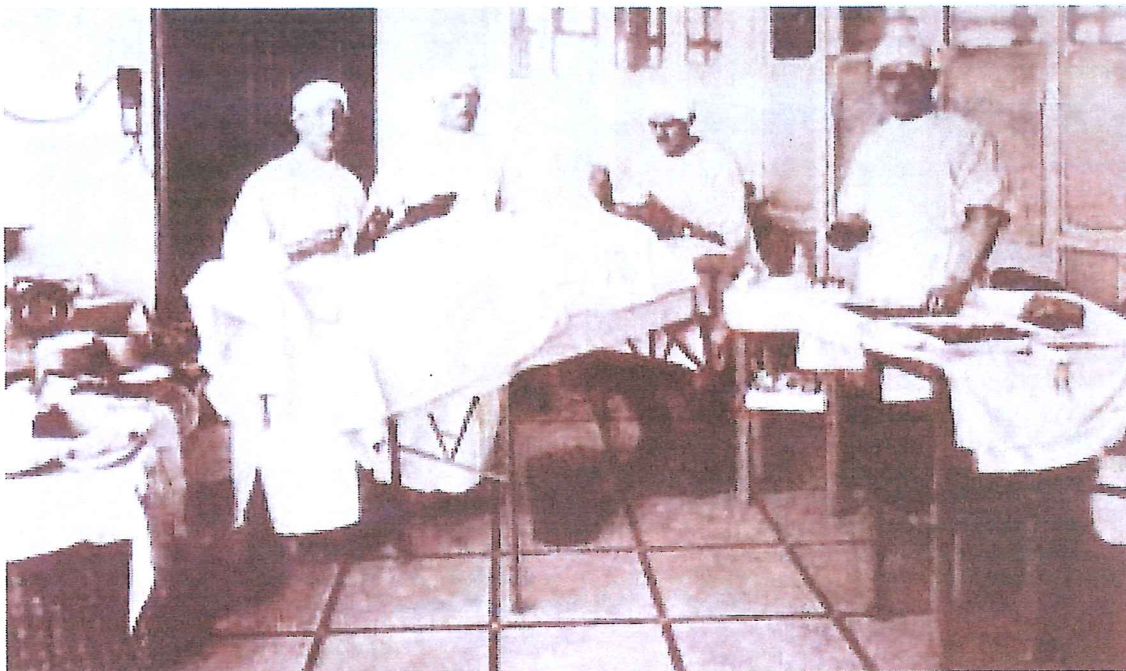


*A camel cacolet for transporting wounded troops in the desert.*



In the swift advances which resulted from Allenby's later victories in Palestine and Syria he surmounted great difficulties in transporting casualties over tremendous distances with the aid of motor ambulances.<sup>4</sup>

Operating unit In the Jordan Valley in 1918, his anti-malarial measures kept sickness at acceptable levels; and he was greatly assisted by the Anzac Field Laboratory which he had raised in 1916.' He also organized a mobile surgical unit which was able to provide skilled surgical attention in the forward areas, thus foreshadowing the present-day mobile surgical team.



*An operating unit of the Australian Army Medical Corps in the Middle East, World War I.*

He took vital steps to reduce the danger of dysentery and cholera, while his anti-malarial campaign was so vigorous and successful that the Desert Mounted Corps was able to garrison the Jordan Valley during the summer of 1917 and advance to rout the Turks at Damascus in the winter of 1918.' During the battle for Es Salt in May, he requested pilot Ross Smith to drop medical supplies in tyre tubes from the aircraft, and reported in his diary that this had been a success

His most challenging difficulties occurred at Damascus. After a two hundred miles advance through country previously occupied by the Turks, the troops became heavily infected with malaria and an outbreak of influenza. The influenza epidemic went on to kill 20 million people worldwide, and was unexpectedly more severe in young persons compared to the usual pattern of greater severity in the elderly. This, coupled with the capture of enemy sick and wounded who were without medical attention, presented an immense problem. 'w There were also considerable difficulties with Colonel T.E. Lawrence, Lawrence of Arabia, advocating on behalf of Arabic political leaders. Stricken himself with malaria, Downes remained at his post and carried the medical service through one of the most difficult and trying periods of its history. In a letter to his wife General Chauvel said he, himself, kept going 'by the Mercy of God and the loyalty of Rupert Downes'.<sup>6</sup>

Downes was mentioned in dispatches six times. In January 1918 he was awarded the C.M.G. and his wife was awarded the O.B.E. for her work among soldiers' families.

*Colonel Rupert Downes as Deputy Director of Medical Services, 1917-18, when he served under Lieutenant General Sir Harry Chauvel of the Desert Mounted Corps.*



After the War he was invited to write the section on the Sinai and Palestine campaign in Volume I of the Official history of the Australian Army Medical Set-



vices Colonel A G Butler, the editor of the history wrote, 'When, in the early stages of the work, Colonel Downes was invited to write on the medical history of the Light Horse, he wished to tackle the job on the lines of a series of self-contained studies on various problems, which should be related to events and operations by a general narrative. My own plan for the history, as medical editor, envisaged a direct and immediate association of professional and technical problems with the actual course of military events. Though it went against his own opinion and preference, Downes accepted without demur, though with regret, my views on the writing of his section (which was, and I think still is, the most exact study yet made of Light Horse medical work)'.

While engaged in this work he was attempting to rebuild his surgical practice in Melbourne.' The Medical Journal obituary reports that he was an applicant for a vacancy on the staff of the Melbourne Hospital as an outpatient surgeon.

*The Old Melbourne Hospital,  
later called  
the Queen Victoria Hospital*



'Although he was still a young man, there were other applicants a little younger who were thought to be of the age more suitable for appointment, having in view the age at which they would become eligible for in patient surgeon appointments, and Rupert Downes did not receive an appointment. He felt this very much, but it was characteristic of his nature and code of behaviour, that he remained friendly with his younger successful competitors and advanced their interests when it lay in his powers to do.

Downes became an honorary consulting surgeon at the Children's and Victorian Eye and Ear hospitals, honorary surgeon at Prince Henry Hospital, and in 1927 a foundation fellow of the College of Surgeons of Australasia. 'As an honorary surgeon to the Children's Hospital he took an active part in setting up the orthopaedic hospital at Frankston.

With the retirement of Lt-Col.George Horne in 1921, Colonel Rupert Downes was appointed Commissioner of St John Ambulance Brigade, Victoria District. He remained in that role for a record 25 years.

Downes's passion for military medicine had taken him back to the army in 1919 as an area medical officer. In 1921 he was a member of the committee planning reorganization of the Army Medical Service and the employment of the profession during an emergency. He was also appointed Deputy Director of Medical Services, 3rd Military District (Victoria)'. His surgical connexions with various hospitals enabled him to meet young doctors and stir them with something of his own enthusiasm, producing a continuous stream of applicants for commission. But he realized that war experience was often a valuable asset and so induced a certain number of older men to continue on the active list.

Using his great experience of mobile warfare, he held tactical exercises which stimulated the keenness of the young medical officers. These were held approximately twice a year and actively involved medical officers of all grades. Carefully prepared in conjunction with the General Staff, these exercises were of considerable value in bringing the medical service into closer relationship with other branches. Quite a large proportion of the medical plans actually adopted to meet the threatened Japanese invasion was thus envisaged and tested on the ground in the years immediately preceding the outbreak of WW 11.4 According to Major General Sir Samuel Burston, 'He was never a talker and more by example than by precept he indicated clearly what was expected of an officer of the Army Medical Corps. The officers trained by him during this period were to be amongst the most valued of the senior officers of the corps in World War II'.

In 1928 Downes joined a committee appointed to examine the mobilization of Australian medical resources for war. He vigorously opposed the concept, already accepted by some, of conscription of doctors and medical students under the direction of the minister of health.'



In 1933 came the tragedy of the death of his only son, John, at the age of ten. John, who was a student at Geelong Grammar, contracted meningitis and (in this preantibiotic era) was nursed at home until his death six weeks later.

*John Major Downes (1923-33),  
Rupert Downes's only son.*



The Medical Journal referred to John as 'a boy of bright and most engaging character, who was already making his mark at school with his keen brain and his skill in sport.'<sup>4</sup> Downes immersed himself in his work and shortly afterwards went to Britain and Europe to study army medical problems and developments in surgery of the brain and the central nervous system.'

In 1934 Major-General G.W.Barber retired as Director-General of Medical Services. Downes was urged by his friends, who realized the importance of the position and his outstanding qualifications for it, to apply for the appointment .~' Downes was appointed in August 1934 and was promoted major general next year. His earliest ambition of being a regular soldier was achieved, but at the cost of relinquishing his surgical practice.



He began work under the shadow of the death of his only son and when the army was starved of men, money and equipment. All his training, experience and interests combined to fit him for his new post at a time when war seemed imminent. He was one of the leaders of his profession, widely read and of great physical energy. He was soon to show that he was also a man of vision.'

*Major General Rupert M. Downes: the most widely used portrait, from the 1930s after he had become the Director General of Medical Services for the Australian Army.*

In the five years to the outbreak of war in 1939, Downes selected and trained many leaders of the Australian Army Medical Corps, foresaw civil as well as military medical problems, planned their solution and pioneered major developments in the medical side of recruitment.

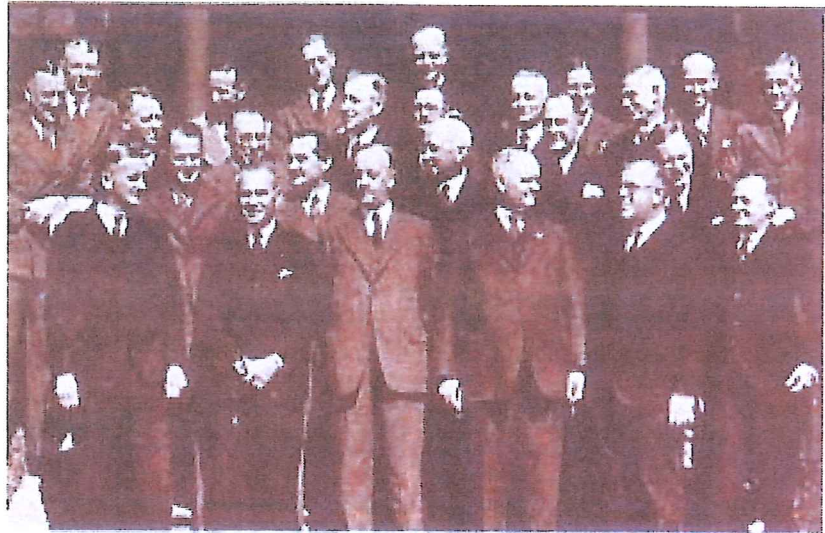
He was chairman of the board which in 1935 reorganized army medical equipment. On his initiative funds were provided in 1939 in time to import large quantities of drugs such as quinine, and equipment before war began. It also encouraged local manufacture of many other items of equipment." For example, he was responsible for arranging mass production and implementation of blood collection and transfusion sets of one liter capacity instead of the traditional English pint, for which he endured significant criticism only to be ultimately proven correct in his judgment. His report foreshadowed the wartime control later effected through the Medical Equipment Control Committee. Downes's interest in training was felt throughout the Medical Corps.

In 1936 in the first major tactical exercise for medical officers, for five days the medical problems of a Japanese invasion were studied on the ground between Goulburn and Wollongong.



He also looked into the future when, in 1937, he called for a report on the medical and hygienic aspects of the Territory of New Guinea.

*The army medical officers who participated in the tactical training exercise in the NSW southern highlands in April 1936. Major General R.M. Downes is at the centre of the front row.*

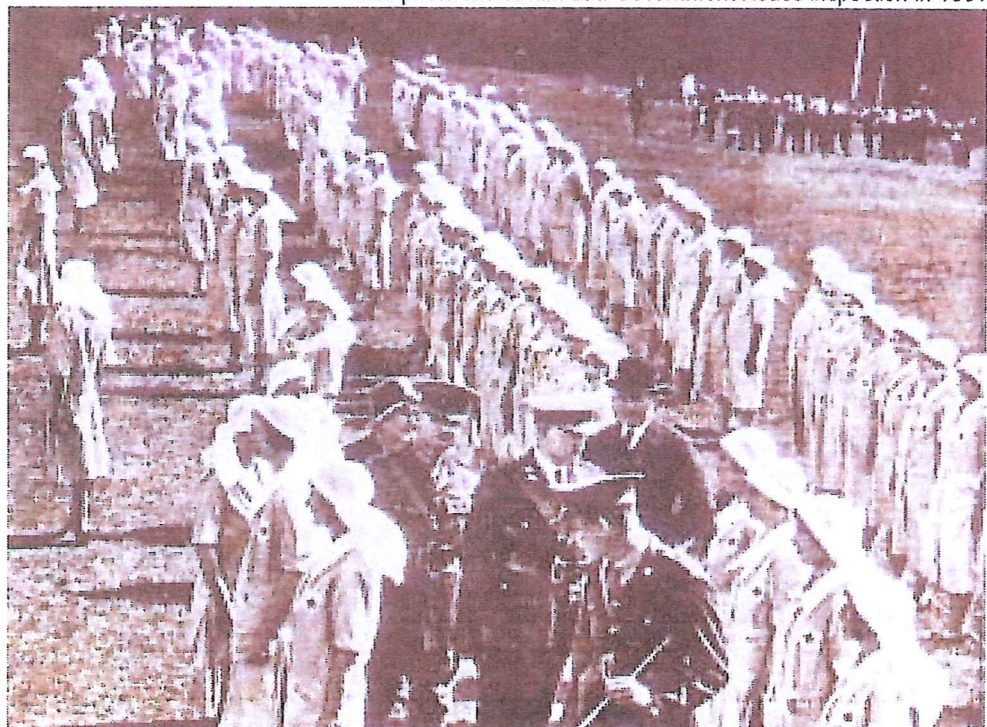


His work in relation to the coordination of military and civil medical services was equally notable. Early estimates were that, on mobilization, 1 160 medical officers would be required, with a 10% reinforcement rate. The civilian community would be allocated one doctor per 3000 instead of the ideal rate of one per 1500, which could be readily achieved because at the outbreak of war Australia had 5610 doctors providing a one in 1244 ratio .7. He had the help initially of only two regular staff officers and he co-operated with Dr J. H. L. Cumpston, Commonwealth director of health.' At the peak of the war the Australian Army Medical Corps had a total strength of 32,000 : 2500 doctors, 3500 nursing sisters and 900 non-medical officers.

Outside his heavy military commitments, Downes was also extraordinarily energetic. He was Commissioner of St John Ambulance Brigade in Victoria from 1921 until his death in 1945, a record which will never be broken because of the subsequent triennial limits. He also joined St John Ambulance Association in 1921, and was President for eight of the years between 1929 and 1942.'

He also fostered the development of women's services such as the Voluntary Aid Detachments over a long period of time.

This photo shows him at a Government House inspection in 1931.



*Major General Rupert Downes (in white cap) inspects a parade of Voluntary Aid Detachment members, late 1930s.*

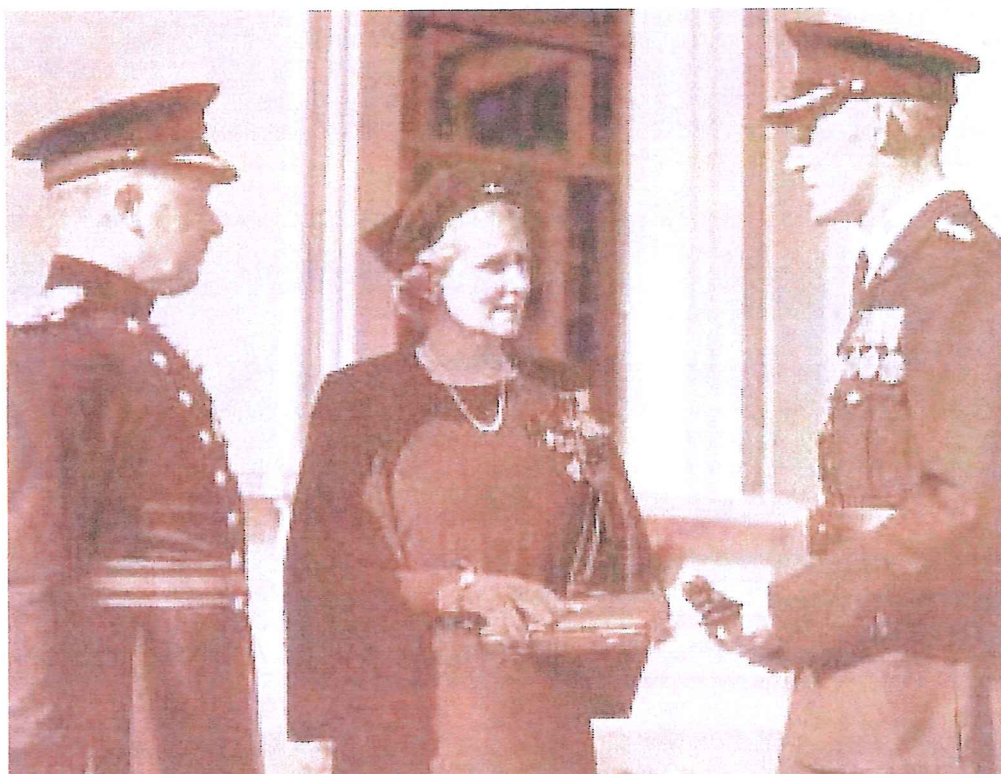
For many years he was a member of the Board of Victorian Civil Ambulance Service, and was President for the years 1937-1938.' He was chairman of the Masseurs' Registration Board, a councillor of the Victorian division of the Australian Red Cross, and chairman of the Red Cross National Council in 1939.'





*The Victorian Civil Ambulance Service, mid-1930s.*

His outstanding services to the Order of St John were first recognized in 1929 by admission as Commander, and in 1937 by promotion to Knight of Grace.



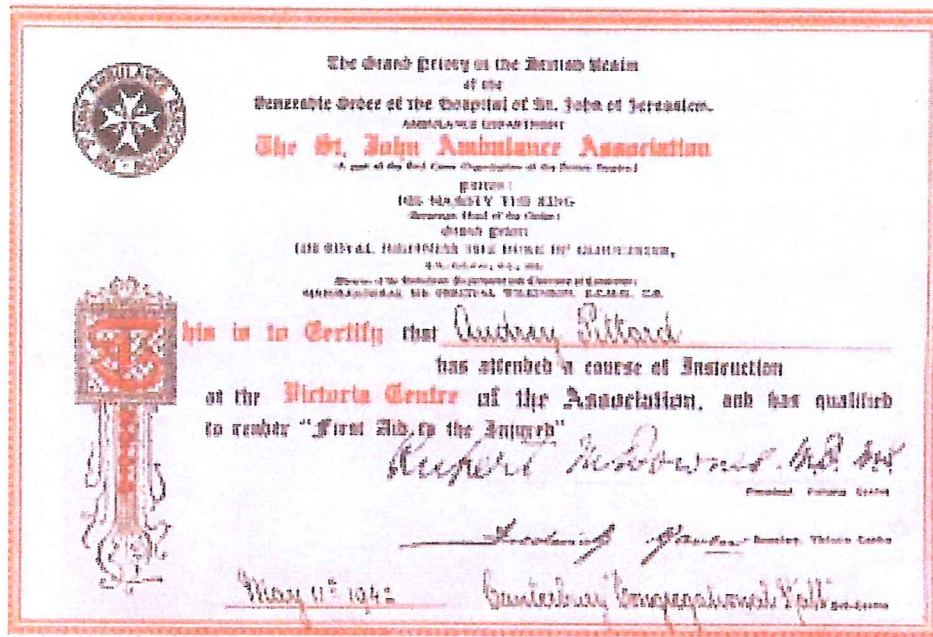
*The 1937 investiture of members of the Order of St John in Melbourne.*

*Left-right are  
Rupert Downes (KStJ), his wife, Doris Downes (OStJ),  
and the District Superintendent of the St John Ambulance Brigade, Frederick Raven (OStJ).*

At this investiture by the Governor, Lord Huntingfield, other recipients included Dr John NewmanMorris (father of Sir Geoffrey Newman-Morris, a subsequent Commissioner), who became a Commander, Mr Frederick Raven (State Superintendent) who



became an Officer Brother, Mrs Doris Mary Downes who became an Officer Sister, and Mr Bill Fyfe (Superintendent of Caulfield Division, who will shortly be seen together with Colonel Sleeman) who became a Serving Brother.



First Aid certificate signed by Rupert Downes as president of the Victorian Centre of the St John Ambulance Association.

In the massive bushfires of January 1939, when much of the Eastern half of the State was ablaze, his role was noted in the newspaper reports in the following words, 'A relief convoy left Red Cross Headquarters in the city this morning to rush medical aid, clothing and food to Wood's point. The route taken was over the Black Spur and through to Jamieson. A Forest Commission gang went ahead in a truck to clear the road. As it might be necessary for doctors to push ahead on horseback to take medical aid to people injured and burned in the devastated hill country around Wood's point, pack saddles were taken with the convoy. Horses will be picked up along the road. Splendid work in giving first aid is being done by the St John Ambulance Brigade of volunteers. St John Ambulance motorcycle outfits and cars carrying medical supplies are operating in eleven country centers. The Commissioner of the St John Ambulance Brigade, Major-General Rupert Downes, who is also Director-General of the Australian Army Medical Services, has gone to the country to supervise the work of his helpers. He is accompanied by the Secretary of the organization (Mr F.F.Raven). The military authorities have offered the State Government all the army medical service resources available.'

Downes served on the Victorian Branch Council of the British Medical Association for many years and was elected President in 1935. He considered this as one of the greatest tributes paid to him by his fellow practitioners. He was proud of his selection by the Council as a suitable member for appointment at the Melbourne Medical School to give a short series of lectures on professional conduct and medical ethics.

He was a Victorian delegate to Dr Thomas Storie Dixson's 1921-33 ill-fated Central St John Council for Australia. He was the person most responsible during the late 1930s for setting in motion the train of events that eventually led to the formation of the Australian Priory of the Order. These events are extensively described by Dr Howie-Willis in his book, 'A Century for Australia' and a paper entitled 'The federal movement in St John Ambulance Australia' published in the 2004 Proceedings of this Historical Society.

Western Australia declined participation and the Commissioner-in-Chief of the Brigade Overseas, Colonel Sir James Sleeman made an exhaustive visit to all States to ascertain whether Australia was ready for self-government. The visit to Victoria was described in the 1936 Annual Report of SJAA in the following terms, 'Representing His Royal Highness, the Grand Prior, the Duke of Cornwall and Strathearn, the Chief Commissioner of St John Ambulance Brigade Overseas, Colonel Sir James Sleeman visited Victoria and inspected the Brigade and Association activities.

During Colonel Sleeman's stay in Victoria he was the guest of His Excellency, the Governor, Lord Huntingfield, at Government House, St Kilda Road, Melbourne. The itinerary, which was carried out under very favourable weather conditions, embraced a civic reception by the Right Honorable, the Lord Mayor of Melbourne, a Public Reception at the Town Hall, Melbourne, at which approximately 2000 members of the community, including 500 St John personnel attended. At the latter gathering, Major-General R.M.Downes CMG, Commissioner of St John Ambulance Brigade, welcomed our distinguished guest and expressed the loyalty of all ranks to the Order of St John. Colonel Sleeman in his reply gave a most enlightening account of the history and work of the Order, which was broadcast through the courtesy of the Wireless



Broadcasting Commission. Items of music, ably rendered by the Metropolitan Fire Brigade's Band, and a First Aid demonstration, were included in the program.

In order to gain firsthand information on the advisability of the formation of a Commandery in Australia, representatives of the Association and Brigade met in conference at Headquarters. Colonel Sleeman was Chairman, and his knowledge of this subject was enlightening, and all present benefited considerably.'

The Sleeman report paved the way for Commandery status but highlighted the need for collaboration between the States. After Sleeman's return to the UK, discussion between the state St John bodies continued. The main instigator of the negotiations appears to have been Rupert Downes who wrote a number of letters in support of federating. There is little doubt that Downes saw an important role for St John volunteers in wartime as had already been proven by the Voluntary Aid Detachments in WW I. With himself as Commissioner, his District Surgeon Colonel Arthur Sherwin as State Comptroller of VAD, and the District Superintendent Frederick Raven as the State Deputy Comptroller and state Organizer of VAD, St John was in a powerful position to bring this vision to fruition.

Dr Howie-Willis noted: 'In March 1939, with war becoming more likely by the day, Downes travelled to the UK for discussions with his British counterparts about placing Australia's medical services on a war footing. As the St John Ambulance foundations, and more especially the Brigade, also had a military function, providing ancillary support for the medical services of the armed forces, they too figured in the planning. It was this function that finally made an Australian St John Commandery possible. In early July Downes wrote to the Australian St John bodies to tell them there was little hope of their playing their appointed wartime role unless they federated. He also visited St John's Gate and made the same point there, telling the secretary-general of the Order, Sir Percival Wilkinson, that 'it is impossible (for the Defence Department) to deal with six separate Brigades [in Australia]'. His message was plain: if the leadership of the Order wanted the Australian St John bodies to serve an effective national function in the coming conflict, they must agree to the immediate formation of an Australian Commandery. Coming from one of the most respected Australian St John figures, this was advice that no one could ignore. To add emphasis to his message Downes argued that the matter was so critical for St John that a Commandery consisting of only several states was preferable to no Commandery at all. Further, to continue negotiating with the reluctant states in hope of bringing them all into the Commandery 'would take so long that under the present conditions of urgency it might be too late'. In short, form a Commandery of several states immediately or forget about a prominent wartime role for St John Ambulance in Australia! It was this advice that finally galvanised both St John's Gate and the state St John bodies into the action they might otherwise not have taken for years.' St John's Gate authorized a Commandery for Australia (excluding Western Australia), which was finally proclaimed in 1941.

The 1941 Annual Report of the Association in Victoria reports : 'We have been advised by His Excellency the Governor-General, Lord Gowrie, through His Excellency the Governor of Victoria, that our petition has been successful and that all States of the Commonwealth, except Western Australia, are embraced. (Western Australia Centre did not participate for geographical reasons). The establishment of the Commandery has now brought the status of the Order in Australia into line with the dominions of Canada, New Zealand and South Africa' General Downes became a foundation member and was a member of both the Council and Chapter. Notwithstanding that Australia had become a Commandery, Certificates continued to be issued under the name of Grand priory.

His 1939 overseas trip visited military and other medical centres in India, the Middle East and Britain, returning in October. He was convinced on his departure that war would come. By the time of his return it had already been declared. While in London, he took steps to obtain the services as consultants of two eminent Australians, the surgeon Sir Thomas Dunhill and (Sir) Neil Fairley, an expert in tropical diseases.



*No. 115 Australian Base Hospital, Heidelberg;  
later called the Heidelberg Repatriation Hospital.*



Foreseeing the scale of the war, Downes began to press for the building of major military hospitals in the capital cities. He argued that after the war they should be handed over to the Repatriation Commission for the care of sick and disabled ex-service people. Despite strong opposition, especially on the grounds of cost, Downes persisted in his advocacy until in October 1940 he won his case. Time vindicated his judgment: the great hospitals such as Concord and Heidelberg are Rupert Downes's memorial.'

He revolutionized the medical side of recruiting for the Australian Imperial Forces. Radiography of the chest was introduced, by means of fluorographic screens photographed on miniature film, despite controversy about the diagnostic accuracy of the new technique; and everyone was x-rayed. Every soldier's blood group was determined and recorded on his identity discs and all were inoculated against tetanus, smallpox, typhoid and paratyphoid fevers. Downes was also concerned that volunteers should be medically examined under proper conditions. He had to cope with 'the reluctance of some staff officers to regard the Director General of Medical Services as the responsible technical adviser on medical affairs' and there were difficulties with the adjutant general to whom he was responsible. It must have been a solace when Burston wrote from the Middle East: 'I think it is safe to say that there has probably never been a force sent overseas from any country better equipped on the medical side'.

*The headquarters staff of the Army Medical Directorate, 1940.*

*Major General Rupert Downes, the Army's Director General of Medical Services is seated third from right.*



In addition to Downes (front row, center) this photo includes Colonel (later Brigadier Sir William) Johnston and Major (later Colonel Alexander) Christie who became St John District Superintendent. In November 1940 Downes was appointed Director of Medical Services,

A.L.F. (Middle East), but General Sir Thomas Blarney had already appointed Brigadier Samuel Burston to that post, so Downes' appointment was withdrawn. There the matter rested until March 1941 when Downes was made Inspector-General of medical services by the minister of the army, (Sir) Percy Spender, without reference to the Military Board. While the growth of the army in Australia and of the A.L.F. overseas may well have justified such an appointment, its manner appears to have been highly irregular. Nevertheless, Downes welcomed the opportunity, implicit in the appointment, to visit operational areas.' After inspecting major Australian centres, he went to the Dutch East Indies and Malaya, then on to Egypt, Palestine and Syria and home through India and Ceylon. Early in 1942 he inspected medical units at Port Moresby.

When Blarney reorganized the army in March 1942, he made Burston Director General of Medical Services. Downes went to the Second Army as Director of Medical Services so that he now found himself serving under his recent subordinate and friend of long standing. Though he was in a backwater of the war, his responsibilities extended from the Queensland border to Hobart and Adelaide.' As Downes was almost 60 he was soon to retire, but he was invited to write the medical history of Australia in the war. He accepted enthusiastically and began work on the general outline of the project and obtaining, wherever possible, first hand information on the work of the armed forces. He was actively engaged in this way when he decided to accompany Major General George Vasey to New Guinea to see for himself the front-line conditions in this special phase of warfare.

The Cairns Post reported, 'The remains of Major-General G.A.Vasey, Major-General K.M.Downes and Lt-Colonel G.A.Bertram, who were lost in an air crash off Cairns last Monday, were buried in the military section of Cairns Cemetery yesterday afternoon with full military honours. Troops who had served under General Vasey in many campaigns formed the funeral guard of honour. Just before the cortege arrived the troops reversed their arms, with the muzzles of their rifles on their toes, hands across the rifle butts and heads bowed. Motionless, they stayed like that until the funeral service was over. Opposite the graves stood 100 Officers of the Australian Army and Air Force, many wearing decorations and service ribbons of two wars. The military band with drums draped in black, played a slow, soft funeral march. After the coffins were placed on the wooden supports across the grave tops, General Sir Thomas Blarney, Commander-in-Chief of the Australian Military Forces, and Lieut-General Sir Leslie Morshead stepped in front of the rows of Officers. General Blarney had interrupted his tour of the South-west Pacific area to fly down to Cairns for the funeral service.



General Blamey paid a full tribute to the memory of the soldiers who had died while serving their country. Major-General George Vasey was an original member of my staff through the Middle East, through the desert, Bardia, Tobruk and Cyrenaica. (He) served in Greece (and was) called upon to take over the Australian troops crossing the Kokoda Trail of the Owen Stanley Range in New Guinea. He... was one of our great soldiers, and we loved his special personality.

Major-General Downes, continued General Blamey, was one of those who worked hard for Australia during the time when many forgot that a war could occur. He worked hard to establish and maintain a high standard of efficiency in the Australian Medical Forces. He gathered round him a group of men who, by their research and by their attention to the troops have won the complete confidence of the Army. We are ready to pay service honour to soldiers - I pay tribute to our fallen comrades.'



*The gravestone of  
Rupert Downes,  
war cemetery section  
of the Cairns  
Cemetery, Queensland.*

Downes was survived by his wife and two daughters.' Mrs Doris Downes OBE, OStJ remained an active member of St John Council for Victoria for many years. She died in 1980.

In his dedicated career, Downes won the admiration of the medical profession in peace and war. Whatever his role, whether surgeon, medical historian or commander, he impressed men by his intelligence, his selflessness and his drive. The Royal Australasian College of Surgeons established the triennial Rupert Downes Memorial Lecture in his honour, on 'subjects related to some aspects of military surgery, medical equipment (military and civil), the surgery of children, neurosurgery, general surgery, medical ethics or medical history : these being subjects in which Major-General Downes was particularly interested.' Early orators included Sir Samuel Burston, Sir Frank Kingsley Norris (both eminent St John members) and Sir Albert Coates.

To the amazement and dismay of his colleagues, his services from 1919 until his death were accepted by both the army and successive governments without any mark of distinction being bestowed upon him since he received the CMG in WW L''

The following quote of Colonel Butler hints at the possible reason : 'Both by tradition and by temperament Downes was 'a soldier to his finger tips'; with, I shall add in friendship and deep respect, the strength and the weakness of the outlook on life engendered thereby. From the professional standpoint, and that also of the medical service, this attitude may at times have had its drawbacks. This is not the place to discuss the far-reaching issues involved. But it is necessary to bear in mind this attitude when assessing General Downes's place in Australian history'.'

This final quote is from the citation of the council of the British Medical Association in Victoria recognizing his quality and his contribution to the well-being of Australian soldiers and thus to their success in war: 'His directness, his robustness, his



disdain of intrigue in any form, were his inspirational qualities to a rare degree and the success of the Medical Service in this war must be credited to Rupert Downes'.

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# St John Ambulance Australia Cadets 1925–2005: Celebrating the 80<sup>th</sup> anniversary of the St John Cadet movement in Australia

by Loredana Criniti and Betty Stirton

The authors: Mrs Betty Stirton OAM DSW presented this paper alone because her co-author, Ms Loredana Criniti, who prepared their 'PowerPoint' presentation, was unable to be in Perth for its delivery. Mrs Stirton and Ms Criniti are the co-archivists at St John Archives at Marrickville, Sydney, which they have developed together over a period of more than a decade. Mrs Stirton came into St John Ambulance as an 11-year old Cadet in 1942. Since then she has filled almost every position in the New South Wales St John organisation possible for anyone not qualified as a medical practitioner, nurse or ambulance officer. Thus, she rose to be Deputy Commissioner; she chaired the Community Care Branch in her State; and she has served on her State St John Council Council. She is also a foundation elected committee member of this Historical Society as well as being only the third Australian to hold the St John Service Medal with nine bars. Ms Criniti, an appointed committee member of the Historical Society, was recruited on to the St John paid staff direct from the Marrickville Girls' High School by Mrs Stirton and has since qualified as a professional archivist. As well as archival research, Mrs Stirton's and Ms Criniti's joint speciality as St John archivists is the preparation and mounting of commemorative historical displays.

The value of cultivating support and involvement of children and adolescents in St John is evident from the documents that date back to 1905 when St John Junior First Aid Certificates were issued in New South Wales.

## Cadet Divisions in Australia

December 1925 – Glebe Ambulance Cadet Division was registered. Darlinghurst Ambulance Cadet Division applied for registration, in October 1925 until it was discovered that the Division was no more than a Division on paper and Brigade Headquarters in London cancelled the registration and recognised Glebe as the first Cadet Division to be registered in Australia.



**Table of Cadet Registrations: first Divisions registered in each State/Territory**

YEAR	STATE/TERRITORY	AMBULANCE CADETS	NURSING CADETS
1925	New South Wales	Glebe Ambulance Cadet	
1928	New South Wales		Campsie Nursing Cadet
1930	Victoria	Richmond Ambulance Cadet	
1947	Victoria		South Melbourne & Williamstown Nursing Cadet Divisions
1936	South Australia	Norwood, Prospect & Port Adelaide Ambulance Cadet Divisions	
1937	South Australia		Adelaide No. 1 Nursing Cadet
1936	Tasmania	Hobart No.1 Ambulance Cadet	Hobart No. 1 Nursing Cadet
1936	Western Australia	Fremantle Ambulance Cadet	
1944	Western Australia		Perth Metropolitan Nursing Cadet
1953	Queensland	Milton Ambulance Cadet	
1953	Queensland		Milton Nursing Cadet
1959	Australian Capital Territory	Canberra-Reid Ambulance Cadet	
1961	Australian Capital		Canberra-Lyneham Nursing Cadet
1978	Northern Territory	Alice Springs Cadet Division was the first Cadet Division formed after the Northern Territory separated from South Australia. This and all others that followed with 'Combined', i.e. they enrolled both boys and girls.	

### **Cadet Divisions — a time of change**

1981 – all Cadet Divisions became 'Combined' as males and females were permitted to join the same Division.

1989 – Cadet Divisions removed the word *Combined* from their title.

### **St John Juniors**

1950 – Approval was given for the 8 to 10 years age group to be permitted to join St John, and to be attached to a Cadet Division.

### **Ranks within a Cadet Division**

1947 – Cadet Superintendents and Cadet Officers no longer had to belong to an Adult Division and be seconded to a Cadet Division. They wore the same rank markings as the Adult Officers with the letter "C" on the shoulder strap.

1947 – Approval gained for the new ranks for District Cadet Officer and Lady District Cadet Officer.

1952 – The title Lady for Nursing member appointments was removed.

1975 – Cadet Leaders appointed to Cadet Divisions.

1975 – The first Chief Officer Cadets appointed to National Staff was Ashley Mason from Victoria.



## Cadet Ranks

**Divisional Superintendent (Cadets)**

**Divisional Officer (Cadets)**

**Cadet Leader**

**Cadet Sergeants**

**Cadet Corporals**

**Cadets**

**Juniors**

## Cadet Uniforms

*1926 – Glebe Ambulance Cadets wore St John Armbands.*





**1931 - Uniforms for Ambulance and Nursing Cadets approved.**

*Ambulance Cadets wore white shirt,  
black shorts with side seams piped in white,  
long socks, hat in a Scouts patter.*



*Nursing Cadets wore a white dress, white veil and black stockings.*

**1985 – Female members now wore black skirts, slacks  
or culottes. Uniform frock now not worn.**

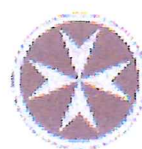


**2005 – Black baseball caps with St John emblem on front  
worn.**



## St John Junior Interest Badges and Grades

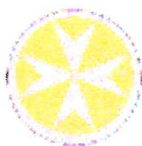
Junior Grade Badges —      Yellow, Grade 3  
    Red, Grade 2  
    Black, Grade 1



GRADE 1  
BADGE



GRADE 2  
BADGE



GRADE 3  
BADGE

First Aid skills are taught and as each level is reached the Badge is awarded.

Sixteen Interest Subjects including Computer Education. The Badges are worn on the left arm of the shirt.

## Proficiency Certificates and Grand Prior's Award

1931 – Introduction of the Grand Prior's Badge with 16 Proficiency Subjects. The first awarded in 1933 to Marion Higgins from New South Wales. In 1973 Coloured Proficiency Badges were introduced. By 1978, 28 Proficiency Subjects were available. In 2006, 38 Proficiency Subjects including Eye Care the newest subject.





## Duties in New South Wales

Since 1933 Cadets have assisted at all major public duties such as ANZAC Day, Royal Agricultural Show, City to Surf Fun Run, 2000 Olympic and Paralympic Games and Federation 2001 just to mention a few.

Radio Communications provides a vital links at all duties.

In 2005 two Cadet Leaders were responsible for setting up a Radio Repeater Station at a notorious 'black spot' at the City to Surf Fun Run.

This Repeater was used to contact NSW Ambulance Service when a runner suffered a Cardiac Arrest.

Due to prompt actions of message relay, the patient was quickly transported to hospital after the initial treatment, and survived.



## Special Service Shield

1947 – The Cadet Special Service Shield required a minimum of 200 hours voluntary service to the community. By 1978 up to 1,000 hours was recognised.

In 1980's coloured shields were introduced for hours of service:

- 200 hours – Red Shield
- 500 hours – Green Shield
- 800 hours – Blue Shield
- 1,000 hours – Yellow Shield.

In the 1990's there were further changes to the Shield and hours:

- 1,200 hours – Yellow + Red Shields
- 1,500 hours – Yellow + Green Shields
- 1,800 hours – Yellow + Blue Shields
- 2,000 hours – White with Red Border Shields
- 2,500 hours - White + Green Shields





## Competitions

In 1968 the first Interstate Competitions (now called National Cadet Competitions) for teams and individual members was held. This was for Ambulance Cadets and held at the Douglas Donald Training Centre, Victoria. Queensland the Team winners and the Individual winner was from South Australia.

In 1969 the first Nursing Cadet Competition was held at HMAS Lonsdale, Port Melbourne. South Australia the Team winners and the Individual winner was from Queensland.

In the 1980's competitors entered competitions together regardless of gender. Cadet Leaders entered the competitions for the first time.

1985 the National Champion Badge awarded to the winning team members, individual and Cadet Leader to wear on their uniforms. 1985 also the first year of the Champion State Award.

2006 National Cadet Competitions have a new format involving practical first aid, written summary, preparation of lesson from First Aid Manual, delivery of lesson etc.

Winners of the 2006 Competitions were the Team from ACT, Individual from South Australia, Cadet Leader from ACT and Champion State was Tasmania.

## Cadet Divisions — Metropolitan and Country

In December 1925 Glebe Ambulance Cadet Division the first Cadet Division to be registered in Australia with 18 Cadets enrolled.

In 2003 the Albury Division registered and decided in 2004 that a key goal was the establishment of a Cadet Division. The Albury Cadet Division was registered in 2005 and 20 Cadets were enrolled by the Chief Officer Cadets Kieran Brown.



*Kieran Brown, Chief Officer Cadets (left) enrolls members in the new Albury (New South Wales) Cadet Division, 2005*

## Finally ...

Cadets leaving St John take with them all the knowledge they have gained into the next phase of their lives.



# 'Jolly good show. Carry on': The St John's Gate emissaries to Australia — from Sir John Hewett in 1928 to Tim Everard in 1991

by Ian Howie-Willis

The author: Dr Ian Howie-Willis OAM KStJ is the Priory Librarian for the Order of St John in Australia, that is the official 'custodian' of the St John heritage in this country. A professional historian, he is the author or co-author of six books and various articles on St John history. His most recent major book on St John was *The Zambuks*, the St John Ambulance Brigade & Operations Branch centenary history published in 2002. He is the secretary of this Historical Society and has presented research papers to all eight of the Society's history seminars. He is currently completing a biography of Rupert Downes, the subject of Dr Allan Mawdsley's paper above. He expects that this book will be published late in 2007 under the title 'Surgeon and General: A life of Major General Rupert Downes 1885-1945'.

## 1. Introduction

In the decades following the late 1920s the Grand Priors of the Order of St John, acting through the Order's Council, sent various delegations to visit branches of the Order that had sprung up in Britain's overseas dominions and territories. In the 63 years between 1928 and 1991 at least seven of these delegations visited Australia. The first, a four-person deputation in 1928-29, was led by the Order's Bailiff of Egle, Sir John Prescott Hewett. The last, in 1991, like all the others that followed Hewett's, was a one-person delegation, the emissary on this occasion being the Order's Secretary-General, Tim Everard.

In addition to the official delegations from St John's Gate (i.e. the Order's London headquarters), there have been numerous other private visits made by high office holders of the Order and/or the St John 'Foundations' who have come to Australia as tourists, on private business and in the case of members of the Royal family during Royal tours. When in Australia such people often make contact with the Australian and/or State or Territory head offices in the seven capital cities. Typically, they will visit the local head office, meet the local office holders and perhaps even see the St John Ambulance workers in action.

The range of dignitaries making such visits has ranged from members of the Royal Family including the Order's Sovereign Head, HM Queen Elizabeth II, many times since 1954, the late Princess Margaret in 1974 and Princess Anne in 1975; the last two Grand Priors, Henry Duke of Gloucester (who was Governor-General of Australia 1945-46) and his son and successor, Richard Duke of Gloucester; five Lord Priors — Lord Wakehurst, Sir Maurice Dorman, Lord Cathcart, Lord Vestey and Mr Eric Barry; and various representatives of the St John Foundations.



*The 1946 visit by Edwina Lady Mountbatten (née the Hon. Edwina Ashley), the Brigade Superintendent-in-Chief. Lady Mountbatten (centre) chats with (among others) Commander R. Griffiths Bowen (Priory Secretary, left), Sir Hugh Poate (Priory Chancellor, 3rd left), Colonel Alex Christie (later first Chief Superintendent) and Dr Frances McKay (later first Chief Superintendent Nursing (2nd from right) in Sydney.*



The last group included Edwina Lady Mountbatten, Brigade Superintendent-in-Chief, in 1946; H.S. Taylor-Young, Brigade Surgeon-in-Chief, in 1963; Lieutenant-General Sir William Pike, jointly Brigade Commissioner-in-Chief and Director of the St John Ambulance Association, in 1969; John Webb, the General Manager of Stores, in 1969; and Sir Stephen Miller, the Hospitalier, in 1991.

The general purpose of the official delegations was to fly the St John flag around the Order's far flung overseas outposts, all of which were located in those lands that until the 1950s were so reassuringly coloured red on maps of the world — those making up the British Empire. There were other reasons for the visits. Thus, the delegations enabled the Council to keep in touch with the proliferating worldwide St John organisation. They helped promote the St John cause in the dominions. They helped local St John people, particularly key decision-makers, understand the views of the Order's leadership on important issues. They served to maintain the dignity of the Order by impressing upon its local representatives that its most precious assets were its good reputation and its respectability as a royal order of chivalry. They enabled the Order's London-based leadership to determine the extent to which the overseas St John branches were meeting the Order's objectives. They encouraged the effort of the local St John workers and, where necessary, pulled wayward local branches back into line.

Among these purposes was another that was arguably as important as all the others combined. This was the inspectorial function. Like Her Majesty's School Inspectors in times past, whose primary function was quality control of the schools and teachers within public education systems, the St John's Gate emissaries came to inspect. That is, they examined current practice, assessed performance, made critical appraisal of work standards and reported their findings to higher authority. Here the analogy ends, however, for unlike the teachers in whose classes HM's Inspectors sat for an hour or two annually, those whom the St John's Gate delegates visited seem to have remained blissfully unaware that inspection was the primary but hidden agenda. The function was rarely stated to those receiving the emissaries. It was not apparent in the public reports of their tours that some emissaries published later. It only emerges explicitly in the private correspondence between the delegates and their fellow senior officeholders back at St John's Gate and in the confidential unpublished reports they submitted to the Grand Priors and the Order's Council.

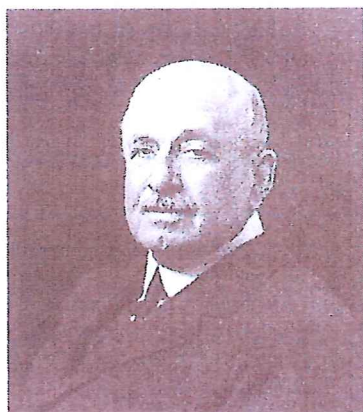
## 2. Dramatis personae

This paper will now demonstrate the functions served by the emissaries by examining the visits that seven of them made to Australia. Those whose visits will be discussed were:

- a) Sir John Prescott Hewett, Bailiff of Egle, in 1928–29
- b) Colonel (later Sir) James Sleeman, Commissioner in Chief of the St John Ambulance Brigade 'Overseas', in 1935–36
- c) Sir Otto Lund, Commissioner in Chief of the St John Ambulance Brigade, in 1955
- d) Lord Wakehurst (John de Vere Loder, 2<sup>nd</sup> Baron Wakehurst), the Order's Lord Prior, in 1966
- e) Rear-Admiral Royer Dick, Commissioner in Chief, St John Ambulance Brigade, in 1967
- f) Marjorie, Countess of Brecknock, Superintendent-in-Chief of the St John Ambulance Brigade, in 1969
- g) Tim J. Everard, Secretary-General of the Order, in 1991.

But before we consider their inspectorial visits, let's see who they each were. What they had in common is that they were all members of the English 'ruling class' — the titled, decorated members of Britain's upper social strata recruited into St John because of their 'Establishment' connections in the nobility or the 'meritocracy' of former colonial administrators, senior military officers and diplomats. Briefly, the background of each was as follows:

### a) Sir John Prescott Hewett GCSI, KBE, GCStJ



*Sir John Prescott Hewett (1854–1941).*

J.P. Hewett (1854–1941) spent most of his working life as a colonial official in India. Born in Kent, he was the son of an Anglican vicar. After schooling at Winchester College and university at Balliol College, Oxford, he entered the Indian civil service in 1877. He spent the next 35 years in India, rising from assistant magistrate and revenue collector to regional chief commissioner, departmental head and provincial governor. Observing that he was 'an ambitious man, keen to rise above the ruck of the civil service', his biographer quoted the viceroy Lord Curzon, who thought him 'an able, plausible, self-seeking, not too loyal individual who plays for his own hand'.<sup>1</sup> Despite his misgivings about Hewett, Curzon promoted him and was 'pleasantly surprised by his administrative ability and efficiency'.<sup>2</sup> During a posting to the Himalayan foothills, Hewett became an enthusiastic big-game shooter. He was often at his desk soon after 4.00 a.m. to get his day's work done early so as to be able to spend the rest of the daylight hours hunting tigers in the nearby jungles.

<sup>1</sup> Katherine Prior, 'Hewett, Sir John Prescott' in H.C.G. Matthews and Brian Harrison (eds.), *Oxford Dictionary of National Biography* volume 26 (Oxford, Oxford University Press, 2004), p. 911.

<sup>2</sup> *Ibid.*



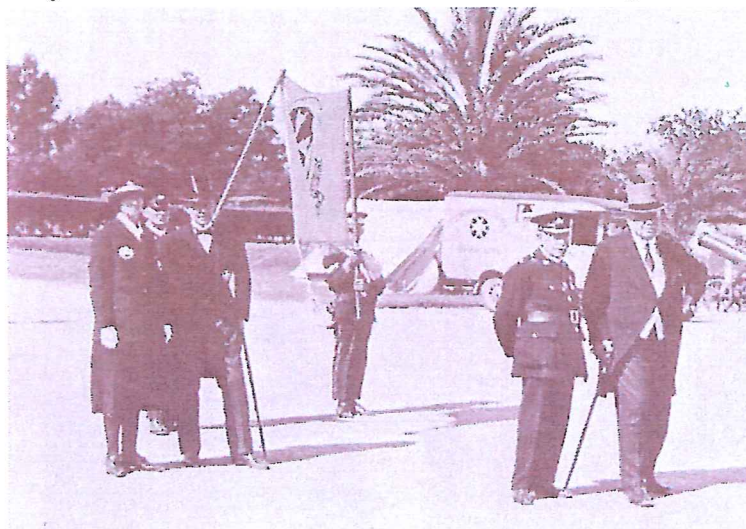
In late life he published a lively book, *Jungle Trails in Northern India: Reminiscences of Hunting in India*, describing his favourite blood sport. For his services to colonial government in India, Hewett was knighted in 1907 in the now defunct imperial order, the Most Exalted Order of the Star of India, in which four years later he was promoted Knight Grand Commander (GCSI). In 1917 he was knighted a second time, awarded a KBE for chairing the Indian Soldiers' Fund during World War I.<sup>3</sup>

After retiring home to the UK in 1912, Hewett devoted his time to his business interests and to various good works. He became chairman of various companies owning tea and rubber plantations in Assam; he became the founding chairman of governors of the School of Oriental and African Studies (a college of London University); he spent a two-year term as the Unionist (Conservative) member of parliament for Luton; and he was recruited into the Order of St John, in which he was appointed Bailiff of Egle. The last of these positions made him one of the five 'Great Officers' of the Order (the others being the Grand Prior, the Lord Prior, the Prelate and the Chancellor) and, ipso facto, conferred on him membership of the Order at the highest grade, Bailiff Grand Cross (GCStJ). Like the former Grand Priory itself, the position of Bailiff of Egle later became a casualty of the reforms to the Order's statutes in 1999. The position was a quaintly named one, its title derived from one of the officials of the ancient Order of Knights Hospitaller in Britain, the head of the Order's Commandery at Egle in Lincolnshire.<sup>4</sup> As the Order's Great Officers generally held their positions at the Grand Prior's pleasure, Hewett remained Bailiff of Egle until his death.



*Sir John Prescott Hewett,  
Bailiff of Egle  
in the Order of St John.*

On his trip to Australia in 1928–29 Hewett was accompanied by three other delegates — his younger daughter, Mrs Lorna Atkinson DStJ, who had lost her husband during World War I, Major Colin MacRae KStJ and his wife Lady Margaret MacRae DStJ. The delegation reached Perth on 27 November 1928 then visited every State. On medical advice the MacRaes quit the delegation in Melbourne in mid-December and returned to England because Lady Margaret had been suffering from heat exhaustion in Australia's hot summer sun. Sir John and his daughter then continued on together and spent the next four weeks visiting Tasmania, New South Wales and Queensland before moving on to New Zealand.



On medical advice the MacRaes quit the delegation in Melbourne in mid-December and returned to England because Lady Margaret had been suffering from heat exhaustion in Australia's hot summer sun. Sir John and his daughter then continued on together and spent the next four weeks visiting Tasmania, New South Wales and Queensland before moving on to New Zealand.

Hewett's biographer describes him as 'a solid, heavy-jowled man [who] looked the very essence of a colonial administrator [and] enjoyed a reputation for generous and cordial hospitality'.<sup>5</sup>

*Lorna Atkinson (left) & Sir John Hewett (right) at a Brigade review on the Torrens military parade ground, Adelaide, 1929. Immediately to the left of Hewett is George Hussey, the South Australian Commissioner.*

When he was 25 he had married the daughter of an official of the Bengal civil service and they had a son and two daughters. The marriage does not seem to have been happy, as a result of which his widowed daughter Lorna rather than his wife became his 'chief companion'.<sup>6</sup> In retirement he lived in Chipping Warden, a village in Northamptonshire in the English midlands. His *Who's Who* entry listed no recreations — he was too portly for that, and his tiger-hunting years were long gone — but listed the Carlton and the Oriental as his clubs.<sup>7</sup>

<sup>3</sup> *Ibid.*; and also *Who Was Who Volume IV: A companion to Who's Who containing the biographies of those who died during the decade 1941–1950* (London, A & C Black, 1967), p. 535.

<sup>4</sup> The name came from the Hospitallers' commandery of Egle (or Eagle) in Lincolnshire. The Commandery of Egle had once belonged to the Knights Templar, but when that order was dissolved in 1312 the property passed to the Hospitallers. The Hospitallers' commander at Egle was called the Bailiff. (This information is from the website of the Priory in the United States of America of the Order, [www.saintjohn.org](http://www.saintjohn.org); see 'History: The Early British Knights', p. 2.) Why the Most Venerable Order should have adopted the title when it formed during the nineteenth century is not certain; however, by reviving the title the Order's leaders possibly hoped to enhance the Order's legitimacy as the Hospitallers' rightful heir in Britain.

<sup>5</sup> Katherine Prior, *op. cit.*, p. 913.

<sup>6</sup> *Ibid.*

<sup>7</sup> *Who Was Who Volume IV, loc. cit.*



b) Col. Sir James Lewis Sleeman Kt., CB, CMG, CBE, MVO, KJ[ustice]StJ and Knight of the Sovereign Military Order of Malta

J.L. Sleeman (1880–1963) had been a career army officer. He was from a military family of Cornish origin. His father had been a captain in the 16<sup>th</sup> (Queen's) Lancers and his grandfather was Maj-Gen William Henry Sleeman (1788–1856), the army officer and colonial administrator who had suppressed the murderous cult of thuggee in India. He entered the army in 1899 and subsequently saw active service in the South African War and on the western front during World War I. In addition he filled a series of military command, training, staff and attaché positions, including attaché to the Japanese Fleet 1916–18, chief of staff of New Zealand forces 1919–21 and commanding officer of the 160<sup>th</sup> (South Wales) Infantry Brigade of the Territorial Army (i.e. army reserve) 1931–35.<sup>8</sup>



Colonel Sir James Sleeman  
(1880–1963) in military uniform without hat;

On retiring from full-time army service in 1930, Sleeman was recruited into the St John Ambulance Brigade as Commissioner-in-Chief of the Brigade Overseas (i.e. beyond the UK). He held the position for the next 20 years until reaching the then compulsory Brigade retiring age of 70 in 1950. During his two decades of Brigade service, he took his duties very, very seriously. He travelled overseas often and much more extensively than any other St John's Gate official before or since. The travelling began with his eight-month 1935–36 marathon, which took him through some 82,560 kilometres by ship, train, car, plane and canoe through South Africa, Rhodesia (Zimbabwe), Australia and New Zealand. In that time he attended no fewer than 988 official engagements, the tally including 204 Brigade inspections, 363 speeches and addresses, 130 mayoral and civic receptions, 162 other public functions, 87 conferences, 26 investitures and 16 radio broadcasts. Eventually he made ten official tours of inspection overseas, the countries he visited reading like a roll call of the British Empire — India, Pakistan, Burma, Ceylon, Malaya, Singapore Hong Kong, Canton, Canada, Kenya, Uganda, Tanganyika, Zanzibar, Malta, St Helena, the West Indies, the British West African colonies, Egypt, Palestine, Cyprus, Gibraltar, Aden and Sudan.<sup>9</sup>

The positive outcomes of Sleeman's touring were impressive. His tours created huge public interest in St John work, and nowhere more so than in Australia, where he was received like royalty. During his time as Commissioner-in-Chief membership of the Brigade Overseas grew from 12,000 to 77,000. In enumerating his achievements, the historian of the Brigade 'At Home' described him thus:

An engaging extrovert, he was always impeccably dressed in frock-coat with medals, plumed hat and more often than not carried a cane; his neat, spare figure and austere bearing were immediately recognisable. He carved the dates and countries of each tour on his cane — constituting a unique record of Brigade service.<sup>10</sup>

Away from his duties as Brigade Overseas Commissioner-in-Chief, Sleeman had many other interests. A Catholic, he was a Knight within the Sovereign Military and Hospitaller Order of Malta, that is, he was a member of two of the five recognised Orders of St John. He was honorary colonel of the 602 HAA Regiment of the Royal Artillery 1935–60, Commandant of the Gloucestershire Special Constabulary 1939–48, County Commissioner for St John Ambulance in Gloucestershire at the same time as being Commissioner-in-Chief, a Justice of the Peace, a Fellow of the Royal Geographical Society, the County Commissioner for Herefordshire of the Boy Scouts and the author of various books on military training and several on the cult of thuggee suppressed by his grandfather. In 1908 he had married Frances Mary Howell, who bore him three sons and a daughter, shared his interest in St John Ambulance and became a Dame of the Order. They lived in Painswick, a village in Gloucestershire on the western flanks of the Cotswold Hills.<sup>11</sup>



Colonel Sir James Sleeman:  
a better known portrait — in his ornate Brigade uniform  
with plumed cocked hat.

<sup>8</sup> Biographical information is from *Who Was Who Volume VI: A companion to Who's Who containing the biographies of those who died during the decade 1961–1970* (London, Adam & Charles Black, 1972), p. 1043.

<sup>9</sup> Col. J.L. Sleeman, *Report on the Inspectional Tour of Australia* (London, Order of St John, 1936), p. 97.

<sup>10</sup> Ronnie Cole Mackintosh, *A Century of Service to Mankind: A History of the St John Ambulance Brigade* (London, Century Benham Ltd, 1986), p. 105.

<sup>11</sup> *Who Was Who Volume VI*, p. 1043.



c) Sir Otto Marling Lund KCB DSO KStJ

O.M. Lund (1891–1956) was, like Sleeman, a career army officer; and like Hewett, he was schooled at Winchester College but then entered the Royal Military Academy at Woolwich. He was commissioned as an artillery officer in 1911 and then saw service in France during World War I. By the end of the war he was a major then afterwards served in a series of staff, training and administrative positions. His service included tours of duty in North Russia and India. In 1922 he married Margaret Harrison, by whom he had a son and a daughter. They lived in central London in fashionable Belgravia.

By the outbreak of World War II Lund was a Major-General in the Royal Artillery and eventually became director of artillery at the War Office. By the time of his retirement in 1948 he was the commanding officer of Anti-Aircraft Command. He was recruited into St John Ambulance in 1951 on Sleeman's retirement. At that stage the separate 'Home' and 'Overseas' commands of the Brigade were combined, and so Lund became the worldwide Brigade Commissioner-in-Chief. Like Sleeman, he regarded the visitation of overseas Brigade establishments as an important part of his duties and in the six years he held the position he made annual excursions abroad. In 1955 he toured all Australian States but died suddenly the following year.<sup>12</sup>



Sir Otto Lund (1891–1956), the Commissioner-in-Chief (left) meets the founder of the Brigade in the Northern Territory, Norman Bradbury (right). Looking on is the District Surgeon (and later Commissioner) in South Australia, Dr John Pedler.

d) John de Vere Loder, 2<sup>nd</sup> Baron Wakehurst of Ardingly KG, KCMG, GCStJ



John de Vere Loder,  
2<sup>nd</sup> Baron Wakehurst of Ardingly (1895–1970):  
The portrait in the Chapter Room at St John's Gate.

Lord Wakehurst (1895–1970) was a military officer, parliamentarian and dominion governor. He was the only son of the 1<sup>st</sup> Baron and Lady Louise de Vere Beauclerk, the oldest daughter of the 10<sup>th</sup> Duke of St Albans. In 1920 he married Margaret Tennant, the daughter of a Scottish baronet, by whom he had three sons and a daughter. They lived in Brompton, a section of the suburb of Chelsea within the bounds of the prestigious 'SW1' post code.<sup>13</sup>

John Loder, as he then was, had been educated at Eton College and seemed destined for Trinity College at Cambridge, where he hoped to become an Egyptologist. His mother encouraged this ambition because she thought he was the reincarnation of the Pharaoh Thotmes III.<sup>14</sup> He was a bright scholar, interested in the stage and history (as well as Egyptology) and was an excellent student of French and German; however, instead of going to university he was commissioned in the 4<sup>th</sup> Royal Sussex Regiment. He then served at Gallipoli and in Egypt and Palestine. After the war he worked as a Foreign Office clerk for three years and then for two years for the League of Nations.

<sup>12</sup> Biographical information is from *Who Was Who Volume V: A companion to Who's Who containing the biographies of those who died during the decade 1951–1960* (London, A & C Black, 1964), p. 681.

<sup>13</sup> Biographical information is from *Who Was Who Volume VI: A companion to Who's Who containing the biographies of those who died during the decade 1961–1970* (London, Adam & Charles Black, 1972), p. 1158.

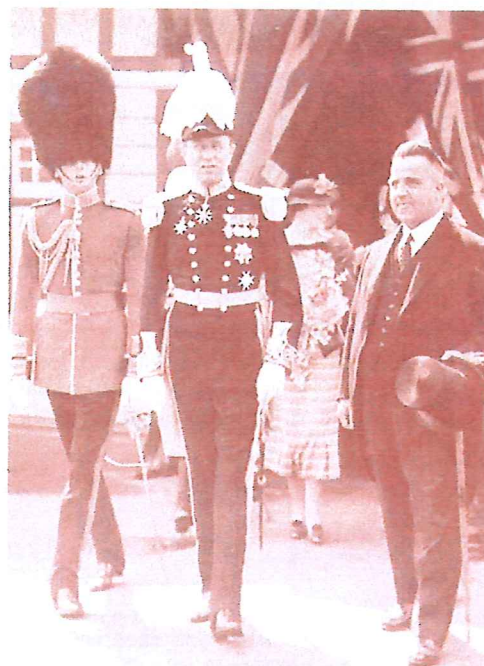
<sup>14</sup> Chris Cunneen, 'Wakehurst, John de Vere Loder, 2<sup>nd</sup> Baron', in John Ritchie and Diane Langmore (eds.), *Australian Dictionary of Biography Volume 16 1940–1980 Pik–Z* (Melbourne, Melbourne University Press, 2002), p. 462.



He entered the House of Commons as a Unionist (Conservative) in 1924 and remained a parliamentarian until inheriting his father's barony in 1936.

The next year he was appointed Governor of New South Wales, where he became the last of a long line of 28 'imported' or imperial governors.<sup>15</sup>

In Australia the Wakehursts enthusiastically involved themselves in the local scene and proved a popular vice-regal couple. They had already visited Australia as a young married couple in 1924. Their three sons attended school in Australia and the oldest joined the Royal Australian Navy and served on HMAS Australia during World War II, while their daughter trained as a social worker. A month before the outbreak of the war Lord Wakehurst competently handled a constitutional crisis when he appointed the Treasurer, Alexander Mair, as Premier after the previous Premier, Sir Bertram Stevens resigned following a censure motion. In 1940 the Wakehursts helped fight a bushfire near Bowral. His Conservative background notwithstanding, Lord Wakehurst and the later wartime Labor Premier, William John McKell,<sup>16</sup> worked closely together. During the war Lord and Lady Wakehurst vigorously participated in the Australian war effort and in 1945 visited the Australian troops in the south-west Pacific accompanied the army commander-in-chief General Sir Thomas Blamey.<sup>17</sup>



Lord Wakehurst as Governor of New South Wales 1936-45: Lord Wakehurst (centre) with his aide (left) and the NSW Premier, Sir Bertram Stevens (right), 1936.



Lord Wakehurst also played a critical role in the St John Ambulance federal movement in Australia, as pointed out in an earlier paper of mine.<sup>18</sup> Briefly, he became the Deputy Knight Commander for New South Wales in the forerunner of the Australian Priory of the Order, the Commandery of the Australian Commonwealth (Exclusive of Western Australia), at its inception in 1941. Before that he had worked on the Commandery's constitution with his fellow Governors and the leaders of the St John organisation in New South Wales, and he then participated in the key meetings that brought the Commandery into existence. With the Knight Commander, the Governor-General, Lord Gowrie, he also attended the inaugural meeting of the Commandery Council at Admiralty House, Sydney, on Monday 19 January 1941. On Gowrie's departure in January 1945, Wakehurst succeeded him as Knight Commander, in which capacity he presided over a special Chapter meeting of the Commandery at Admiralty House on 27 April 1945 at which the new Governor-General (and Grand Prior of the Order), Henry Duke of Gloucester, presented a ceremonial sword to the Commandery — the same sword still carried in capitular processions of the Australian Priory.<sup>19</sup> Six weeks after this the Wakehursts returned home to the UK, having spent eight years in Australia.

The Governor-General and Grand Prior of the Order, Henry Duke of Gloucester (left front) presents the ceremonial sword of the Order to Lord Wakehurst (right front) at a special Chapter meeting, 27 April 1945. Lord Wakehurst received the sword as Knight Commander of the Commandery of the Commonwealth of Australia (Exclusive of Western Australia) of the Order of St John. The Commandery (and later Priory) Secretary, R. Griffiths Bowen, stands at the rear between them.

<sup>15</sup> *Ibid.*

<sup>16</sup> McKell (1891–1985) was Premier of New South Wales May 1941–February 1947. Appointed Governor-General of Australia, he served six years in the position, from March 1947 until May 1953. As such he became the second Prior of the Order of St John in Australia. He was personally knighted (GCMG) by King George VI at Buckingham Palace in 1951.

<sup>17</sup> Cunneen, *loc. cit.*

<sup>18</sup> See Ian Howie-Willis, 'The Federal Movement in St John Ambulance in Australia' in *St John History: Proceedings of the St John Ambulance Australia Historical Society* vol. no. 3 (2003–04).

<sup>19</sup> *Ibid.*, pp. 40–46.



Wakehurst's Australian biographer wrote about him and his wife as follows:

Tall, red-haired and blue-eyed, with a slight stammer, he was active, ruddy-complexioned and companionable, an outdoor man, interested in travel. His wife described him...as 'not demonstrative' but 'loyal and kind'. She was tall, brown-haired and brown-eyed, with a clipped English manner of speech....She won praise for her competence, dignity and charm....Both proved able vice-regal representatives.<sup>20</sup>

At home once more, Lord Wakehurst, who was still only 50, embarked on a new career of public service, as did Lady Wakehurst. She became active in charitable work and was president of the National Schizophrenia Fellowship for many years until 1984, by which time she was in her mid-80s. For such work she was appointed a Dame of the British Empire in 1964. On returning to the UK, he gave lectures on Australia using colour movies he had taken himself. He spent 12 years as Governor of Northern Ireland 1952-64, in recognition of which the Queen appointed him a Knight of the Garter in 1962. Devoted to the theatre, he served as a trustee of the Royal Opera House at Covent Garden 1949-57 and a governor of the Royal Ballet from 1957 until his death. He published six books of political comment and travel writing; and using the pseudonym 'Cornelius Cofyn' wrote thrillers with a co-author.<sup>21</sup>

From the St John Ambulance perspective, however, Lord Wakehurst's greatest public contribution was the long 21-year period he spent 1948-69 as Lord Prior of the Order. During this time the Order took major forward steps by entering into the 'Alliance' with the three Johanniter Orders (of Germany, the Netherlands and Sweden) in 1961 and by forming a pact of mutual recognition with the Sovereign Military and Hospitaller Order of Malta in 1963. In addition, this was the period when the new Priories in Scotland and Wales and the former dominions of Australia, Canada, New Zealand and South Africa became firmly established.

#### e) Rear-Admiral Royer Mylius Dick CB, CBE, DSC, GCS&J

R.M. Dick (1897-1991) was a career naval officer before coming to St John in 1957 to succeed Sir Otto Lund. He served the Order for 15 years, first as Deputy Commissioner-in-Chief 1957-62 then as Commissioner-in-Chief 1967-72. He became a Knight of the Order in 1961 and was promoted to Bailiff Grand Cross in 1967, the year he toured Australia.

Dick was educated at the Royal Naval Colleges at Osborne and Dartmouth then went to sea as a 17-year old midshipman in 1914 at the outbreak of World War I. During the war he served at Jutland, the Falklands and North Russia and ended the war as a Lieutenant. Through the inter-war years he moved steadily upwards, becoming a Commander in 1933, Captain in 1940 and Commodore in 1942.

He commanded the battle cruiser HMS Belfast, one of the most famous ships of World War II (and now a floating museum on the Thames south bank), during the last two years of the war. After the war he served in a series of Admiralty positions, was promoted to Rear-Admiral in 1949 and from 1953 until his retirement two years later was acting Vice-Admiral. At the time of his retirement he was the naval liaison officer to the North Atlantic Council. In 1928 he married Agnes Harben, who bore him a son (killed on active service during the war) and a daughter. In the year of his retirement he married again, to Vera Pott (née Henry). They lived in Headbourne Worthy, a village near Winchester in Hampshire.<sup>22</sup>



The Commissioner-in-Chief, Rear-Admiral Royer Dick (1897-1991) meets his Australian Chief Commissioner, Sir F. Kingsley Norris (2nd right), 1967. Douglas Donald (Chief Surgeon, left) and Geoffrey Newman-Morris (Victorian Commissioner) also enjoy the moment.

<sup>20</sup> Cunneen, *loc. cit.*

<sup>21</sup> *Ibid.*

<sup>22</sup> Biographical information is from *Who Was Who Volume IX: A companion to Who's Who containing the biographies of those who died during the decade 1991-1995* (London, A & C Black, 1996), p. 143.



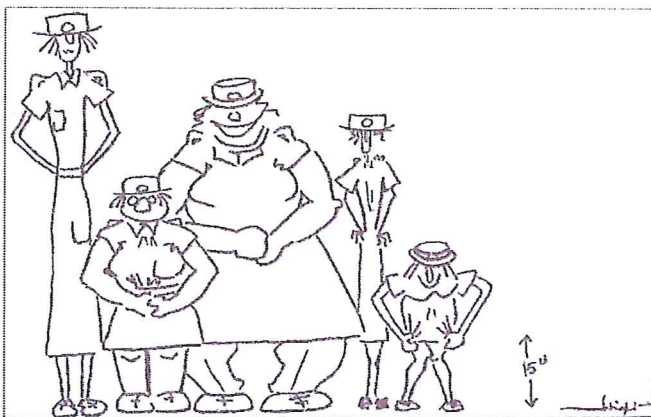
f) Marjorie Minna Pratt (née Jenkins), Countess of Brecknock DBE, GCStJ

Lady Brecknock (1900–1989), was the divorced wife of John Charles Henry Pratt (1899–1983), Earl of Brecknock and later 5<sup>th</sup> Marquess of Camden, whom she had married in 1920 and by whom she had one son, later the 6<sup>th</sup> Marquess Camden. She was also known formally as the 5<sup>th</sup> Marchioness Camden but the title she used was the Countess of Brecknock or more simply Lady Brecknock.

She was the only child of Col. Atherton Edward Jenkins and his wife Anna Schönbrunn (later Cassel) of Wherwell Priory near Andover, Hampshire, and had been educated at home and at the Heathfield School, Ascot. Immediately before the war she had spent two years, 1937–39, as Lady-in-Waiting to a member of the Royal family, Princess Marina, the Duchess of Kent. After her divorce she returned to live at Wherwell Priory, where her recreations were gardening, shooting and fishing.<sup>23</sup>

Lady Brecknock's career of public service began early in World War II, when she joined the Women's Auxiliary Territorial Service (ATS, i.e. women's home army), in which the present Queen also served. After rising quickly through the ATS ranks to Senior Commander level (equivalent to a major in the army), in 1944–45 she served as the senior ATS officer attached to the Supreme Headquarters Allied Expeditionary Force, whose head was General Dwight D. Eisenhower, the later US President. After the war she spent six years, 1948–54 as the commanding officer (equivalent to colonel) of 310 (Southern Command) Battalion of the Women's Royal Army Corps, the successor to the ATS.

*Lady Brecknock's comments on uniform hemlines were "like a breath of fresh air" for the younger women of the Brigade in Australia. This was one Queensland Nursing Division member's view of the "15-inch hemline" rule.*



*Marjorie, Countess of Brecknock (1900–89), the Superintendent-in-Chief of the St John Ambulance Brigade (left) discusses the length of Brigade women's skirts with Sergeant J. Grove of Adelaide, 1969. (It was the era of the mini-skirt.)*

In 1950 Lady Brecknock joined the headquarters staff of the St John Ambulance Brigade in 1947 and in 1950 was appointed Controller of its Overseas Department, when Sir James Sleeman had still been the Commissioner-in-Chief (Overseas). In 1960 she succeeded her cousin and childhood friend, Lady Louis Mountbatten, the former Hon. Edwina Ashley, as the Brigade's Superintendent-in-Chief when 'Lady Louis' died in 1960. (In 1961 she published a biography of Lady Mountbatten.) She spent the next ten years in the position, after which she served for another 11 years, 1972–83, as Chief President of the Brigade. She had become a Dame of the Order in 1958 and was promoted to Dame Grand Cross (GCStJ) in 1971. In all, she spent 37 years in St John. Appropriately enough, a large brass memorial plaque commemorating her service to the Order has been placed on the oak-panelled walls of the Council Chamber at St John's Gate, along with similar plaques for other luminaries of the Order.<sup>24</sup>

<sup>23</sup> Biographical information is from *Who Was Who Volume VIII: A companion to Who's Who containing the biographies of those who died during the decade 1981–1990* (London, A & C Black, 1992), p. 89.

<sup>24</sup> *Ibid.*, and Mackintosh, *op. cit.*, pp. 68, 127.



### g) Timothy John Everard CMG, KStJ

T.J. Everard (1929–) had been a career diplomat. He became Secretary-General of the Order in 1988 on retiring from the UK diplomatic service, was immediately admitted to the Order in the grade of Knight and spent the next five years 1988–93 in the position. After secondary education at the Uppingham School, a 400-year old public school in the rural English midlands, he had gone on to Magdalen College at Oxford, from which he graduated with a BA degree in modern languages.

After university, Tim Everard (as he was commonly known) spent ten years 1952–62 working for Barclays Bank, his service including a series of African postings, in Egypt, Sudan, Kenya and Zaire. He then entered the diplomatic service. Over the next 26 years he rose through Foreign Office ranks to ambassador level, his last position before joining the Order having been four years as the ambassador to the German Democratic Republic (i.e. the former Communist East Germany). In the meantime he had held increasingly senior consular positions in Bangkok, Bahrain, Hanoi, Athens, Paris, Lagos and the Northern Ireland Office. He had married Josiane Romano in 1955; they had two sons and two daughters; his recreations included golf and tennis; his club was the Reform; and in retirement he lived near Crowborough in rural East Sussex.<sup>25</sup>

### 3. Purposes of the delegations

Now we know who the delegates were, let's answer the two key questions we can ask about their visits — why were they sent to Australia and what did they later say about the Australian St John organisation? Again, we'll answer these questions by referring to each delegation in turn. First the matter of why the delegations came.

The Hewett delegation<sup>26</sup> came to investigate Australia's abortive first attempt at creating a national federal St John organisation, the short-lived and eminently unsuccessful Central St John Council for Australia.<sup>27</sup> This body, largely the creation of Dr Thomas Storey Dixon, the Brigade Commissioner in New South Wales, had been created in 1920. It only ever met on two occasions and achieved little though it had big ambitions. Even if its lack of funds or power to implement its decisions had not limited its usefulness, its failure to gain the full support from all the State Brigade and Association organisations crippled it from the start. Critical to its failure was its close identification with Dixon, so controversial a character that under his leadership its ultimate demise was almost inevitable.

The Sleeman delegation<sup>28</sup> followed up on the findings of the Hewett delegation by determining how ready Australia was for a Commandery of the Order, that is a federal self-governing organisation to bring the disparate and at times mutually hostile State Brigade and Association bodies under the one national St John umbrella.

The Lund delegation came to inspect the Brigade a decade on from its glory days in World War II, when relative to population the Brigade had achieved its greatest strength. On taking up his position as Commissioner-in-Chief in 1951, Lund had taken on the functions of both the Commissioners-in-Chief of the Brigade 'At Home' (i.e. in the UK) and 'Overseas' (in the dominions and colonies). As had Sleeman, who had the Commissioner-in-Chief for the Brigade 'Overseas' for 15 years, Lund endeavoured to visit the overseas branches of the Brigade regularly; and, again as with Sleeman, his tour of Australia in January–March 1955 was only one of a series of such expeditions he undertook in his five years as Commissioner-in-Chief.

The principal task of the Wakehurst delegation during January–March 1966 was the laying of the foundation stone of the new Priory headquarters building in Canberra on 29 January 1966. However, as Wakehurst spent about six weeks in Australia and visited six of the mainland States/Territories, he used his time here to check the general health of the national organisation 20 years after its formation. As will soon be seen, Wakehurst diagnosed perceptively.

The Dick delegation, like that of Lund, was to inspect the Brigade as it was reaching its numerical peak in Australia. Neither Dick nor the Brigade hierarchy in Australia was to know this: almost 40 years on it is only with the 20/20 vision of hindsight that we can see that from the late 1960s the Brigade and Operations Branch began declining in both absolute numbers and relative to national Australian population.

The Brecknock delegation was another that came to inspect the Brigade. It came at a time of rapid social change, one of the key aspects of which was the rise of the feminist movement of the late 1960s and the 70s. Lady Brecknock might not have

<sup>25</sup> Biographical information is from *Who's Who 2005: An annual biographical dictionary* (London, A & C Black, 2005), p. 701.

<sup>26</sup> The most recent account of the Hewett delegation has been: Ian Howie-Willis, 'The Federal Movement in St John Ambulance in Australia', *op. cit.* pp. 37–38. The delegation's report was published as: Hewett, J.P. and Atkinson, Lorna, *Report to Chapter-General by the delegation authorized under the direction of H.R.H. the Grand Prior to visit the Dominions of Australia and New Zealand 1928–29* (London, Order of St John, 1929).

<sup>27</sup> The most recent account of the Central St John Council for Australia has been: Howie-Willis, *loc. cit.* pp. 35–37.

<sup>28</sup> The most recent account of the Sleeman delegation has been: Howie-Willis, *loc. cit.*, pp. 38–39.



come as the intentional harbinger of change but 37 years later we can appreciate that through her influence the lot of women in the Australian St John organisation took a quantum leap forward.

The Everard delegation came at a time of rapid change within St John Ambulance Australia as the organisation was still bedding down its structural reforms of the late 1980s while also withdrawing from its 40-year involvement in the South Australian State ambulance system.

#### 4. Activities and findings

The activities of the seven delegations were so many and varied that all we have time for now are the briefest of summaries. Again, we will treat them in turn, focussing now on what they had to say about their hosts.

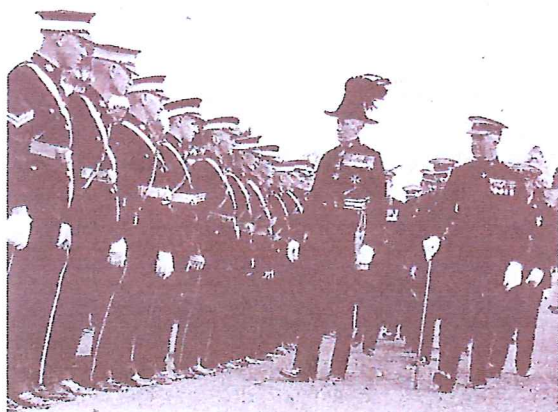
##### a) The Hewett delegation

The Hewett delegation has attracted much attention over the past 23 years, mainly because of the research carried out by the Order's Australian historians. Its activities have been so comprehensively written up in the various Priory and State histories and in this Historical Society's own journal that I will not dwell on its findings. Suffice to say that Hewett found that the Central St John Council was serving no good purpose, was already effectively dead and should be formally abolished. Perhaps in deference to its founder, Dr T.S. Dixon, its closure was delayed for another three years, until after Dixon had died in 1932.<sup>29</sup>

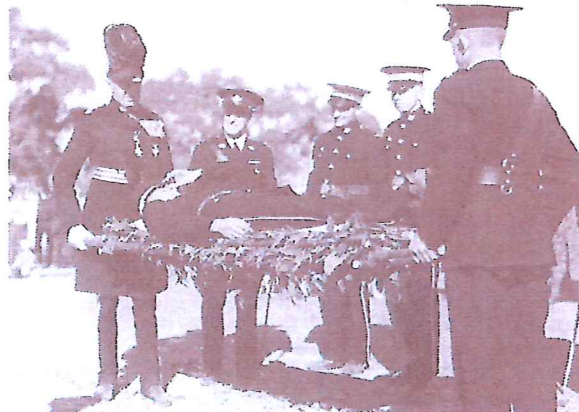
##### b) The Sleeman delegation

The Sleeman delegation, like the earlier Hewett delegation, continues to arouse interest among Australian historians of the Order. One reason for this is that it was Sleeman's visit that ultimately led in 1941 to the formation of the first effective federal St John organisation, the Commandery of the Commonwealth of Australia (Exclusive of Western Australia), the forerunner of the present Priory. As with the Hewett delegation, Sleeman's travels in Australia and the subsequent published report of his tour have been so extensively covered in the Australian St John histories that I need not repeat his findings here. All that need be said is that Sleeman's report and his continuing correspondence with key St John figures in Australia gave the St John's Gate hierarchy confidence that despite Australia's vast distances and small, widely dispersed population the Australians could be entrusted with their own self-governing federal Commandery of the Order.<sup>30</sup>

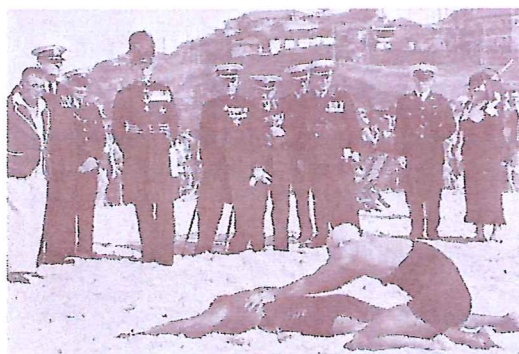
*Colonel Sleeman during his 1935-36 Australian tour:*



(1) the Commissioner-in-Chief reviews his "troops" in NSW;



(2) he tries an improvised stretcher with Caulfield Division in Victoria;



(3) he watches resuscitation drill on Maroubra beach, Sydney;



(4) he arrives in Kalgoorlie, where the lads of the Lake View & Star Division later gave him a hard time.

<sup>29</sup> See Howie-Willis, *loc. cit.*

<sup>30</sup> *Ibid.*



c) The Lund delegation

The Lund delegation seems not to have resulted in a report or at least not one stored in the St John's Gate archives, where the Lund file consists mainly of the itineraries of Sir Otto's overseas tours as Commissioner-in-Chief.<sup>31</sup> Possibly he did not produce a detailed report like those of the other delegations under discussion. He died suddenly in August 1956 some 18 months after returning from his Australian tour while his own annual report to the Order's Chapter-General for 1955 was in press.

His annual report commented on his overseas tours thus:

I had the pleasure of making a further overseas tour from 11<sup>th</sup> January to the 16<sup>th</sup> March. I visited Australia, Canada, New Zealand, Pakistan, Ceylon, Hong Kong, Singapore and Fiji, during which journeys I covered a total of some 37,000 miles. Generally speaking, I found everywhere great interest in St John and an ever-increasing activity on the part of our Brigade Units. There are, of course, difficulties and problems peculiar to each country but everywhere much progress is being made and I am confident that the value of the work of the Brigade is becoming more and more appreciated in all parts of the Commonwealth.<sup>32</sup>

The next year's annual report of the Chapter-General ran the following brief obituary:

The late Sir Otto was appointed Commissioner-in-Chief in 1951 after becoming Deputy Chief Commissioner of the Brigade in 1948 following a distinguished military career. He brought to this office high administrative ability and an unremitting vigour in promoting the expansion of the Brigade, whether at home or overseas. His extensive tours of inspection throughout the Commonwealth led to the considerable development of St John activities in all forms, particularly in the smaller territories; indeed there are few units of the Brigade to which he was not personally known. It is a measure of his success that the membership of the Brigade increased by 100,000 during his term of office.<sup>33</sup>

d) The Wakehurst delegation

The Wakehurst delegation resulted in only a six-page report, but this is one of the most incisive assessments of St John in Australia ever produced.<sup>34</sup> The points that Wakehurst made included these:

- 'The work of the Brigade, in particular, has been made difficult by the fact that in all States except South and Western Australia there have been established at one time or another State Ambulance Transport Services whose professional members have objected to working with St John volunteers'.<sup>35</sup>
- 'There have been too many elderly people in the organisation. It is necessary to build a more exciting modern image of St John [in Australia]'.<sup>36</sup>
- The State St John Councils were of limited effectiveness because their regulations 'restrict[ed] membership to members of the Order and persons chosen by the Association [Training Branch] and Brigade [Operations Branch]'.<sup>37</sup> By inference, this made it difficult to bring into the St John organisation people with useful technical, business, administrative and medical skills. Further, it meant that certain important St John functions, most notably support of the Ophthalmic Hospital in Jerusalem, were being neglected.
- 'The Priory Council...has become an unwieldy body of over twenty members....The difficulty and expense of bringing the Council together has resulted in the practice of holding only one or two meetings a year on the day before Chapter meetings', which consequently 'never has an opportunity of seeing the Council minutes and can do no more than rubber stamp its decisions.' <sup>38</sup> Here Wakehurst's criticisms foreshadowed the Priory's structural reforms of 1985-87 and 1997-98 that resulted in the present arrangements for Priory governance.
- '[In] Queensland, the future of the Brigade basically depends on overcoming the hostile elements in the QATB [Queensland Ambulance Transport Brigade, later called the Queensland Ambulance Service] and this will depend on the personality of whoever succeeds Mr [J.A.] Turner' [the QATB chairman and former secretary of the Queensland Centre of the St John Ambulance Association, whom Wakehurst described as 'a former Trade Union official and Labor member of the Queensland Parliament who turned out to be one of those rather aggressive personalities who are never happy without a grievance to fight']'.<sup>39</sup> Here Wakehurst was alluding to the long running feud between the QATB and the St John Ambulance Brigade, which the former saw as an interloper. The causes, effects and ultimate

<sup>31</sup> Archival file, 'Visit by Sir Otto Lund' [to Australia and other countries, 1955], file no. 15/3/8, library collection of the Order of St John, St John's Gate, Clerkenwell, England, UK.

<sup>32</sup> Annual Report of Chapter-General of the Order of St John, 1955 (formally titled The Grand Priory in the British Realm of The Most Venerable Order of the Hospital of St. John of Jerusalem, *Report of the Chapter-General for the year ended 31<sup>st</sup> December 1955*), Chancery of the Order, St John's Gate, Clerkenwell, London.

<sup>33</sup> Annual Report of Chapter-General of the Order of St John, 1956.

<sup>34</sup> Archival file, 'Lord Prior's Tour' [of Australia, 1966], file 'Australia' in Archives box marked 'Australia, New Zealand, Fiji: Commissioner-in-Chief's tours and other papers/reports/correspondence', library collection of the Order of St John, St John's Gate, Clerkenwell, England, UK.

<sup>35</sup> *Ibid.*, p. 1.

<sup>36</sup> *Ibid.*

<sup>37</sup> *Ibid.*, p. 1.

<sup>38</sup> *Ibid.*, pp. 1-2.

<sup>39</sup> *Ibid.*, pp. 2-4.



resolution of the feud have been thoroughly canvassed in recent Australian St John histories,<sup>40</sup> and so I will not reiterate these here. What can be said is that Wakehurst came away encouraged that St John in Queensland was 'particularly fortunate in having young and active heads of the Association and Brigade in Mr [J.S. ('Toby')] Stodart and Colonel Murray Elliott'.<sup>41</sup> Wakehurst was justified in his optimism for over the next 15 years under the guidance of Stodart, Elliott and their successors a resolution of the conflict between St John and the QATB was eventually achieved.

- In Western Australia there was a confused situation because of the existence of a nominally independent Commandery whereas the St John Ambulance Association was effectively the pre-eminent organisation within the State St John structure because it 'own[ed] all the buildings, [ambulance] vehicles and other property'.<sup>42</sup> With some prescience Wakehurst guessed that the solution was for a rearrangement in which the Commandery was 'accepted as the exceptional equivalent of a State [St John] Council with its Commandery status originally justified by historical and geographical reason'.<sup>43</sup> This was more or less what happened two decades later during the Priory's and Commandery's structural reforms of the late 1980s.

- Wakehurst's report concluded with a paragraph that neatly summed up the St John situation in Australia in the mid-1960s. He delivered a 'report card' with varied 'scores':

The general impression one gets of St John in Australia is of considerable vitality but indifferent organisation. Except when a strong personality takes charge in some office or territory there is little direction and things tend to drift until some crisis forces a decision. It would be a good thing if people in other walks of life besides medicine could be persuaded to take an active interest in St John. A revision of Priory, Commandery and State Council regulations could provide a better framework within which to operate.<sup>44</sup>

In view of the changes that have meanwhile taken place, those who remember St John in Australia 40 years ago would probably agree that the 'inspector' got it right.

#### e) The Dick delegation

The Dick delegation spent almost three weeks in Australia in February-March 1967. This resulted in a 10-page confidential report, the most critical ever written by a visiting delegation. Even more critical were the tape-recorded notes that Dick compiled as he went along. He had these sent back to St John's Gate to be typed up progressively for the Lord Prior, Wakehurst.<sup>45</sup> His formal report to Wakehurst made the following points and criticisms.

- Generally, Dick found that 'the Brigade [in Australia] is not of the size it ought to be. In terms of numbers it is almost 14,000 compared with New Zealand's 10,000, yet it has over three times the population...therefore...ought to be able to expand considerably'.<sup>46</sup> Further, the Brigade leadership was aging and too greatly dominated by members of the medical profession. Thus, he reported, 'a much younger senior direction is needed and...there should be a considerable leavening by bringing in outside people rather than having all senior appointments held by doctors'.<sup>47</sup>
- In Perth, Dick's first port of call, the formal parade of Brigade members that he inspected was 'a disappointment'. Thus, 'the turnout was of low standard,...uniform was poor and often old fashioned and there was not the pride in turnout seen elsewhere....Even the band was poor in turnout and performance....There were some 400 on parade, half what the Commissioner expected, so one cannot help feeling that all is not well'. In reporting this, he wrote that 'it is hard to say these things when one was so warmly welcomed and kindly entertained'.<sup>48</sup>
- Flying on to Adelaide Dick was greeted by the Chief Commissioner, Sir Kingsley Norris, who had flown in from Melbourne specially; however, having welcomed Dick, Norris left him in the hands of the local Brigade officials then 'flew straight back to Melbourne [and] except for this brief meeting he did not come with me anywhere on the tour'. What Dick then saw of the St John-run State ambulance service impressed him greatly. 'South Australia,' he reported, 'is the classic example of a highly efficient, impeccably run ambulance service which has placed and keeps

<sup>40</sup> See Murdoch Wales and John Pearn, *First in First Aid: The History of St John Ambulance in Queensland* (Department of Paediatrics and Child Health Publishing Unit of the University of Queensland [at the Royal Children's Hospital], Brisbane, 1998) and Ian Howie-Willis, *The Zambuks: The uniformed first aid volunteers of St John Ambulance Australia, 1901-2002* (St John Ambulance Australia, Forrest, ACT, 2002).

<sup>41</sup> 'Lord Prior's Tour', *op. cit.*, p. 3.

<sup>42</sup> *Ibid.* pp. 5-6.

<sup>43</sup> *Ibid.*, p. 6.

<sup>44</sup> *Ibid.*

<sup>45</sup> See Archival file 'Commissioner-in-Chief's Visit to Australia and NZ, 1966 [NB correct date was 1967], file no. N129/66, library collection of the Order of St John, St John's Gate, Clerkenwell, England, UK. The file contains Royer Dick's formal report on his visit to Australia, New Zealand and other places, his itinerary and the typescript of his tape-recorded notes.

<sup>46</sup> Royer Dick's 'Report', p. 1.

<sup>47</sup> *Ibid.*

<sup>48</sup> *Ibid.*, p. 2



St John's name on a pinnacle and in consequence is an invaluable recruiting factor for ordinary Brigade members as well'.<sup>49</sup>

- From Adelaide Dick flew to Sydney. While there he attended a reception at which about 100 Brigade officers were present, he reviewed a parade of 600 Brigade members at Victoria Barracks and was taken to see the 'first aid huts' at Bondi Beach staffed by Brigade members. His overall impression was favourable: in New South Wales, he wrote, there was 'much more true Brigade work and less emphasis on ambulances' (as in Western Australia and South Australia); and he was pleased to find 'a number of good units well officered'.<sup>50</sup>
- While in Sydney, Dick took a day out to fly to Canberra to see the new Priory headquarters building, which was still under construction. 'It will look dignified and attractive when completed,' he observed, 'but in my personal opinion is not going to be big enough should the Order eventually operate with its Foundations from the [national] capital city'.<sup>51</sup>
- From Sydney Dick travelled to Brisbane, where the news media quizzed him on his views on the long-running dispute between St John Ambulance and the QATB. 'I succeeded in giving an uncontroversial answer,' he proudly reported. Meanwhile, he was pleased to discover that despite the difficult relationship with the QATB the Brigade was 'in good fettle under its live and excellent Commissioner Colonel Murray Elliott [and] his outstanding District Superintendent (Nursing) Mrs [Dorothy] Davidson'. While in Queensland he visited the St John Ambulance units in Rockhampton, Bundaberg and Maryborough and was impressed by what he saw. 'We can be encouraged by the Queensland units,' he reported, because 'a great deal is being done in many of the smaller places...and I saw more "straight" Brigade work than anywhere else'.<sup>52</sup>
- After Brisbane, Dick went to Melbourne, where he reviewed a large parade of 700 Brigade members in the grounds of Government House, attended a reception for Brigade officers and declared open the 'Douglas Donald' St John Ambulance campsite at Yarra Junction (named for the State Commissioner, who the next year would succeed Norris as Chief Commissioner). The parade, he thought was 'less good' than what he expected and the 'turn-out below average with very considerable variation in uniform'. On the other hand, the 'Douglas Donald' facility was 'a highly impressive, well constructed training centre'. Another impressive aspect of the Brigade's work in Victoria was 'the "glamour" side provided by the Mobile Rescue Squads, who are exceedingly highly organised' and comprised 'an outstanding organisation raising the name of St John very high and thus attracting recruits'. In a dinner with the senior Brigade officers he 'drew attention to the fact that the Nursing [female] side seemed [to be] too little [represented] in the councils [i.e. decision-making] of the Brigade and rather put to one side'. His conclusion for Victoria was that 'in general the Brigade is good...if a little overshadowed by the Ambulance [male] side'.<sup>53</sup>
- The last State that Dick visited was Tasmania. On his first afternoon there he was driven around the suburbs of Hobart recently devastated by the February 1967 bushfires and was pleased to be informed by the Police Commissioner that St John Ambulance had been one of the few local organisations that had 'known what to do and had gone straight away and done it'. That evening he reviewed a well turned out parade consisting mainly of Cadets and the next day he was driven to Launceston. The latter gave him the opportunity of quizzing the St John staff assigned to him as aides about the recent 'chaotic' history of St John in Tasmania, which had included the loss of the State ambulance service two years before.<sup>54</sup>

In view of the above, it can be seen that Dick's formal report to Wakehurst combined a judicious mix of praise and criticism of the Brigade in Australia. His tape-recorded notes, however, presented another view. Typed up, they comprise a 25-page series of frank, unflattering impressions of what he had seen. These are too long to repeat here for every State, but their flavour can be appreciated by what he said about his experiences in just one State.

This was as follows:

I arrived [in the airport arrivals lounge] at 3 o'clock. Thereafter followed really quite one of the most astonishing things that I have struck during my time in St John all over the world. There was nobody there to meet me....I waited for half an hour quite happily, I didn't mind that at all and eventually two officers in uniform arrived. I had specially put on uniform as I understood this was necessary, though I did it reluctantly as I hate travelling in uniform. Eventually I introduced myself to these two officers and suddenly a little figure appeared in a very rumpled suit and with a stick — he is obviously lame — and wearing a sort of tweed deer stalker hat. This turned out to be 'Dr ABC' the new Commissioner. He didn't appear to know who I was, which was surprising as I was in uniform and there was after all nobody else I was likely to be. Anyhow, we then got into a car and drove into [the city], and I must say I was feeling a little nettled by then as I had to carry my own luggage in his sight and the others'....

<sup>49</sup> *Ibid.* pp. 3-4.

<sup>50</sup> *Ibid.*, pp. 4-6.

<sup>51</sup> *Ibid.*, p. 6.

<sup>52</sup> *Ibid.*, pp. 6-7.

<sup>53</sup> *Ibid.*, pp. 7-8.

<sup>54</sup> *Ibid.* p. 9.



After that I was taken to the 'XYZ Club' and this in itself was an experience. It is a small house which you would take for a rather not very good sort of hotel which you would find in a small country town. When we arrived there to my astonishment the Commissioner got out, took out a key and unlocked the door and let me in. He then went on to say he was very sorry but this was a general holiday and there would be no servants in the club that night and so he had arranged for a Divisional Superintendent to take me out to dinner elsewhere.

I got into [the club] which was completely empty. It was very down at heel and bedraggled and nobody there. Anyway, you couldn't get tea or a drink or anything and as one had had no lunch I felt rather breezed. However, the Divisional Superintendent came along at 7 o'clock and took me to dinner at a local hotel and then at 8 o'clock we went on to a parade which was meant to be splendid but which, as always happens when you over-elaborate, they made a considerable mess of it.

They had a Colour, a Union Jack and an Australian flag paraded with a young gentleman in charge carrying a sword and with a sort of supporting colour party. When I came in there was considerable uncertainty about what would happen next. The Commissioner took no part in the proceedings as he was sitting down and eventually somebody shouted general salute and everybody saluted and so I returned the salute my hand to my side and as I did this a hidden machine burst into some strange tune I had never heard of and so I again came back to the salute but after three bars of this it gave a cough and a splutter and lapsed into moody silence again as by that time I started to come down from the salute at which time all the others went up. It appeared that this was going on for some time but as the music never started up again we left it at that, and I then said to somebody what do we do next and eventually the District Superintendent who was in charge of the parade came forward and I told him that I thought I would like them to walk round. The Commissioner didn't even do that but just sat in his chair and so I went round....

There were I suppose about 120 people there, all extremely smart, but otherwise it was a shambles. It was pleasant to see so many doctors present and in uniform but there was no march past of anything....The Commissioner, who is a well known doctor [and] took this [job] on two months ago,...had no clue of what to do and really no clue about ordinary manners because you would have thought he would not have left me with a Divisional Superintendent and sent me off to dinner with him....So the parade continued; I walked round and addressed them as requested and presented one or two [certificates].

After that we went along and had a reception at [the Commissioner's] house, which was pleasant as he did have there all the officers from the parade and I was able to talk to them a bit. I am now back in the empty Club by myself and hoping someone will come in to give me breakfast. It is a very strange set-up....<sup>55</sup>

This, of course, was a one-sided account of the interaction between a Commissioner-in-Chief and his 'troops' in one of his outposts furthest from 'Home'. What we don't have to balance the pejorative view presented by his tape-recorded notes is a record of what impressions his 'troops' had of him. They had obviously gone to considerable trouble to put on a parade for him, but perhaps in 'over-elaborating' this they had paid insufficient attention to the kind of hospitality that such a personage might expect. To be fair to the 'troops' in this and indeed every other State, it could be pointed out that the Brigade members were not members of a branch of the armed services; consequently the kind of marching, parading and saluting to which Royer Dick was accustomed as a senior naval officer was not a major preoccupation for them. They were civilians and their reason for being Brigade members was to carry out first aid not to spend their time learning military-style drills.



*Royer Dick liked seeing spic-&-span "troops". Here Victoria's District Officer Nursing Cadets, Mrs Ida Freeman, presents her Cadets to the Commissioner-in-Chief, 1967.*

<sup>55</sup> Transcript of Royer Dick's tape-recorded notes, entry for 6 March 1967.



f) The Brecknock delegation

Of all the seven delegations under discussion, the Brecknock delegation was the only one that produced a report which was more significant for what it didn't say than what it did. Lady Marjorie spent only 18 days in Australia, during which time she visited the mainland capital cities and several nearby places of interest. Her report, barely 3¼ pages long, was bland, superficial and descriptive rather than analytical. It was chatty in tone, uncritical and full of compliments. For instance:

- In Perth she watched 'some very good practical nursing demonstrations at the Headquarters and thanks to the District Nursing Officer, Mrs [Norma] Wreford, who is a very live wire, they have good training equipment'.<sup>56</sup>
- In Adelaide, where one of this Historical Society's committee members, Ray Schilling, was her chauffeur, she 'attended a nice dinner followed by a reception given by Sir Edward Hayward, the very active Chairman of the St John Council; [she] also opened a fine new ambulance centre at a place called Elizabeth; [and] all in all was deeply impressed by the efficiency and "aliveness" of the Association and Brigade'.<sup>57</sup>
- In Melbourne she thought that 'the St John Rescue Squads [were] a very spectacular and outstanding activity of the Brigade [and are] held in such high esteem that six vehicles have been presented to [the squads] by the government, the Rotarians, the Lion's Club etc'.<sup>58</sup>
- In Brisbane she attended 'a nice little parade consisting largely of Cadets (boys and girls) and some nursing members and we had a very well run, very gay party in the evening'. Unfortunately, the obstructive tactics of the Queensland Ambulance Transport Brigade were hampering the development of the St John Ambulance Brigade; however, 'in the meantime it is a great tribute to the leadership of both Dr [Murray] Elliott [the St John Commissioner] and Mrs [Dorothy] Davidson, the District Superintendent (Nursing) that they still have a fine lot of members whose enthusiasm has not been damped'.<sup>59</sup>
- In Sydney she 'stayed with the Governor [Sir Roden] and Lady Cutler who gave a St John reception for [her] the first evening which was most helpful as it included nearly all senior members of the Order, the Association and the Brigade'. In addition, she found that 'Colonel [Edgar] Thompson, the Commissioner, was most kind and helpful'.<sup>60</sup>
- In Canberra she 'was most interested to see the new Priory House which [was] now finished and is an impressive building with a fine big hall'; and she also visited 'the very fine War Memorial and the magnificent new [National] Library'.<sup>61</sup>

It was in Adelaide that what Lady Marjorie reported to St John's Gate contrasted most starkly with what she had actually done. What she did was stir up a hornet's nest by publicly attacking the St John Ambulance Brigade in Australia for being old-fashioned. In particular she criticised the uniforms worn by the Brigade women, which, she averred, convinced the public that St John was an antiquated, fuddy-duddy that was out of touch with contemporary society and culture. The centenary history later produced by the St John Council in South Australia described what happened as follows:

[When] the Countess of Brecknock arrived in February 1969 she duly received the usual reception, toured metropolitan and country [Brigade] divisions, opened a new St John centre (Elizabeth) and made the usual speeches about how 'tremendously impressive' the local St John organisation was, and 'how very encouraging it was to see the enthusiasm of members'. By this time approving comments from St John's Gate dignitaries...were beginning to sound like clichés.

Marjorie of Brecknock, however, said other and different things that made South Australian Brigade members sit up and pay attention. She said that the future of the Brigade depended on its ability to attract young people into its ranks; but then hinted that it was in danger of failing in that important task because it was conveying to the younger generation an impression of stodgy conservatism. The end of the 'swinging 60s' was nigh, she seemed to be saying, but the Brigade in South Australia had yet to enter them. Her criticisms were veiled in comments upon the length of Nursing Division members' skirts, which then, in the era of the mini-skirt, had to be a regulation 15 inches (37.5 cm) from the ground. 'I just don't think we can ask our young girls to go around in skirts falling around their ankles as their grandmothers did,' she said.

It was a story the local press took up with relish, running reports on it under captions like 'Mini-skirts "In" for St John girls', 'St John's Mini-Girls', 'Hemlines Up', and even 'Show a leg — but how much?' The senior Brigade management at first saw the Countess's statement as a simple complaint about the style of the women's uniform. The retiring Commissioner [Dr John] Pedler had to explain to the numerous reporters who sought him out that the sixteen-inch rule was intended to make all uniforms level on parade, irrespective of the height of the wearers. He then pointed out that the Brigade was 'thinking of raising the hems to mid-knee length, but they cannot be any shorter than this as the girls

<sup>56</sup> Archival file 'Lady Brecknock's visit to Australia 1969', library collection of the Order of St John, St John's Gate, Clerkenwell, England, UK, p. 1.

<sup>57</sup> *Ibid.*

<sup>58</sup> *Ibid.*, p. 2.

<sup>59</sup> *Ibid.*, pp. 2-3.

<sup>60</sup> *Ibid.*, p. 3.

<sup>61</sup> *Ibid.*



do a great deal of bending when they are on field duty and too much leg would be shown'. Younger rank and file Brigade members, on the other hand, recognised the Countess's criticisms for what they were, and felt relieved.

Fifteen years later one former Brigade officer recalled that [Lady Brecknock's] words 'came as a breath of fresh air for the younger people'. He pointed out that by the end of the 1960s many Brigade divisions were stagnating under the control of the aging officers who had entered the Brigade before or during World War II. Such people had difficulty understanding the youth of the post-war 'baby boom' and ran their divisions along the same lines as yesteryear. Uncomprehending and powerless to stop the drift, they had to watch formerly eager Cadets grow dissatisfied and drop out of the Brigade rather than graduate to the adult divisions.

The 1960s, the decade of the St John organisation's greatest growth and achievement..., thus ended with Marjorie of Brecknock pointing the way ahead to the principal tasks of the 1970s and 80s. Attracting younger recruits, keeping them satisfied by giving them fulfilling work amidst the tensions and distractions of the new age; continually updating methods; delivering higher standards of public service; keeping in tune with changing public attitudes while still acknowledging the traditions of service of an ancient heritage — all these would become preoccupations for all St John bodies in the decades ahead.<sup>62</sup>

Whether or not the Council of the Order in St John's Gate ever became aware of the ferment that Lady Marjorie had stirred up in South Australia is uncertain. Her file in the St John's Gate archives contains no reference to the ruckus she created in Adelaide. What it does contain is a card of appreciation presented to her by Brigade members in Queensland signed by 40 of their number. (The signatures include those of two present members of this Historical Society — Margaret Boulter's and Beth Dawson's.) And that suggests that in Queensland as well as South Australia the Countess had breathed fresh life into the Brigade.

#### g) The Everard delegation

Unlike the previous delegations, the Everard delegation spent only a short time in Australia: instead of the months of some that had preceded his, Tim Everard spent little more than a fortnight here during August 1991. In that time he visited the Priory headquarters in Canberra and five State St John headquarters. In contrast to the previous delegations he gave St John organisation in Australia an almost clean 'bill of health', finding generally that 'St John Ambulance Australia [SJAA] is successful, especially in training...and everywhere St John training leads the field. SJAA publications on First Aid are unchallenged, and the Australian public certainly see SJAA as the natural First Aid authority'.<sup>63</sup> He was particularly impressed by the capabilities of three committee members of this Historical Society, Charles Campbell, Willis Marshall and John Pearn (at that time respectively Priory Secretary, Chief Commissioner and Director of Training), with whom he had close dealings. In his report he stated that the main strengths of the organisation were these:

- 'Strong administration' — 'the Chancellor has led a powerful team of Australians of standing'; 'the State Councils also comprise useful and influential personalities'; 'wide-ranging constitutional and administrative reform three years ago reinforced central control and imposed unity of purpose between Training and Operations'.<sup>64</sup>
- 'Positive cash flows' — 'each State has its own accounts..., and in each there is a positive, sometimes strong cash flow'; 'most of this is due to increased training'.<sup>65</sup>
- 'Prestige' — 'varies from fair to excellent'; 'the Governor-General, a former eminent Labor politician with a republican and agnostic background, has been convinced of St John's social value and, as Prior, gives whole-hearted support'; however, 'effort is still needed to give Operations Branch a modern image'.<sup>66</sup>
- 'First aid training' — 'very strong marketing effort made for first aid training'; 'booking systems are efficient [and] there is very little waiting time to get on a suitable course'; 'about 1% of Australians take a St John course each year'; 'widespread competition [from other training providers] but SJAA seem to overcome this'.<sup>67</sup>
- 'Publications, kits and supplies' — [SJAA] have developed a family of first aid books, led by Australian First Aid, which are widely successful [and] provide regular income and moral authority'; 'profits are now rather substantial'; 'a National Supplies organisation...prepares a large range of distinctive St John first aid kits [that are the] principal line of business'; 'great care is taken with the design, content and presentation of kits'.<sup>68</sup>

<sup>62</sup> Ian Howie-Willis, *South Australians and St John Ambulance 1885–1985: The Centenary History of the Order of St John in South Australia* (Adelaide, St John Council for South Australia, 1985), pp. 332–4.

<sup>63</sup> Archival file 'Secretary-General's visit to priory and five State organizations of St John in Australia, 9–26 August 1991', paper tabled at the Grand Priory Council meeting on 4 September 1991 by T.J. Everard (Secretary-General), library collection of the Order of St John, St John's Gate, Clerkenwell, England, UK.

<sup>64</sup> *Ibid.*, p. 2

<sup>65</sup> *Ibid.*

<sup>66</sup> *Ibid.*

<sup>67</sup> *Ibid.*

<sup>68</sup> *Ibid.*, p. 3.



- 'Public relations and fund-raising' — 'SJAA are fortunate that they have to do less direct fund-raising than we do in the UK'; 'training income meets nearly all their needs'; 'their first aid courses are very positively marketed'; 'SJAA are now beginning to make videos from 15-30 seconds for TV and one short film for Operations Branch recruiting'; 'SJAA also use local press advertising for Cadet recruits with some success'; however, 'their programs for first aid teaching in schools are not as advanced as ours in the UK'.<sup>69</sup>
- 'Medical resources' — 'a technical advisory committee of seven has been set up — six doctors or professors and one poisons expert — for advice and testing of first aid kits'.<sup>70</sup>

In contrast to the strengths, Everard found that the organisation had four problem areas:

- 'South Australia' — 'the decision by the Chancellor to withdraw progressively from the official ambulance service in South Australia was a very hard one, but now seems to be generally accepted.'; 'some of SJAA's long-serving and well-qualified volunteers will leave in disappointment'; 'the split of property assets between State Government and St John may prove difficult and lengthy'.<sup>71</sup>
- 'Recruiting for the Operations Branch' — 'high profile of SJAA, their regionalisation policy, their good leadership and the opportunities for recruitment from first aid classes should produce an upswing in Operations Branch numbers — but it has not happened yet'.<sup>72</sup>
- 'Youth' — 'high priority will be given to youth matters, but there is not yet a nationally co-ordinated program for SJAA'.<sup>73</sup>
- 'Links with the Ophthalmic Hospital in Jerusalem' — 'Priory might be able to give substantial support, if they wished'; 'they feel they are doing all they can to help the Hospital against a somewhat apathetic and sometimes sceptical attitude in Australia'.<sup>74</sup>

Despite the problems, Tim Everard's overall assessment was that 'St John Ambulance Australia [was] in good form, expanding its staff and programs'. His final compliment, albeit indirect, was that 'more could be done [by both Grand Priory and St John Ambulance Australia] to learn from each other'.<sup>75</sup>

Previous delegations might have believed that the Order and its Foundations in the UK had little to learn from experience in the overseas Priories. That might well have been true as late as the 1960s, but as the twentieth century drew to a close it was no longer the case. The St John Ambulance cause was, arguably, as vigorously carried forward in the former dominions as in the 'Motherland' itself.

*Earl Cathcart, Lord Prior 1985-87 (left), and the Grand Prior, Richard Duke of Gloucester, 1985. Each has visited Australia, the Duke on various occasions.*



## 5. Australian responses

So far this paper has presented a one-sided view of the tours of inspection — the inspectors'. What was the corresponding view, that of those being inspected? The short answer is that generally the delegations were warmly welcomed, hospitably entertained and treated deferentially. With few exceptions the leadership of the St John organisation in Australia went to considerable trouble and expense to ensure that the delegations met the key leaders and a cross-section of the rank and file membership, were shown all facets of St John work in the States/Territories, saw the popular tourist sights and were given

<sup>69</sup> *Ibid.*

<sup>70</sup> *Ibid.*

<sup>71</sup> *Ibid.*, p. 4.

<sup>72</sup> *Ibid.*

<sup>73</sup> *Ibid.*

<sup>74</sup> *Ibid.*, p. 5.

<sup>75</sup> *Ibid.*, p. 4.



whatever was necessary to make their time in Australia happy, comfortable and enjoyable. There's also ample evidence that the St John leadership in Australia took the delegates' criticisms to heart and made effort to implement the changes they recommended.

As a general rule, the earlier the delegation the more royally it was welcomed. In particular the pre-war emissaries, Hewett and Sleeman, received the kind of celebrity treatment from the press and general public usually reserved for royalty. By contrast some later delegations slipped in and out of Australia unnoticed by anyone except the St John officials dealing with them. This reflected Australia's growing maturity as a nation: in the 1920s and 30s most Australians regarded themselves as citizens of Empire, so that making a fuss of the Order's British emissaries helped affirm the imperial ties. By the 1960s the ties had loosened. Visiting British dignitaries could therefore be ignored except when, like Marjorie Lady Brecknock, they became newsworthy by provoking controversy.

Even with the pre-war delegates, however, the Australian habit of lopping tall poppies was sometimes evident. For instance, the tabloid press in Sydney enjoyed taking a rise from Sir John Hewett by drawing attention to his bulk. Somehow the journalists interviewing him discovered that he weighed 17 stones (108.2 kilograms) and then had some fun pointing this out to their readers. Sleeman also learned something about Australians the hard way. At a meeting with local Brigade members in the Kalgoorlie Town Hall he criticised them for not only failing to appear in uniform but for wearing armbands emblazoned with the red cross rather than the Maltese cross. He even threatened to deregister the main local division, Lake View and Star, which was attached to one of the larger mines. When there were murmurs of dissent from his audience he chose to stand on dignity. Pointing to his Knight of Justice breast star, he said he spoke with the full authority of the Order and its Grand Prior. His audience, mainly working miners, responded by counting him out, thumping their seats on the floor as they counted. Perhaps he hadn't realised that with the Great Depression still being felt on the goldfields his audience couldn't afford uniforms. Fifty years later one member of his audience recalled with more than a hint of *schadenfreude*, 'I don't think he went away with many happy memories of Kalgoorlie'.<sup>76</sup>

Some also mocked the visitors' patrician manners. Those being inspected might not have understood that inspection was the hidden agenda; but many guessed that their visitors probably regarded them as 'colonials'. One way of evening the score was to jest about the emissaries' unfamiliar turn of phrase. The colloquial expression forming the main title of this paper was one such. 'Jolly good show! Carry on!' is a phrase that few Australians would have used: not only was it an alien colloquialism, its faintly condescending nuances would have invited mockery. In uttering it often, the emissaries wouldn't have known that their hosts might laugh about it later as being an omnibus term that the visitors had used to cover every contingency from 'How truly worthwhile; please do continue this valuable work' to 'Not more petty parochialism!'

Another cause for wry reflection was the timing of the visits by the St John's Gate emissaries, who always seemed to arrive near the end or beginning of the year. This gave rise to a suspicion in Australia that one reason for the delegations was to give certain high ranking British officials of the Order the opportunity of combining pleasure with business by taking a working holiday in the sun. It may have been merely coincidental, but all except one of the delegations left Britain during the cold of the European winter to carry out their work during the sun-drenched Australian summer.

Finally, there was possibly a mismatch between what the emissaries expected to find and the way St John Ambulance work was done in Australia. Here it's worth reiterating the comment made earlier about Rear-Admiral Royer Dick, that St John is a voluntary rather than military institution. Significantly, of the seven delegations considered in this paper five of the emissaries had been senior military officers. Despite the quasi-military structure of the Brigade, its members were volunteers who could not be subjected to the military-style discipline that former senior military officers might have regarded as the essential characteristic of a well-run organisation.

## 6. Conclusion

The seven emissaries whose reasons for coming, activities and findings have been outlined in this paper were the principal St John's Gate delegations to Australia over the 63 years that such delegations were sent out. One question remains: why have no more delegations from St John's Gate toured Australia? The last of them, Tim Everard's, took place 15 years ago. Does that mean that by the 1990s the Australian St John organisation had attained such a degree of perfectibility that inspection was no longer necessary?

The answer to this last question is 'probably not; but inspections might not be the best way of making improvements'. The answer to the previous question is that the main reason why the delegations no longer arrive is that times have changed, and with that the worldwide St John organisation. Briefly, what has happened is as follows.

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<sup>76</sup> Ian Howie-Willis, *St John, Ambulances and Western Australia: A Centenary Anthology 1892-1992* (Perth, St John Ambulance Australia [WA] Inc., 2002), pp. 61-62



- The Order itself continues to evolve and is no longer the organisation it was until the 1990s. In the 175 years since Rev. Robert Peat and his oddly assorted group of romantics, antiquarians and self-serving opportunists attempted to revive the long defunct English Grand Priory of the ancient Knights Hospitaller, our Order has undergone enormous transformation. Among the significant changes have been, in turn, the emergence of the St John Ambulance movement, its transplantation and flourishing overseas in Britain's imperial possessions, the establishment of the Order as a royal order of chivalry, and the creation after World War II of autonomous Priories of the Order in Britain and the dominions. The changes continue. Most recently there have been the abolition of the Order's Anglo-centric Chapter-General and its peak Council in 1998–99 and their substitution by a new peak body of the Order, the international Grand Council. As part of this suite of reforms, the St John organisation in England became a new and separate Priory, the eighth among a group in which the earliest had been established more than 50 years previously.
- At the same time, the nations in which the Order does its work also continue to evolve. The Empire vanished within a few years of the end of World War II and within a couple more decades the UK had joined the European Community. The Commonwealth of Nations survives, but mainly as a forum of discussion. Australia and the other former dominions have meanwhile made their separate ways in the world; and while their emotional and diplomatic links with the UK and each other might remain strong their economic links with their regional neighbours are stronger than those with the UK.
- In such an Order and such a world it is no longer appropriate for titled members of the English 'meritocracy' to inspect the Order's overseas Priories periodically or to tell them how they should conduct their affairs. The delegations that visited Australia between the late 1920s and early 90s were themselves part of the process of the Order's evolution from a monolithic Anglo-centric institution of Empire into a cosmopolitan loose world-wide federation of national organisations enjoying parity of esteem.
- In the meantime, the various Priories of the Order, Australia's included, had developed their own effective internal mechanisms for review, restructure and reform. As this occurred, and in Australia it began happening during the Priory reforms of the late 1980s, the need for periodic inspections by external 'boards of examiners' diminished.
- In undertaking that reform, the Priory leaders had seen the need to distance themselves from St John's Gate, to assert a greater degree of autonomy and to emphasise the point that in Australia the Order was independently Australian. Hence the adoption of the 'public name' St John Ambulance Australia rather than the cumbersome 'Priory in Australia of the Grand Priory in the British Realm of the Most Venerable Order of the Hospital of St John of Jerusalem'. As the Chancellor and Priory Secretary had discovered in their dealings with the South Australian government to separate St John and the ambulance service in South Australia, the Order's British affiliations made the Priory vulnerable. In South Australia, if not elsewhere, they allowed enemies such as the militant ambulance officer unionists to attack the Order as an organisation run from London. Explaining and justifying the Priory's London affiliations to government committees of inquiry into the ambulance service had proved difficult.
- And with the creation of the international Grand Council of the Order, new and more appropriate means for ensuring quality control have emerged. Among these, instantaneous international communication via Email and the Internet and the worldwide network of linked St John websites have meant that the various Priories and the Grand Council are in continual contact with each other. At the same time the intinerations of the Grand Council, and its habit of rotating its annual meetings around the eight member Priories ensure that the Order's international leadership are kept well informed about developments in the member nations.
- Finally, and thanks to fast, cheap international air travel, in more recent decades the Grand Prior and the Lord Priors have been more mobile, visiting the overseas Priories more frequently. While their travels do enable them to keep in touch with developments in the Priories, they come not so much as inspectors but as guests invited to special events. The presence of the current Lord Prior, Mr Eric Barry, at this Priory conference, where his main task has been to declare open the redeveloped State headquarters of St John Ambulance in Western Australia, is one such visit. We welcome you among us, Mr Barry, as a colleague rather than inspector. And if you do make affirmative noises in response to what you've seen here in Perth we can be fairly sure that you won't be sending the Grand Prior a confidential report finding fault with us.

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## How to promote St John heritage through a museum: The St John's Gate experience

by Pamela Willis

The author: Ms Pamela Willis CSJ is the Curator of the Museum of the Order of St John at St John's Gate, Clerkenwell, London, a position she has now held for almost 30 years. In that time she has developed the Museum into a world-class institution that annually attracts many thousands of visitors — St John members and general public alike — from around the world. She is also the organiser of the series of international conferences on the mediaeval military monastic orders that are conducted quadrennially at 'The Gate'. (These conferences are the model on which this Historical Society's annual history seminars are based.) Ms Willis was brought to Perth by the Management of St John Ambulance in Western Australia to be one of the two international guest speakers at Priory Conference 2006. When the conference ended, she travelled to the eastern States to advise the St John archivists, librarians and museum curators in Canberra, Sydney and Melbourne on the development of their collections.

Editor's Note: Ms Willis gave a stimulating and entertaining 'PowerPoint' presentation at the Historical Society's history seminar in Perth on Thursday 22 June 2006. Rather than a paper as such, she presented a series of mnemonic points based on her experience as Museum Curator at St John's Gate to assist Australian St John Ambulance members who have responsibilities for developing St John museum, archival and library collections. The following consists of the text of her 'PowerPoint' slides.

Greetings from the St John Historical Society (the UK one!)

- 25 years old this year (2006)

Why are we doing this?

- Aims decided and agreed

Where is it?

- Storage
- Conditions

What have we got?

- Documentation
- Cataloguing

Is it OK?

What do we want?

- Collecting policies
- Legal title
- Conservation
- Conditions
- Cleaning, care & restoration

Show us what you've got!

- Permanent displays
- Temporary exhibitions
- Inter-actives
- Handling collections
- Websites



Tell us what you've got!

- Labelling
- Publications
- Marketing
- Auto guides
- Websites

Tell us what we've got!

- Identification services
- Frequently Asked Questions on web-sites
- Information leaflets

We want what you've got!

- Loans
- Costumes - pageants, processions
- Equipment
- Copy photos
- Information

Who are we?

- St John people
- Families, friends and relations
- Local people
- Work-related people — e.g. medical
- THE PUBLIC
- Anyone in any type of education
- The Media
- Special interest - e.g. medals

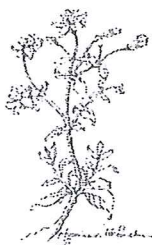
'Time to Care': how did we presented this theme?

- Multimedia
  - Flickbooks/images
  - Cases/objects
  - Drawers/more objects
  - Audio — oral history
  - Themes
  - Periods
  - Interactives
  - CD-Rom

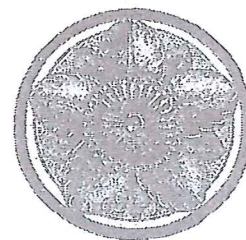
Do you share your space with other organisations?

- Join with other organisations in your area or country — leaflets, trails
- e.g. Temple Church
- e.g. I.MoHM — to be national soon

Museums Month UK — Herbs of St John

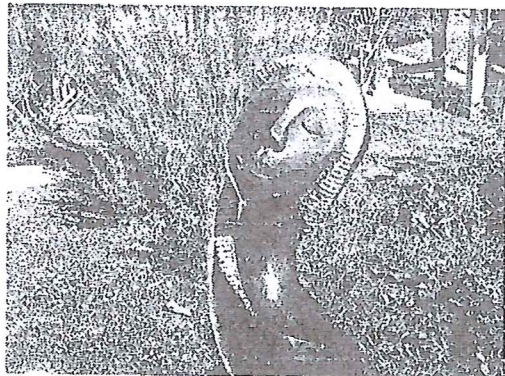


*St John's Wort: floral emblem of the Order, and some of its stylised representations.*



BAMS Student Exhibition May-June: 'The Currency of Courage'

Mystery in Stone — Zimbabwean sculpture: Africa & St John Ambulance

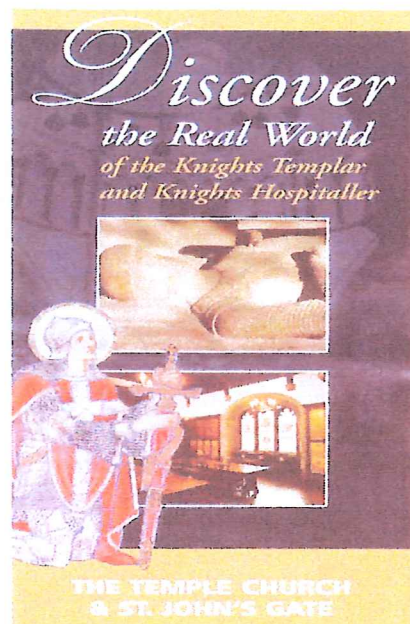


*Zimbabwean stone sculpture, and a meeting of St John members in Zimbabwe.*



## New Leaflet— Da Vinci What?

The joint St John's Gate-Temple Church pamphlet produced to give a correct historical view in contrast to the distorted history propagated by the popular novel and film *The Da Vinci Code*.



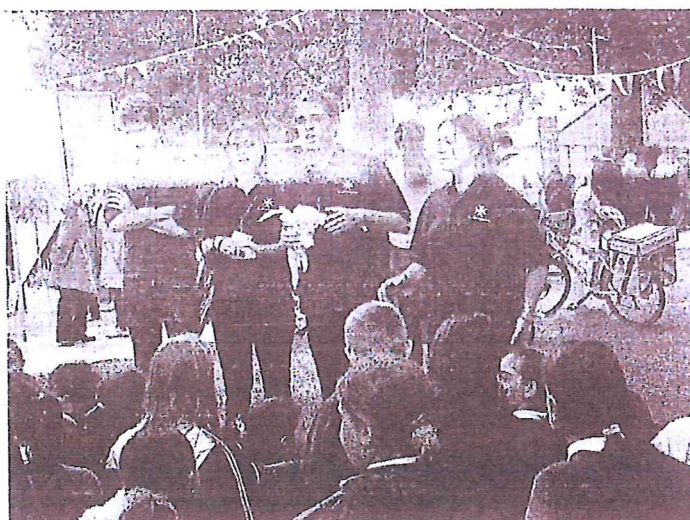
Website — 'Caring on the Home Front'



Published by St John Ambulance and the Red Cross in the UK, this book demonstrates how different organisations can join in promoting their own heritage.

- "This website is about ordinary people who lived extraordinary lives whilst working for St John Ambulance and the Red Cross during the 1939–45 World War"

First Aid Aerobics for school-children in St James's Park, London, July, 2005

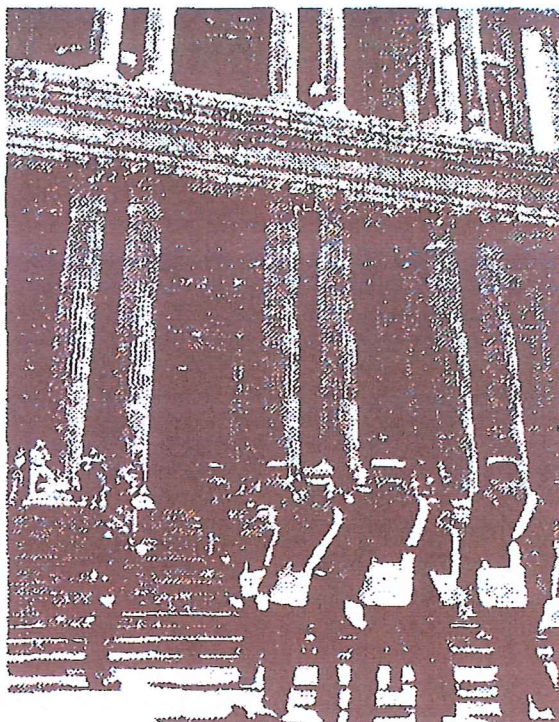


First Aid Aerobics for school-children in St James's Park, London, July, 2005.



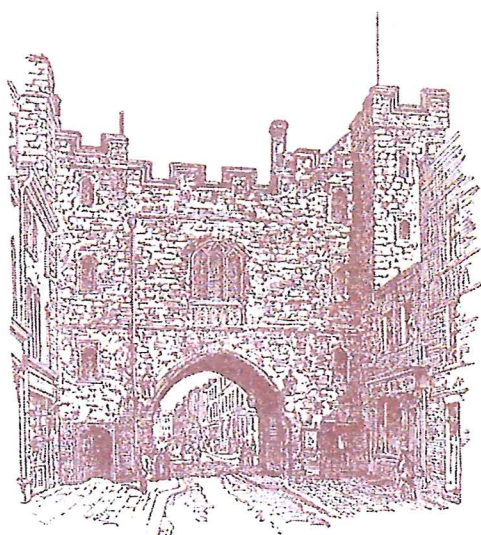


Australian artist Ian Westacott working with local schoolchildren on a St John Ambulance project in London.



St John's Day celebrations, 1992:  
Uniformed embers enter St Paul's

The Museum Curator's visit to Melbourne:  
left-right are Allan Mawdsley, Pamela Willis &  
Jack Blackstock at the St John Ambulance  
Museum, Williamstown, Victoria.



St John's Gate, Clerkenwell, London: a pen-and-ink sketch of 1892. Formerly a gatehouse built in 1505, it is now one of the main surviving remnants of the ancient Grand Priory buildings. It was acquired for the modern Order of St John in 1873 and now houses the Order's Museum.



# The Dispensarium: The origins of the modern outpatients' department

by John Pearn

The author, Professor John Pearn AM RFD KSJ is a regular contributor to the annual history seminars of the Historical Society, of which he is an appointed committee member for Queensland. As well as being the retired Professor of Paediatrics at the University of Queensland and a former Surgeon General of the Australian Defence Force, Professor Pearn is one of Australia's most eminent medical historians and the author of many books on not only medical history but historical botany, numismatic history and other historical subjects. From a St John perspective, one of his most memorable books was his great 1998 work, *First In First Aid: The History of St John Ambulance in Queensland*, co-authored with the late Murdoch Wales. Professor Pearn has held many positions within St John Ambulance, including State Surgeon in Queensland and national Director of Training. He is currently the president of the Queensland St John Council.

## Abstract

All major hospitals in the twenty-first century have Outpatient Departments, as an important and integrated part of their clinical service. Such arose from the Dispensary Movement of the 18<sup>th</sup> and 19<sup>th</sup> centuries; and, in turn, from three earlier trends. These included the provision of charitable medical care to the poor. A second antecedent was the advent of journeymen, surgeons and apothecaries who set up booths, typically at Fairs. The third antecedent was the establishment of Dispensaria attached to pilgrim-hospice-infirmaries which were built along the extended chain of the pilgrim route from north-west Europe to the Holy Lands. This paper describes the influence of the Dispensaria along the pilgrim routes — as a forerunner of outpatient services which are taken for granted today.

## Background

Outpatient Departments today provide seamless continuity of care whether or not a patient has been admitted as an inpatient, to the Hospital concerned. So ubiquitous are Outpatient services that we take them for granted. Such is a phenomenon only of the past two hundred years. Although an outpatient department treated children at the Northampton General Infirmary from 1744 (Williams, 2005), it was not until the Dispensary for the Infant Poor was established in London in 1769 that the modern Dispensary Movement began (Walker-Smith, 1997).

The fundamental difference between hospitals or infirmaries on the one hand and outpatient dispensaries on the other was that:

'Dispensaries did not offer any in-patient treatment, whereas few hospitals routinely treated patients in their own homes. This meant that dispensaries were able to treat larger numbers of patients than could be cared for in hospitals, and they could also attend to categories of patients for whom in-patient treatment was believed harmful [because of infectious diseases]' (Croxon, 1997).

Three influences — philanthropy, economy and the prevention of cross-infection — led to the genesis of the modern Dispensary Movement. But what were its earlier forebears? Whence arose this medical charity based on and made possible by the provision of cheaper healthcare for all? What were the earlier precedents for this provision of centralised medical care, a system which contrasted with that of home visitation? It is the role of the historian to study such origins and to analyse movements and trends which today provide an important cornerstone of the integrated healthcare service which all enjoy today.

Research into this subject has led the author to the conclusion that three independent themes influenced the genesis of the Dispensary Movement. The first was the charitable and philanthropic principle of providing a medical service for all, especially the sick poor — a theme which continued and remained a central impetus of the Dispensary Movement. The second was the need to provide for travellers, especially pilgrims, who needed medical help in lands far from their homes — and in which case, however rich an individual might be, he or she needed to go to the doctor rather than the converse. Thirdly, the evolution in medieval times of journeymen-surgeons and tooth-pullers provided a centralised service, albeit a travelling one often at fairs and marketplaces, where poor patients came to the clinician as outpatients, rather than a system where the clinician visited them.

This paper examines the evolution of the first two of these themes, philanthropic service for the traveller and pilgrim, in the context of the service of the Knights Hospitallers of St John. Those medical monks established an extended chain of medical support in which they treated travellers and pilgrims for more than a thousand years (600 A.D. – 1798). Their contribution to the evolution of the modern Outpatient Department was most significant.



## Dispensaries and the Pilgrim Route

Latin was one of several common languages of the medieval monks and of others who served in the many religious Orders who took part in the six Crusades. The Latin word "dispensarium" is translated as: 'a place where medical and dental skill, treatment and remedies are provided for the indigent, ambulant sick, at little or no cost to them' (Dorland's Illustrated Medical Dictionary 1988:498).

In Armenia, the Nestorians (early Christians originally from Syria) established at Edessa on the Euphrates River, in the fifth century A.D. one of the most celebrated hospitals of antiquity. By the seventh century, medical hospices had been established at several sites in and near Jerusalem, at the behest of Pope Gregory the Great.

In 600 C.E., with Pope Gregory's encouragement, the Abbot Probus established a hospice at Jerusalem to cater for the increasing number of pilgrims journeying mainly from Western Europe to the holy shrines of Palestine (Wales and Pearn, 1998). Over the ensuing centuries, war between Byzantium and Persia left both empires exhausted, a scenario which paved the way for the emergence of the third great power of the region, Islam. With the approval of the benign Caliph of Baghdad, Haroun al Raschid, the Frankish Emperor, Charlemagne (circa 742-814 AD), rebuilt and enlarged the original hospice-dispensary of Probus and added a library. Those Christian medical monks associated with the hospital in Jerusalem were originally pacifist in character. They adopted a lifestyle consistent with the rise of Monasticism and managed to survive in Jerusalem surrounded by the more general Muslim society, constantly in a state of flux.

Other health resorts, along the European pilgrim routes to the Levant, also performed the functions of dispensaries. One of the most significant was that at Salerno, south of Naples on the Gulf of Paestum. Salerno, one of the greatest of the early seats of learning, was the only centre of direct, unbroken linkage between Hippocratic medicine and the medieval and later Renaissance world. Salernitan physicians were already famous in the tenth century C.E.; and provided services to pilgrims both before and during the Crusades (Sudhoff, 1926). Another such centre was established in the monastery at Monte Cassino in 1060 – 1080 A.D. under the leadership of Constantine the African. Monte Cassino in that era was "a small seaside town which had earned for itself the well deserved title of 'Civitas Hippocratica' " (Doolin, 1947).

The initial cordial relations between Muslims and Christians did not last and both sides became militant. In or about the year 1000 of the Common Era, the insane Egyptian Caliph, El Hakim ("The Doctor"), began a megalomaniacal persecution of his subjects irrespective of their race or creed. In the ensuing catastrophes, many of the Christian holy shrines in Jerusalem were razed to the ground including Charlemagne's Hospital. In the ensuing century, several Italian city states established commercial relations with the Abbasid Caliphate. One of these was represented by a merchant guild from the coastal city state of Amalfi, a prosperous republic situated on the Gulf of Salerno, 50 kilometres south-east of Naples. The Governor of Jerusalem, having obtained permission from the current Caliph, Monstaser B'illah, assigned to the Amalfitans a site for a hospice-dispensary which was close to the site of the former Charlemagne's Hospital. The Amalfitans' flag, with its eight-pointed white cross, was adopted by the Order of Benedictine monks who staffed that Hospital. It was originally dedicated to St John the Almoner as a Patron of the hospice-dispensary. The Amalfitans also built a hospice-dispensary for female pilgrims. In addition to the original Benedictine monks who staffed that pioneering institution, a small number of pious women, probably themselves pilgrims, comprised the staff of that institution. St John the Almoner was subsequently replaced by St John the Baptist as the Patron of the Hospital (Wales and Pearn, 1998).

From this group arose the Knights Hospitaller of the Order of St John. This great Order of medical monks was originally termed the *Ordo Equitum Hospitaliorum Sancti Iohannis Hierosolymitani* (Hume, 1938). The new Order was formally established by a Papal Bull of Pope Paschal II, which was given to Brother Gerard in 1113, thus bringing the new religious Order under Papal protection (Hume, 1938). The Order, officially termed The Sovereign Military Order of St John of Jerusalem called of Malta, has since been known as the Sovereign Military Order of St John. The Hospitallers, as they were called, established hospice-dispensaries as well as hospitals along the pilgrim routes from western Europe along a great chain to Jerusalem. The Hospitallers were "not non-combatants but were warring physicians who could strike the enemy mighty blows, and yet later bind up the wounds of that same enemy after the battles" (Hume, 1938). The Hospitallers, and the Sovereign Military Order which embodied them, adopted the eight-pointed white cross of the original Amalfitan Guild, as their emblem.

In 1070 C.E. the combined hospice-dispensary at Jerusalem was in the charge of a Chief or Master who bore the title of "Custodian of the Poor of Christ in the Hospital of Jerusalem". Many such hospices were established along the pilgrim routes both leading to and radiating from northern and western Europe. Over the ensuing two centuries, in addition to the provision of inpatient services, they supplied the triad of outpatient care, medicines and sanctuary. Over the succeeding two hundred years, the Hospitaller Knights of St John, along with medical monks of other religious Orders, were gradually driven from the Holy Lands.



The last great Holy Land battle of the Crusades occurred with the lost defence of the great St John castle at Acre, in 1291. Thereafter the several powerful Orders of pilgrim Knights withdrew progressively to Cyprus, thence to Rhodes, and finally to Malta. Over the ensuing three centuries, the chain of hospice-dispensaries gradually shortened.

Figure 1: *The Knights' Castle on the Peninsula of Kavos on the Greek Island of Kastellorizo. Constructed in 1309, as an outpost from Rhodes, it lay along the pilgrim chain from Europe to the Holy Lands. Photograph 1998.*



Figure 2: *The Harbour of Kastellorizo, the Limani, with the Peninsula of Kavos centre. Surmounting the peninsula is the Knights' Castle of Kastellorizo. Across the narrow strait of the Aegean is the mainland of Turkey, in the background. Photograph, from the Palaeocastro, looking east, 1998.*

It was on Malta that the Hospitaller Knights built their greatest Hospital. It was known as, and its ruins remain as the Sacra Infermia Di Malta, or Sacred Infirmary, completed in 1578. It had three great wards and a Dispensary (Hume, 1938). A report by John Howard, travelling in 1788 on behalf of the Royal Society (of London), has survived: 'Three wards, one for dangerously sick or dying; another for the patients of middle rank of life; and the third for lower and poorer sorts of patients' (Howard, 1789).

The Dispensary of the Sacra Infermeria at Malta was not only splendidly furnished but provided a well-stocked service for outpatients:

'Rows of splendid Majolica jars inscribed with the names of the drugs and herbs were held; and here came the blind, the leprous, and the scrofulous, and poor incurables, both men and women, for the broths and the milk which the physicians prescribed abundantly; for bandages and crutches, for the mercurial unctions administered without reserve in the spring; and for the daily pittance, to which the Treasury [of the Hospitallers] appropriated one hundred scudi a month. Here were also rooms where hot steam baths were given, and offices for the physicians and other personnel of the Hospital' (Hume, 1938).



It was further written that:

'In addition to this 'Out-patient Department' the Hospital maintained a sort of 'District Nursing Service' in Valletta and the towns around the Harbour... charitable work for the poor was always done in secret and the feeling of the unfortunates spared — probably nowhere else in the world at that time was there such systematic medical care for the general population in extra-hospitalieri, or out-patients, could come to the Hospital for treatment' (Hume, 1938).

In 1516, the Ottomans seized the Holy Lands from the Mamluks and ruled there until the British conquest of 1917. Initially, there was a period of stability and building. Dispensaries, as islands of that tradition of muscular Christianity, were re-established. By the end of the Mamluk period, in the first decade of the sixteenth century, there functioned a Franciscan hospice-dispensary on Mount Zion in Jerusalem, designed to serve pilgrims (Schein, 1992) and which "functioned primarily for welfare and charity" (Amar and Lev, 2005). In Jerusalem, during the reign of Suleiman the Magnificent (1520-1566), the city and its people enjoyed an impetus in building and in the establishment of many secular institutions. Monks of the Franciscan Order established dispensaries at Acre, Nazareth, Bethlehem and a large and influential one in Jerusalem in the late sixteenth century (Amar and Lev, 2005). The Jerusalem dispensarium was a unique institution which contained modern medical equipment, a staff of trained pharmacists (Amar and Lev, 2005) and a "library containing a wealth of professional medical literature of the European school" (Horn, 1962).

For more than two centuries, the Franciscan dispensary in Jerusalem served people of varying denominations and distributed medicines free of charge. Two inventories (those of 1755 and 1798) have survived, and have led scholars to call that dispensarium of its period "the biggest pharmacy in the Levant" (Amar and Lev, 2005).

The outpatient service of that dispensary introduced the latest Western medicine to the Middle East. One important introduction by the Franciscans was the first introduction of quinine (*Cinchona bark*) brought from South America in the first decades of the eighteenth century for the treatment of malaria, long a scourge of the Mediterranean littoral (Sudhoff, 1926).

Thus the traditions of pilgrim hospices, and Outpatient Dispensaries formed another crucial influence in the establishment of the Dispensary Movement which was to develop two centuries later. Particularly in European colonies in the Americas and in Australia, this establishment of Dispensaries as Outpatient Services for those colonists who had arrived from elsewhere, or who were in transit, was to provide an invaluable practical service now much taken for granted. In many parts of Australia and in the New England Colonies of North America, such Dispensaries were to become the forerunners of many fine hospitals which replaced them.

## Acknowledgements

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# Pioneer publications on First Aid: An overview of significant First Aid literature from 1878 to 1914

by Vince J. Little

The author: Vincent Little CSU joined the Randwick Division of the St John Ambulance Brigade in 1955. From 1966 he was also an instructor with the New South Wales Centre of the St John Ambulance Association. In 1974 he moved to Queensland and became active in the St John Ambulance organisation there. Since then he has held many positions, including Deputy Commissioner and currently State Research Officer and Peer Support Coordinator. Away from St John he has spent much of his professional career as an ambulance officer, the positions he has held including Deputy Chief Ambulance Officer with the Queensland State Emergency Service. Among his many professional achievements has been his prolonged, intense and almost single-handed effort to establish an ambulance transport service in East Timor in the period 1999–2002. He also spent 23 years as a member of the Royal Australian Army Medical Corps. He holds degrees in adult education and science (psychology) from the University of Southern Queensland and is currently completing a Master of Counselling degree at the Queensland University of Technology. Mr Little is one of the few St John Ambulance historians with an ongoing research and writing program. His specialty is St John 'collectibles', on which he is Australia's pre-eminent expert and his papers on the topic are published in the leading journals of collectibles. At a general seminar of the Melbourne Priority Conference in 2005 he spoke on the topic of 'The Little Black Book' (i.e. the original series of St John first aid training manuals). His topic for the following paper follows on from that earlier presentation.

## Abstract

In 1878 the St. John Ambulance Association began what was to become one of the greatest community phenomena of our time, the teaching of First Aid. The Association published the first edition of its own textbook which was called *Aids for cases of Injuries and Sudden Illness*. The term First Aid was said to have made an entry into the literature and the English language, in July 1879. According to (Fletcher, 1929), records indicate that the term was recorded in the resolution of the Central Executive Committee, which introduced the Medallion (First Aid) at that time. Fletcher went on to report that the term was clearly a blending of first treatment, one of the original objects of the Association, and of National Aid, as the original societies were termed. It is also reported in Fletcher's work, that Dr. James Cantlie Stated that the term was first used at one of the public meetings of 1878. Another significant term that was to enter the literature was that of First Aider. This term was of later origin, making its first appearance in the *Journal of First Aid* in September 1894, when it seems there was great discussion as to the most suitable generic term for those who practiced First Aid. It was invented by the editor, Dr. Heaton Howard, who defined it as any person who has received a certificate from an authorized association that he (or she) is qualified to render First aid (Fletcher, 1929). In the wake of these developments, more First Aid publications were to follow, and this paper will provide an overview of those considered by the author to have significance in the continuing promotion of first aid instruction, some of which were still in edition well into the middle of the twentieth century.

This paper will not include in detail the St John Ambulance Association textbook, *First Aid to the Injured*, which has been given detailed expression in a previously published paper *The Little Black Book* (Little, 2005), published in *Collectables Trader*, 2005 and presented as a paper at the St. John Ambulance National Conference-Melbourne, 2005. A brief report was also given on the contribution of the first author of the Association's textbook, Surgeon Major Peter Shepherd. Between 1878 and 1894 several publications became available, and of these the book considered most significant, was that of Dr Friederich Esmarch, Professor of Surgery at the University of Kiel, and noted military surgeon. His small book entitled *First Aid to the Injured: Five Ambulance Lectures*, appeared in March 1882 in Kiel, Northern Germany. It was at this time that Esmarch founded the Samaritan School and the Samaritan Society, through which he began and developed the teaching of first aid throughout Germany and Austria. Although attributed with introducing the triangular bandage, it is probably more historically accurate to report that he introduced this bandage into the German Army as a part of the First Field Dressing to be carried by every soldier (Little, 1999) (Carling, 1939). Interestingly, in this manual, he still uses the term Handkerchief Bandage (p.99). In August of 1882, Esmarch's manual was translated into English by H.R.H. Princess Christian, (a daughter of Queen Victoria), who was married to Prince Christian, of Schleswig-Holstein. In her Translator's Preface, Her Royal Highness makes this comment:

'So much interest had been excited by the Ambulance Lectures delivered all over the country during the last few years, that I feel I need make no apology for publishing this translation of Professor Esmarch's Lectures on the same subject: their excellence and their clearness will suffice to commend them to those interested in this work.

'This translation is not in the least degree meant as a substitute for Dr. Shepherd's little handbook; but, having personally attended the Ladies Classes of the Windsor Centre of the St. John Ambulance Association, I---and probably others besides myself felt the want of a more detailed account of the work aimed at than supplied by notes made at the time: such a want Professor Esmarch's Lectures seem to supply.'



Ambulance Lectures by John M. H. Martin was written and published in 1886. This Edition has personal as well as literary significance to the writer. In the late 1960s this book was found in Tyrrell's secondhand bookstore in Sydney, and was to be the beginning of a collection of First Aid and Ambulance literature that encompasses 127 years of first aid literary history and - 10 years of collecting, now amounting to a bibliography of more than 300 titles. Martin, (1886), was Honorary Surgeon at the Blackburn and East Lancashire Infirmary, and Honorary member of the St. John Ambulance Association. In the preface he points out that his Lectures were given under the auspices of the Association. He also states that the Lectures are published almost verbatim as they were delivered to separate classes of both sexes in 1886, and a chapter on Nursing was also included. The little book includes a dedication to H.R.H. Princess Christian, acknowledging her unceasing interest and active influence that have done so much to promote ambulance work in England. As literature of this period is reviewed it seems that authors in this field moved between terms of First Aid; Aid in cases of sudden illness and injury, and Ambulance Work. The major differences in the subject matter of such books, were at the discretion of the authors, and seemed to vary most in the approach to transport of the casualty.

According to Fletcher (1929), the St. Andrew's Ambulance association was formed in Glasgow on the 7<sup>th</sup> May 1882. This association was incorporated by Royal Charter in 1899, and completed a compact in 1908, with the Order of St John, which agreed to disband its Association Centres North of the Tweed. In the meantime, the first edition of the St. Andrew's Ambulance association handbook appeared in September 1891 under the authorship of a Glasgow surgeon, George Thomas Beatson. Beatson graduated from the Edinburgh University Medical School in 1874, being awarded the Lord Lister Medal for Clinical Surgery in 1872. As well as founding the Scottish Branch of the Red Cross, he was also instrumental in the establishment of the St. Andrew's Association, Ambulance Movement. It is not the intent of this paper to provide a detailed biography or to list the many medical achievements of Dr. Beatson, other than to add that he was knighted for his services to medicine and the community in 1907 and died in 1930. The manual authored by Beatson, (1891), was quite unique for a number of reasons. The first edition in 1891, Ambulance Hand-Book on the Principles of First-Aid to the Injured contained 383 pages of text, with each chapter beginning with a quote.

For example, chapter II, on the structure and function of the body opens with a quotation from Shakespeare's Hamlet, Act ii, scene ii, and goes thus:

'What a piece of work is a man! How noble in reason! How infinite in faculties! In form and moving how express and admirable! In action how like an angel! In apprehension how like a God! The beauty of the world! The paragon of animals!'

To introduce chapter III, on fractures and bandaging, he quotes from King Lear, Act iii, scene vii:

'I'll fetch some flax and whites of eggs to apply to his bleeding face.'

No other first aid work is known to have followed Beatson's lead in waxing so lyrical and introducing some literary thought to the subject of first aid. He also used his opening chapter to highlight the fact that in Great Britain at this time some 17,000 people died each year from accidental causes, and some 1,500,000 others were disabled permanently or partially from accidental causes. Mention is given of the industrial accidents and accidents caused from travel and the pursuit of leisure as well as other numerous occupations. Worthy of mention is the story of the origins of a picture which at the time of the compilation of the Ambulance Hand-Book was being exhibited at the Royal Academy, London. Painted by Mr. Yates Carrington, an eminent dog painter of the period it was titled *The Out-Patient*. Time and space do not permit a full description of the event that inspired the painting, but in brief it is said by Beatson that the event took place at King's College Hospital, and was reported in the *Pall Mall Gazette* for March 31<sup>st</sup> 1891. Three local dogs that had been seen hanging around the hospital, one night appeared at the Out-Patients door, where they barked to attract the attention of a night porter. The Porter allegedly investigated to find two small terriers with an injured long haired collie dog which was bleeding profusely from a gash in one of its front legs. When the porter arrived the terriers left their injured companion, who was treated and then allowed to leave again. Further investigation alleges that the two terriers had escorted their injured friend for quite some distance to get help for a wound which could have resulted in the collie dog bleeding to death. A touching story, and typical of Beatson's writing on the topic of first aid. There are lots of other fascinating aspects to this manual, which historians may find interesting and it is acknowledged by the author as a significant work.

In Australia, the first known first aid manual to be published was the New South Wales Railways Ambulance Handbook, (which appeared prior to 1892), issued by the Commissioner for Railways. The exact date of the first edition is not known at the time of writing this paper. Research indicates that the New South Wales Railways Ambulance Corps was formed in late 1888. The Second Edition (Woodward, 1892), in the author's collection, reports that by this time there were over 600 members, and that good work was being done by its members throughout the Colony. The Fourth Edition 1903, still by Woodward (Railway Medical Officer), states in the preface that in December 1888, (the year of its formation), the Corps numbered 191 members, and by 1903 there were now 1,750 members. In 1910 the Handbook was into its Sixth Edition, and the Author was (Taylor, 1910). Railway Medical Officer. Research to this time, indicates that the New South Wales Railway Ambulance Corps was the only body to have a manual independent of the St. John Ambulance Association, in Australia. This handbook was and still is unique, but as far as can be determined did not continue after the 1920s. The Australian Red Cross Society, did not produce an Australian Manual until 1951, and The St John Ambulance Association in Australia did not produce a manual totally independent of the parent body in the U.K. until 1969.



In the meanwhile, back in Great Britain, the First Aid and Ambulance Manuals were still coming. In 1894 another Manual of Ambulance was written by J. Scott Riddell, a surgeon from Aberdeen in Scotland. After his surgical qualifications Riddell lists his involvement as a lecturer and examiner to the Aberdeen Ambulance Association; St. Andrews Ambulance Association (Glasgow), and the St. John Ambulance Association, London. This book is very comprehensive and incorporates some of the military principles of casualty management, as well as an extensive coverage of ambulance transport of the day. The photographs used in the chapter on Ambulance Transport and Stretcher Drill, show what appears to be, members of the British Army Hospital Corps. Historians are to be reminded that 1894, the formation of the Royal Army Medical Corps (RAMC), was still four years away.

In June 1898 the RAMC was born (McLaughlin, 1972), and probably the first RAMC Manual to be published by the War Office was in 1899. In the end papers of this Manual mention is made of an edition published in 1894. The 1899 edition gives us a good overview of the formation of the RAMC, its training fundamentals and some of the equipment issued to and used by Army Surgeons and their assistants. There is evidence to suggest that Medical services of the Colonial Defence Forces of Australia followed the British Model, to a large extent even after the formation of the Australian Army Medical Corps on the 30<sup>th</sup> July 1902. (Gurner, 1970) (Pearn, 1996). The 1911 edition of the R.A.M.C. manual was reprinted in 1915 and further editions and reprints took it on into the World War of 1939-1945.

One of the truly classic First Aid and Ambulance Manuals was first published in 1903, under the title of First Aid to the Sick and Injured: An Advanced Ambulance Handbook (Warwick, 1903). This excellent manual continued through many editions into the 1950s. The author's were F.J. Warwick and A.C. Tunstall. Warwick wrote an American First Aid manual in 1910 in Philadelphia, under his own name. Although there is a copy of the American publication in the collection of the writer, there are no other details about why or what Warwick was doing at this time that resulted in this edition. In the meantime, he continued as co author of the original British manual until at least 1917. By 1932 the Manual was under the editor ship of F.C. Nichols, and the book was then known as Warwick and Tunstall's First Aid to the Sick and Injured; An Advanced Ambulance Handbook. At the time of joining the St John Ambulance Brigade in 1955, the writer's experience of First Aid manuals outside of the official St John Literature was very limited, and it was implied that to read any other First Aid Manual was bordering on heresy. However in company with a close colleague, Warwick and Tunstall's book was read, and it became a closeted favourite.

The British Red Cross Society did not produce its first publications on First Aid and Nursing until the autumn of 1911. Three manuals were published at this time under the authorship of Dr. James Cantlie, these were manuals on First Aid, Nursing and Training. At this time the War Office approved the issue of First Aid and Nursing Certificates under the banner of the Red Cross, and these were recognized by The St. John Ambulance Association (Oliver, 1966). As stated earlier the Australian Red Cross Society did not produce its own Australian edition of a First Aid Manual until 1951.

A very interesting little manual produced by the United Gas Improvement Society of Philadelphia, in 1905 deals specifically with First Aid for Persons Overcome by Illuminating Gas, and by 1915, this manual was in its fourth edition (Company, 1915). The most interesting aspect of this manual is its promotion of the use of a portable resuscitation device known as a Pulmotor. The Pulmotor can be found in other literature well into the 1920s, and in 1918 was employed by the Chicago Police for use in Riverside resuscitation. The device was carried in a Police motorcycle and sidecar designated as the Pulmotor Ambulance. When a call was received for assistance a police officer trained in the use of the Pulmotor would dash to the scene of the tragedy to attempt resuscitation of the victim. The topic of early portable mechanical devices for resuscitation is the subject of further research by the writer.

Finally the matter of commercial First Aid books deserves some attention. These were appearing as early as 1901. The Johnson & Johnson Manual was the most prominent and probably the earliest, publishing its first edition of a First Aid manual in 1901 and a more blatantly commercial handbook in 1911. These books were designed to serve as manuals of instruction while at the same time promoting the use of the J&J brand of bandages etc. The editor of Johnson's First Aid Manual was one Fred Kilmer. Kilmer listed his associations as: Instructor in First Aid; Member of St. John Ambulance Association; of the international Congress of First Aid and Life Saving; of the American Public Health Association; of The Royal Society of Arts etc., etc. (Kilmer, 1912). One other interesting fact about this man is that he was the father of Joyce Kilmer, the well known poet who wrote: I think that I shall never see, a poem lovely as a tree.... Joyce Kilmer was killed in action in France when America entered the Great War of 1914-1918.

In conclusion, this paper has been presented to give a simple overview of pioneer literature in the field of First Aid and Ambulance Work, based on research and collection. It was never the intention to provide comprehensive biographical details of authors, which could be the subject of another paper, nor was it the intention to comment on the development of First Aid instruction or the technical content of the literature mentioned.



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## A gap-filling exercise': (1) Dan Brown, *The Da Vinci Code* and the Knights Templar; (2) A history of the published St John histories in Australia

by Ian Howie-Willis

The author: Information about Ian Howie-Willis is given above in the introduction to his earlier paper, 'Jolly good show'. As the title of this present paper suggests, the paper was a stop-gap presentation made because another presenter had to withdraw from the seminar program shortly before it took place. In addition, the present paper is in two separate parts, which are on unrelated topics.

### Introduction

At this session of today's History Seminar you were supposed to be hearing the advertised paper by Alan Caust of Alice Springs. Alan's paper has the title "Too young to die: The sad story of a young doctor and his wife who perished on an errand of mercy in Central Australia in 1942". Alan's paper is about the death in the outback beyond Tennant Creek of a young medical practitioner, Dr Walter Straede, aged 23, and his wife, Vivian, aged 20. It is thought that they died of exposure on 9 March 1942 after getting lost while driving several hours out of Tennant Creek when answering an emergency call from an outlying cattle station. Dr Straede was the recently appointed medical officer in Tennant Creek

There are St John Ambulance connections to this story because Dr Walter Straede was the older brother of Dr Bill Straede KStJ, of Bendigo and Point Lonsdale, Victoria, who was for many years a senior medical officer in the St John Ambulance Operations Branch in Victoria. A keen student of history, Dr Straede is a member of this Historical Society and greatly enjoyed attending our History Seminar in Alice Springs two years ago.

Another St John connection is that the needless Straede tragedy was one of the factors prompting Alan Caust to become one of the prime movers in the publication of the St John Ambulance handbook, *Survival: Remote Area First Aid*, first released in 1991. Alan had been posted to Tennant Creek as an ambulance officer 14 years before that, and had found the Straedes' sad grave in the local cemetery. He became curious so did some research, and then some more.

Last year he became really hooked on the subject after he'd begun doing research in the records of the National Archives of Australia. He approached me for advice, so I put him in touch with Dr Bill Straede down in Bendigo. Bill provided Alan with much helpful information from the family archive. The story that Alan uncovered is an amazing one. I could see he was on to something great, so I encouraged him to write up his research for today's History Seminar. He has been beaver away at it ever since. What has emerged is a scandalous story of a huge cover up by officials and politicians, who didn't want the truth of what had happened to leak out. Was there foul play? If so, that was another reason for burying an incident that happened just after the Japanese had begun bombing Darwin and other northern towns and the government in Canberra was rather preoccupied with other urgent business. The great tragedy of it all was that the Straede family could never discover the whole truth; and so the young Straede couples' parents went to the grave not really knowing what had happened, despite their persistent inquiries.



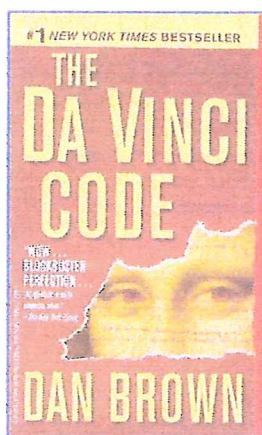
Alan would have been here to tell you this story himself, but about five weeks ago his work commitments in Alice Springs, where he's now a nurse educator, made it clear that he would be unable to be with us here in Perth. Alan is therefore in Alice Springs today regretting that he can't be here in person to relate to us the Straede family saga that he has unearthed through diligent, enterprising research.

That's a great pity, and so I present his deep apologies. We've agreed that he'll tell the Straede story at next year's History Seminar in Canberra. I urge you to think seriously of going there next year to hear a fascinating account of the sad historical even that was the genesis of the St John Ambulance Remote Area First Aid handbook.

Alan didn't want his withdrawal to leave a gaping hole in our program today, so what could we do? Well, when you're the Priory Librarian, the secretary of this Historical Society and a practising historian, what you do is fill the gap by rustling something up. What I've rustled up consists of, first, a debate with Dan Brown, the author of *The Da Vinci Code*, now a blockbuster movie, over his depiction of the Knights Templar, the comrades of the Knights Hospitaller, our ancestral Order; second, I'll give a short account of the published histories of St John Ambulance in Australia.

## Dan Brown's novel *The Da Vinci Code* and the Knights Templar

I'll start with Dan Brown and *The Da Vinci Code*, both book and film, because they're a rather more straightforward to deal with than the books written in Australia about St John Ambulance.



The background to this matter is that three years ago, in 2003, Dan Brown, a lecturer in creative writing in a university in US who had turned novelist, published a racy, page-turning thriller dealing with some very ancient history.

*The Da Vinci Code: a popular novel that has become a cult, but based on suspect speculative history.*



Dan Brown,  
author of *The Da Vinci Code*.

The book was an instant success; it has remained at the top of the best-seller lists ever since; it has now sold 40 million copies worldwide — and that was before the blockbuster film of the book starring Tom Hanks was released five weeks ago today.

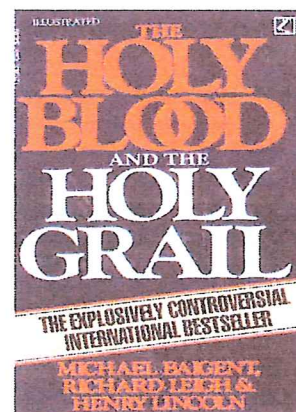


Tom Hanks and Audrey Tautou, hero and heroine  
of the film version of *The Da Vinci Code*.

Brown borrowed many of his ideas in *The Da Vinci Code* from a strange, convoluted history published 21 years earlier by three historians, two British and one originally from New Zealand — *The Holy Blood and the Holy Grail* by Michael Baigent, Richard Leigh and Henry Lincoln.

So much did Brown borrow, indeed, that earlier this year Baigent and Leigh sued him and his publisher, Random House, for plagiarism in a much publicised law suit in London. Baigent and Leigh, whose own book had also been published by Random House, lost the case; but that didn't really matter because the sales of both books skyrocketed after all the publicity of the trial, which was front-page news around the world for weeks.

*The Da Vinci Code borrows heavily from the esoteric historical theories presented in The Holy Blood And The Holy Grail, the 1982 book by Baigent, Leigh & Lincoln.*

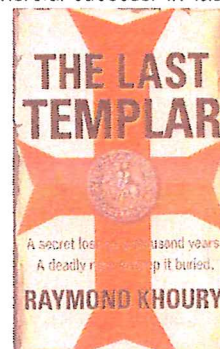




If you think all that sounds complicated, wait until you hear the plot of *The Da Vinci Code's* and *The Holy Blood and the Holy Grail*. In brief, both books argue as follows:

- Jesus Christ was married to Mary Magdalene and they had children. Somehow Jesus survived the crucifixion. The family then fled to the south of France, where they lived out the rest of their lives. They left behind descendants whose own descendants survive to the present day.
- The descendants later married into the Merovingian dynasty of kings, who ruled France during the dark ages.
- At some time before the Crusades, a mysterious secret society called the Priory of Sion formed to protect the sacred bloodline of Jesus and Mary Magdalene. The Priory also survives to the present day, and its Priors have included some of the most famous people in European history, for instance the artist Leonardo da Vinci (hence the name of Dan Brown's book) and the mathematician-physicist Sir Isaac Newton.
- Using allegorical language, the Priory invented the legend of the Holy Grail, which is usually assumed to be the cup from which Jesus drank at the Last Supper. The Grail, however, is not a physical object but a metaphor or symbol for Christ's sacred bloodline; and the cup is not a drinking vessel but the womb of the Magdalene from which the bloodline sprang.
- The Priory of Sion was the instigator of the Crusades because it wished to restore the sacred bloodline to its rightful place as the ruling dynasty in the Holy Land; and that meant capturing the Holy Land from its Muslim rulers.
- Shortly after the Crusaders captured Jerusalem in 1099, the Priory of Sion established the Order of Knights Templar, comrades-in-arms of our Order of Hospitallers. The ostensible reason was to have an organisation that could protect the Christian pilgrims to Jerusalem; but the real reason was to have at hand a powerful, disciplined body of 'minders' who would protect Christ's bloodline.
- The Church has always known about the sacred bloodline but seeks to discredit it. The church also wishes to defeat the bloodline's protectors, the Priory of Sion and the Knights Templar. Why? Well, if Jesus survived the crucifixion there could have been no resurrection, which is the central principle of Christianity. Stated simply, "No Christianity without the Resurrection." And if Christ had been married and had produced children he wasn't the celibate chap promoted by 2000 years of church teaching. The church succeeded in abolishing the Templars in 1307 but has not yet defeated the Priory of Sion.

What can we make of it? Well, as a conspiracy theory, it's about as grand as they get. But how good is it as history? The answer is, 'no good at all' — more fantastical than factual, a fiction created by a vivid imagination, a work full of conjecture and supposition rather than verifiable historical events. But that hasn't stopped it becoming a huge commercial success. In fact *The Da Vinci Code* is such a gold mine it's spawning a whole new industry of imitations hoping to cash in on the boom in Templar esoterica. Here's one that appeared last year — Raymond Khoury's thriller *The Last Templar*, which argues that the Templars were suppressed because they had devised a novel scheme for uniting Christianity, Judaism and Islam within the one grand religion and was therefore a great threat to the power of the papacy. And then, as if that weren't enough, it puts the Templars in possession of a manuscript written by Jesus in which he claims that he's just an ordinary carpenter and not the Son of God. Here's another of the genre, Lynn Picknett's and Clive Prince's *The Templar Revelation*, which argues that the Templars were the guardians of the sexual union between Jesus and Mary Magdalene, in memorialising which they invented the pointed Gothic arch, which is allegedly an inverted architectural symbol for Mary's vagina. (I'll never again be able to look at a Gothic arch without blushing!)



Raymond Khoury's *The Last Templar*



Steve Barry's  
*The Templar Legacy*:

just two of a rash of books cashing in on the success of *The Da Vinci Code*.

And here's another one, Steve Barry's *The Templar Legacy*, which, published this year, has the Templars continuing on in secrecy right up to the present in a monastery in the Pyrenees, where they keep the bones of Jesus in a vault.

If you visit any airport bookstore, you'll find there are dozens of books like these. Suffice to say that most of them present such wilfully wrong history that Pamela Willis and her friends at St John's Gate have recently been forced to publish a pamphlet inviting the public to learn about the real history of the Templars and Hospitallers by visiting the Order's Museum. The problem with *The Da Vinci code* and its copy-cats is twofold. First, the general public assumes that such books are indeed history not fiction. Secondly, the gold mine opened by Dan Brown is so rich that dozens of authors are jumping on the band-wagon in hope of cashing in on the Templars. Amidst the proliferating genre of fancifully false Templar histories there are so many that



are so plausible that Templar myths multiply almost exponentially so that even for an historian to sort out fact from persuasive fiction demands effort.

I don't have time to read you a treatise demolishing the history of The Da Vinci Code and its proliferating copy-cats. I'll simply wrap up this section of my address by pointing to a few facts that The Da Vinci Code gets wrong.

- First, the grand finale of the book takes place in Scotland at Rosslyn Chapel, seven miles south of Edinburgh, very near my ancestral territory as a matter of fact. Rosslyn Chapel is the most ornate stone edifice almost anywhere in the world. Built over a 40-year period 1446–1486, its thousands of carvings are a phantasmagoria of mystic symbolism, Christian, Masonic and pagan. Generations of scholars have pondered their meaning without ever agreeing. The Da Vinci Code maintains, however, that it's all ultimately to do with the Holy Grail and the Priory of Sion.
- The Da Vinci Code says the chapel was built in 1466, which is incorrect, being only the average of the two already named dates, 1446 and 1486.
- Even more wrong, the book says the chapel was built by the Knights Templar. The Templars, however, had disappeared from history 160 years before then. The Order of the Temple was abolished in 1307.
- Finally, the book has the Templars being suppressed because they believed in the principle of the "sacred feminine", which is all to do with the procreative power of goddess-figures, including Mary Magdalene and the female gods of pagan religions. All the evidence, however, is that the Templars were very devout and very orthodox in their Catholic belief, strict adherents of church doctrine.

*Rosslyn Chapel,  
Midlothian, Scotland: a  
phantasmagoria of  
esoteric stone carving  
and the scene of the  
climax to The Da Vinci  
Code. Dan Brown conveys  
an historically  
inaccurate account of  
its building.*



I could go on in this vein, but I won't. I hope I've said enough to persuade you that when you read Dan Brown's book or see the Tom Hanks movie you might be experiencing a rattling good adventure yarn but you certainly won't be learning anything much that's true of the Knights Templar of history.

I'll now address myself to the task of telling you about some works of history that are more reliable than what you'll read in The Da Vinci Code, that is the St John Ambulance histories published in Australia over the past 88 years, since the first of them appeared in 1918.

### Australian histories of St John Ambulance

By my count at least 22 St John histories have been published in Australia. Of this number, four are general national histories produced for different purposes and different audiences; seven are general State/Territory histories, nearly all of a commemorative kind; and finally there is an unknown number of local, Divisional and sectional histories, of which I'll mention nine.

What this list doesn't include is published works where the main focus is on something other than St John Ambulance. Not on the list are therefore works such as these:

- Personal memoirs, for instance one by an eminent Western Australian St John personality, the former District Commissioner here, Alan King, whose biography, *A Question of Duty*, was published in 2004. While this most entertaining book includes substantial sections on St John Ambulance, it is essentially a biography rather than a history of St John Ambulance. On the other hand another memoir by another eminent Western Australian St John figure, Ruth Donaldson, is included on the list. Her *Follow A Nursing Star* is more about her Brigade Division, Perth No. 1, which celebrated its centenary two years ago, than it is about herself.



- The list doesn't include histories of other organisations, which, even though they make frequent reference to St John Ambulance, are essentially about the other organisation(s) rather than St John. In this category is the book authored by the greatest Western Australian St John personality of them all, Ian Kaye-Eddie, who in 1996 published the book, *A Short History of the Convention of Ambulance Authorities*.
- Nor does the list include the high-quality journal of this Historical Society, *St John History*, five annual volumes of which have now been published. Though mostly about St John history, the journal's contents are disparate — essentially a random collection of articles which, while interesting in their own right, do not follow a consistent historical theme like a book does.
- And finally, my list doesn't include "works-in-progress", that is books still to be published, for instance the projected history of the St John Ambulance Operations Branch in the Australian Capital Territory currently being researched by Richard Caesar-Thwaytes.

Well, if I don't include these on my list, what do I include? The answer is simple: to be included on my list, a published history has to be a book on the Order of St John, or on St John Ambulance or on one of the component branches of the St John 'family'. In order of publication, the first two of these in Australia were:

Dr Thomas Storey Dixon's, *A Short History of the St John Ambulance Brigade in Australia*, a long booklet (or short book), published in 1918 by the Commissioner of the New South Wales District of the Brigade. The title is a misleading because the booklet/book is almost entirely devoted to New South Wales. Western Australia, Victoria and South Australia, the other States with Brigade Districts at that time are only briefly referred to.

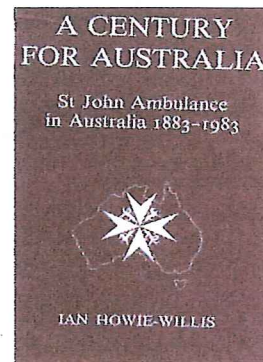
*Dr Thomas Storey Dixon (1854-1932),  
third Brigade Commissioner in NSW,  
chief instigator of the failed first  
experiment in St John Ambulance  
federalism in Australia —  
the Central St John Council for Australia,  
and author of the first history of  
St John Ambulance in Australia (1918).*



- The next published history was one anonymously produced some time before 1952 by the Victorian District of the Brigade under the title *A Short History of the Order of St John*. The emphasis was the Order and its ancient origins, with the sections on the modern era dealing mainly with events in Victoria.

Jump forward 30 years to the early 1980s and we enter the era of the St John 'blockbusters' — the major commemorative national and State histories. All of them have been comprehensive, general histories. In order of publication they are:

Ian Howie-Willis, *A Century for Australia: St John Ambulance in Australia 1883-1983*, a commissioned work published in 1983 by the Australian Priory of the Order to commemorate the centenary of continuous St John activity in this country. This work, incidentally, was what brought me into St John 26½ years ago.

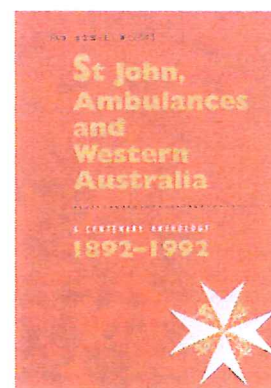


**SOUTH AUSTRALIANS AND  
St John Ambulance**  
1885-1985



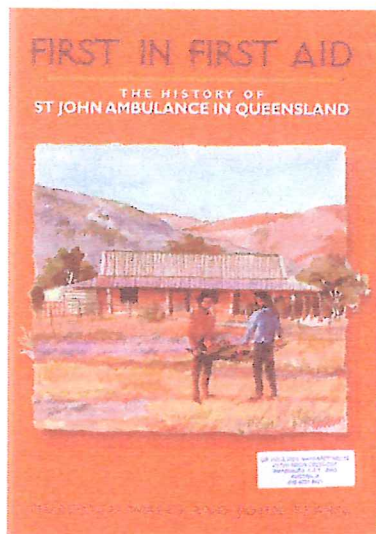
Ian Howie-Willis, *South Australians and St John Ambulance 1885-1985*, another centenary history, this time published by the South Australian St John Council in 1985.

Ian Howie-Willis, *St John, Ambulances and Western Australia 1892-1992*, the third of the major centenary histories, published in 1992 by St John Ambulance Australia (WA) Inc., the central umbrella organisation for St John activity in this State.





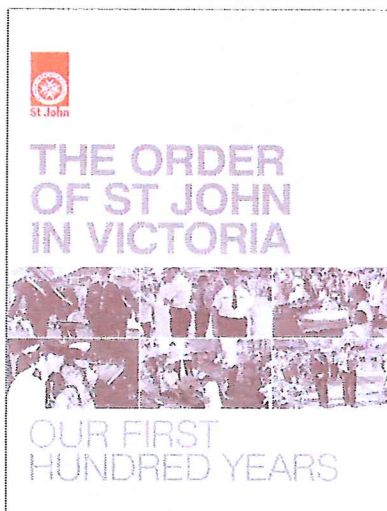
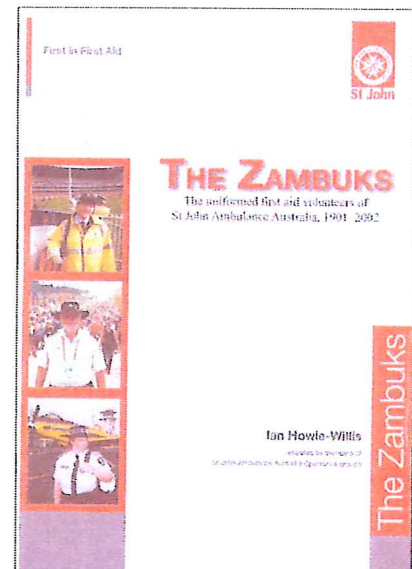
Edith Khangure and Ian Howie-Willis, *Reflections and Directions: A History of the Commandery of the Order of St John in Western Australia 1947–1997*, a commemorative work published in 1997 to mark the 50<sup>th</sup> anniversary of this State's Commandery, or the State-level ceremonial body parallel to but subsumed within the Australian Priory of the Order.



The next year, 1998, came the first major history that didn't have the name 'Howie-Willis' on the cover. This was one that out-blockbusted all the others — Murdoch Wales's and John Pearn's, *First in First Aid: The History of St John Ambulance in Queensland*. One sad aspect of its publication was that Murdoch Wales didn't live to see it. He died some months before its release after labouring on it for the best part of a decade.

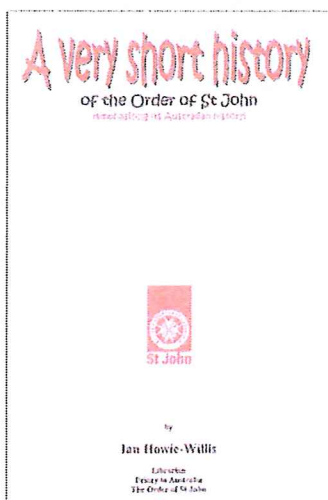
The next in the series to roll off the presses did so four years later, in 2002. This was Ian Howie-Willis's *The Zambuks: The uniformed first aid volunteers of St John Ambulance Australia*.

This was the official centenary history of St John Ambulance Brigade/Operations Branch in Australia



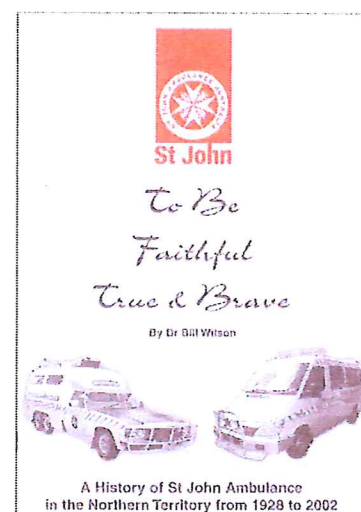
Then finally, two years later in 2004, came Millie Field's long awaited *The Order of St John in Victoria: Our First Hundred Years*, the most recent of the major national and State general histories.

In a stratum less grandly ambitious than those at the blockbuster level are two other important works of general history. These are:



Dr Bill Wilson's *To be Faithful True & Brave: A History of St John Ambulance in the Northern Territory from 1928 to 2002*. Launched during the Priory Conference in Alice Springs two years ago, this was the official commissioned history of St John Ambulance in the Northern Territory.

The same year, 2004, came yet another (and probably the last) St John book bearing the name 'Howie-Willis' — *A very short history of the Order of St John* (emphasising its Australian history), a book for Cadets studying for the 'Knowledge of the Order, proficiency badge.



It was commissioned by the national Cadet leadership and is so far the only Australian St John history published solely on the Internet, on the St John Ambulance Australia website.

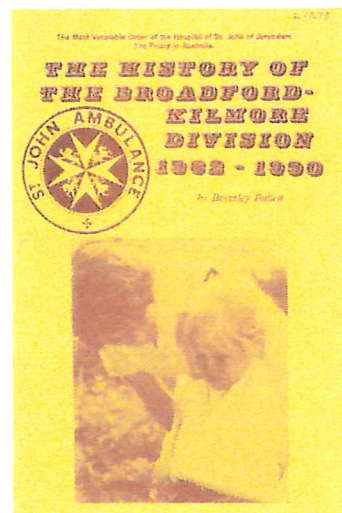


Apart from the books already mentioned there are many others, usually smaller in size, more limited in scope and less ambitious than the blockbusters. Those in this group can be categorised as local, Divisional or sectional histories. I lack the time today to mention all those of which I am aware. The nine I will mention, and they're probably just the tip of a very large 'iceberg', are:

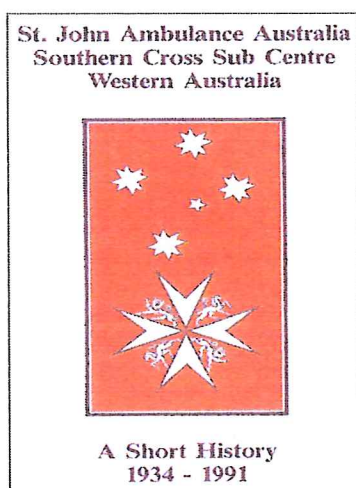
John Berry's St John Angaston 40th Anniversary: A Short History [of the] St John Ambulance Cadet Camp, Angaston [South Australia]: 40 Years 1951-1961, a commemorative history of somewhat more than booklet length.

The Divisional history, Adelaide (Motor Cycle) Ambulance Division Formed 1932: 50 Years with St. John 1939-89, published by the St John Ambulance Brigade South Australia District in 1989.

Beverley Bullen's The History of the Broadford-Kilmore Division 1962-1990, a 'classic' Divisional history of a country Brigade-Operations Branch unit in Victoria.



Another worthy Victorian publication is Footscray Brigade Division's 50<sup>th</sup> anniversary history, Fifty Years of Service: 1914-1964, which was updated a decade later when the 60<sup>th</sup> anniversary was reached. I hope it will be upgraded and re-issued in eight years' time when the Division reaches its centenary.



Ian Howie-Willis's 1991 mini-book, St John Ambulance Australia Southern Cross Sub Centre, Western Australia: A Short History 1934-1991, was a history of a rural Western Australian ambulance sub-centre maintained by St John Ambulance, one of many such works published by ambulance sub-centres in this State.

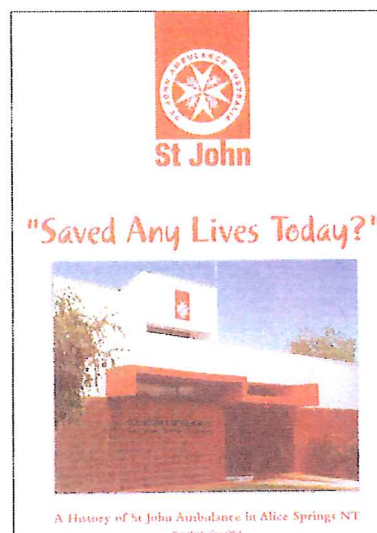
Another eminently notable work in this genre is Billie Andrews' substantial history of the Esperance sub-centre published about 2001. Unfortunately I couldn't locate a copy so I cannot provide you with an illustration.

The late Erroll Jones's, A Short History of St John Ambulance Australia (N.S.W.) in the Newcastle Area 1883-1999, published in 1999;

As far as I know the only centenary history of an Australian St John Division has been Betty Stirton and Loredana Criniti's booklet, Centenary of the Operations Branch in Australia 1903-2003, a booklet compiled by the Archives section of St John Ambulance Australia (NSW) in connection with the official celebration of the centenary of the Glebe Division.

And then there's one of my special favourites, Pat McQuillen's Saved any lives today?

A History of St John Ambulance in Alice Springs. One of the best of the local histories, it was launched — very appropriately — during the Priory Conference in Alice Springs in 2004.



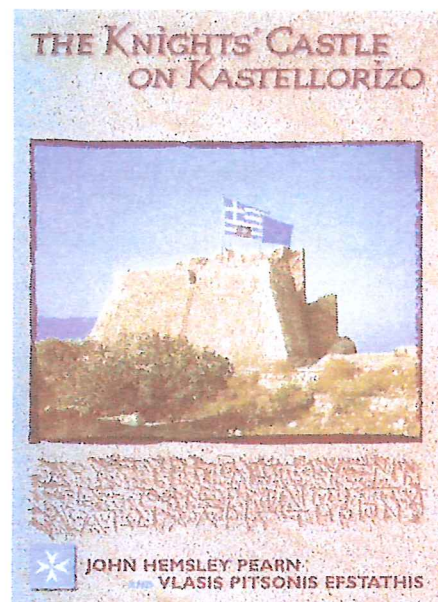


The final book on my list is in a category of its own. It deals with an aspect of the history of the ancient Order of St John, specifically one of the castles of the Knights of St John on the island of Kastellorizo, one of the Dodecanese Islands near Turkey in the western Mediterranean, an island to which many Australian St John Ambulance members of Greek origin have ancestral ties.

The book is John Pearn's and Vlas Efstathis's *The Knights' Castle on Kastellorizo: The Order of St John and two centuries of strategic defence at the interface of Europe and Asia*. Published in 1999, it was launched here in Perth the last time we in town for a Priory Conference. A very happy occasion it was too, for Perth's Kastellorizan community and the many St John folk who attended.

*Not about St John in Australia  
but produced in Australia by Australians:*

*The Knights' Castle on Kastellorizo (1999)*



As you might have concluded from what I've said, St John Ambulance in Australia has been remarkably productive in adding to the ever-expanding world-wide corpus of St John historical writing. That's not the end of the story, however, for there are all the as yet unwritten histories still to come in the years and decades ahead. There'll be many divisional histories as the older divisions and sub-centres pass their 50<sup>th</sup>, 75<sup>th</sup> and 100<sup>th</sup> anniversaries. There are significant members of the St John 'family' that merit the blockbuster treatment, most notably the Ophthalmic Hospital in Jerusalem and eventually here in Australia the Community Care Branch. And, who knows?, round about the year 2051 someone might even produce a book called 'Preserving and Promoting the St John Heritage' subtitled 'The 50<sup>th</sup> anniversary history of the St John Ambulance Australia Historical Society'.

What I haven't yet done is give you the argument on why we should bother with keeping on producing them. I'll therefore conclude by briefly saying that individually and collectively the St John histories serve multiple functions. They celebrate achievement. They assist the process of review, by helping focus attention on what has gone right or wrong in an organisation. They help set future directions. And they help rally present and future members to the St John cause.

I'll leave it at that for the time being, dear friends. I hope you all believe that the gaping hole left in our program by Alan Caust's withdrawal has been at least partially filled.

## Occasional Papers

This section of the journal publishes two papers delivered to Priory Conference in Perth in June 2006. The first, 'St John Ambulance, young people and building social capital', was delivered to the Youth Section of the conference by Mr Emil Wajs-Chaczko. Mr Wajs-Chaczko is undertaking degrees and research in Arts and Social Sciences at the Sydney, Charles Sturt and Australian National Universities. His background is in youth development and advocacy. He has been a member of St John Ambulance for 11 years and is currently the State Staff Officer (Human Resources) in New South Wales. He also holds the newly formed position of Policy Coordinator on the Australian Youth Council.

The second paper was delivered to the plenary session of the general Priory Conference seminar on Friday 22 June 2006. The author is Mr Eric L. Barry GCStJ, the Lord Prior of the Order of St John. Mr Barry, a Canadian, is the first non-English person to serve as Lord Prior. He has held the position since 1999, when the international Grand Council of the Order was established. Mr Barry visited the Priory Conference as one of two special international guests, the other being Ms Pamela Willis CSJ, the Museum Curator of the Order at St John's Gate, London.



We thank Messrs Wajs-Chaczko and Barry for allowing St John History to reproduce here the speaking notes of their addresses.

## ST JOHN AMBULANCE, YOUNG PEOPLE AND BUILDING SOCIAL CAPITAL

by Emil Wajs-Chaczko

### Abstract

St John Ambulance has been a volunteer organisation in Australia for well over 100 years. In this time it has developed many young people into active citizens who contribute significantly to enhancing social capital in our communities, often well beyond the age of what is traditionally classified as being 'young'. But what is social capital? How does St John develop young people into progressive builders of social capital in our communities? And most importantly: how can St John improve its performance in building social capital?

This paper examines the above questions by exploring the controversial and often debated notions of what social capital is, examining briefly St John Ambulance's programs in youth development, investigating the link between St John's current youth program and developing social capital before finally making suggestions as to how St John Ambulance can improve our objectives in the future using academic and international references.

In recent years social capital and community capacity have become key notions in Government responses to marginalised individuals and communities (Healy et al, 2004). The problem of weak social ties was proposed by Granovetter (1983) as the cause of various socio-economic problems, particularly unemployment. Social capital was then developed as a concept, predominantly since the 1980's, as an economic term to describe broadly the variety of sociological phenomena pertaining to well-developed social bonds within communities. These social-bonds then eventuate increased community capacity and a more dynamic ability to combat negative effects of social and economic changes (Healy et al, 2004); this is also known as community resilience.

Using Woolcock and Narayans (2000) synergy model of social capital, Healy et al (2004) proposed that not only local ties are critical to developing positive levels of social capital in communities. Rather, Healy et al (2004) argued that policy should not be dominated in the local sphere and that broader institutions, both government and non-government, should be considered when attempting to develop community resilience through social capital.

In this paper it is proposed that non-government organisations with wider governance structures, present in many Australian communities, should also be considered when creating policy. The example of St John Ambulance Australia and in particular, its youth program is used as a case study to examine how St John Ambulance, as an organisation, can develop social capital within our communities. More specifically, the paper aims to examine how young people in St John Ambulance Australia contribute to our healthy community.

From the age of eight years, one may join St John Ambulance as a St John Junior. Within the St John Cadet movement young people actively begin to contribute to society and in particular their own communities, whilst of course undertaking their own personal development.

Young people from this point on, may be involved in St John Ambulance in many ways; whether it be as a young person undergoing youth development, being involved in youth leadership programs, wider community training, participating in advocacy and organizational/leadership or even organisational governance.

Throughout this plethora of activities it is clear that St John is creating many links, whilst some are at an organisationally-wide level, the majority are formed in local bonds, fostering the notion of social capital development, in this case, through volunteerism and personal development.

It is clear from the various methods in which young people can participate within St John Ambulance that social capital, in 'healthy communities' is strengthened by St John Ambulance's various means of participation. St John is present in most Australian communities; its presence is often taken for granted, even though it is largely, non government funded.

Young people involved in St John Ambulance form a strong source of both current and projected social capital in their participation.

The methods in which these young people operate whether it is through their volunteering, participation in local programs or furthering their own education is a strengthening mechanism for building social capital and in turn community capacity and resilience.



It has been noted (ACA, 2005) that the majority of young members within St John join because their friends join. Given this research data it is argued that the social capital (in particular by using social bonds as primary data for measurement) is enhanced in local communities by young people and their involvement in St John, leading to healthy communities.

In recruitment and retention of young people by the organisation, St John is providing a strong source of social capital for building community resilience to social and economic change.

But how can St John further this contribution to community capacity building?

Surely increased recruitment and retention would be required to increase the provided social capital and community bonds.

The ACA (2005) report commissioned by St John Ambulance Australia highlights the primary reasons for young people joining. It also highlights the encountered and perceived deficiencies which need to be addressed to ensure that St John Ambulance strategically places itself as the social capital building organisation it has traditionally been, and indeed, to exceed our previous levels of socio-economic contribution.

St John Ambulance needs to ensure that it is dynamically evolving, not only for its own organisational sustainability, but the ultimate sustainability of our healthy communities.

The ACA report has highlighted the following means of making our organisation more appealing to young people.

- More flexible volunteering opportunities.
- Using social networks to promote membership.
- Vibrant promotion of interesting programs.
- More publicity and a 'cooler' image.

The ongoing production of social capital to develop resilient communities is a core business of St John Ambulance, whether it has been recognised previously or not. The fact that St John Ambulance currently involves young people to the extent that it does throughout its various aforementioned programs is a strong foundation for building our own output capacity.

This paper has argued that St John Ambulance Australia as a national organisation can contribute, and significantly does contribute to healthy resilient communities. The paper has also outlined the current and the proposed mechanisms in which St John Ambulance builds social capital, through youth participation and can increase its production of social capital to build healthy, resilient communities.

With these facts in mind, St John Ambulance now needs to begin to develop its organisational strategy to increase our social capital output, particularly through our involvement with young people, which, as the ACA research paper demonstrates, are a great source of community social capital. The recommendations and research have been performed, presented and submitted; it is now time for the organisation to seriously consider its strategy.

An essential component of this consideration should always resolve to involve young people in the consultation and decision making process, to ensure its maximum efficacy and relevance in sustaining our healthy, resilient communities.

## References:

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3. Healy, K., Hampshire, A. & Ayres, L. (2004) 'Beyond the Local: Extending the Social Capital Discourse', *Australian Journal of Social Issues*, 39 (3), 329-342.
4. Woolcock, M & Narayan, D. (2000), 'Social Capital: Implications for Development Theory, Research and Policy', *The World Bank Observer*, 15 (2), 225-49.



# The world-wide Order of St John

by Eric L. Barry (Lord Prior)

I have been asked to tell you as much as I can in the next twenty-five minutes about the world-wide Order of St. John. I am not going to spend much time on the history because that will trespass on Pamela Willis's assignment. I will start by describing the skeleton and then later, do my best to add some flesh and blood.

Our Order of St. John was revived in the 1830s in England but didn't really begin to flourish until the 1860s when it found a cause. As an aside, I say 'our' Order because there are other Orders of St. John and I will return to them briefly toward the end of my presentation. The cause our Order found was the teaching of first aid and the provision of first aid services in the mines and factories of mid 19<sup>th</sup> century Britain. This attracted the attention of prominent people including the then Prince of Wales and it was no doubt he, who persuaded his mother Queen Victoria to make us a Royal Order of Chivalry in 1888.

In 1999 we reorganized and moved from an 'empire model' to a 'commonwealth' model as far as governance was concerned. The governing body of the Order is the Grand Council which is composed of the Priors or Chancellors of the eight Priorities plus five world-level Officers of which I am one. Essentially it is the same as your governance structure in Australia. We are a federation of largely autonomous organizations with a world office. The leadership challenge is to get everyone heading in the same direction. What used to be Grand Priory has become the Priory of England and the Islands. In addition to eight Priorities, there are thirty two St. John Associations. Over two-thirds of these are in developing countries. Some of these are very poor.

We are developing a long term plan by which the better-off Priorities and Associations will help those who are very poor. We spent a lot of time on that subject at the Grand Council meeting held in Edinburgh a few weeks ago. We have agreed on a path forward to complete the plan and we hope to do that by the end of this year.

World-wide, there are about 30,000 members of the Order and they are backed up by about 300,000 volunteers. Our Mission is to prevent and relieve sickness and injury and to act to enhance the health and well-being of people of all races and creeds. We accept as Members of the Order and as volunteers anyone who shares our aims without regard to their race or religion. So much for the skeleton! Let's turn to the flesh and blood.

Last July I had a close encounter of a different kind, a memorable kind. I met two 'saints'. Now, I don't meet 'saints' every day although as I travel around the world of the Order of St. John I am meeting them more frequently than I used to. I met these two 'saints' in South Africa. Both are women. Neither is young although both maintain a pace and activity level that belies time as it is conventionally counted. Both are African. One is a black African. Her name is Lillian Cingo. One is a white African or perhaps more precisely, a white Afrikaander. Her name is Lynette Coetzee. Both have worked together since 1993 and have been the prime movers behind the phenomenal success of the Phelophepa train which began operations that year. Remember 1993 was a year before the first free, all-races election in South Africa which resulted in Nelson Mandela becoming President. The word 'Phelophepa' is coined from two African languages and means 'good, clean health'. It's pronounced 'pay-lo-pay-pa'. The train began in 1993 as a two-car university optometry project and has grown into a 17 car mobile health clinic. Each year, beginning in March and ending in September, it travels from town to town in rural South Africa bringing health care to people who do not ordinarily have access to it. At each stop it pulls into a siding and stays for five days. It makes thirty-six five day stops each season. The train provides medical exams, screening for cancer and diabetes, eye care, dental care, and psychological counseling. Not only can you get a prescription for eye glasses but the eye glasses will be made for you while you wait. There is also a pharmacy. An eye exam costs 10 Rand. That's about A\$2.00. Eye glasses runs to about 30 Rand or A\$6.00. You can have one or two fillings done for 10 Rand while three or more will set you back about 15 Rand.

Where do the two saints fit in? South Africa's largest transportation and logistics company is called Transnet and it runs the railway system. Transnet has backed the Phelophepa train from the beginning, and indeed it would not have been possible without that backing. Transnet still pays sixty percent or more of the cost. Lynette Coetzee went to work for Transnet when she was only seventeen. Along the way she earned a degree in library science and another in labor relations plus a diploma in management. Lynette was made project manager for the train and she made it happen. She brought with her a firm commitment to a new South Africa. She tells the story that at the first stop in 1993 people automatically formed two lines – one white and one black. She made them merge. To Lynette, it was first come, first served, without regard to race. Lynette still runs the Phelophepa Train program and she has received a multitude of awards for her success.

Lillian Cingo trained as a nurse in South Africa. In the early 1960s she was awarded a scholarship to go to London for advanced training and she stayed there for the next thirty years. Her specialty was neurosurgical nursing and in 1975 she was presented to the Queen as the best neurosurgical nurse in London. She was twice nominated Nurse of the Year. Like Lynette, she has acquired numerous additional qualifications and degrees. In 1993, on a visit to South Africa, she heard about the



train. She decided it was time to pay back. She left her career and home in London and became the train manager and that's what she has been ever since. But before she could become the train manager she had to qualify. She says ' There has never been a woman who is manager of a train for a start – whether black or white. So I had to be taught how to do the hand signals, how to shunt the train, how to check the diesel, how to check the pressure ...' Transnet compressed a six months course into two weeks and I suspect Lynette had something to do with that, and Lillian passed the test – scoring 95%. Lillian lives on the train during the traveling season. She is the boss. I have been on the train and believe me she is in charge. The train has a staff of about eighty of whom some are with it all season and others rotate. There are showers and laundry facilities and a catering department that provides three meals a day. They all work very hard.

Where does the Order of St. John fit in? There is a classroom car on the train and the Priory of South Africa provides instructors who teach home based health care and how to prevent STDs and HIV-AIDS. These courses leave each community with a small cadre of people with this training. It is part of a much broader program being delivered by the Priory of South Africa. In South Africa, the first world and the third world are 15 minutes apart by taxi. South Africa has a population of about 44 million of which 5.3 million are HIV-positive. Australia has a population of about 22 million of which 14,000 are HIV-positive. If the HIV-positive proportion of Australia's population was the same as South Africa's the total would be about 2.6 million.

It gets worse as you go north. In the U.S., UK, New Zealand, Australia, and Canada, average life expectancy has increased since 1990 and is now in the high seventies. In Sub-Saharan Africa it has decreased since 1990. In Zimbabwe and Malawi it is now about thirty-five. In Kenya and Uganda it is in the low forties. In South Africa it is about forty-five.

St. John in South Africa recognized that the public health system in their country and certainly the public health systems in the countries to the north are unable to cope with the magnitude of the aids pandemic. It is also preferable in African culture for the terminally ill to die at home. They decided to develop Basic and Advanced Home Based Care courses so as to provide care givers in both rural and urban areas with basic health care skills and knowledge, regardless of their literacy level, so that they may provide care to sick or dying family members in the home environment.

In the volunteers and staff of the Priory for South Africa, we have a first world training and community service organization. The overall plan is for South Africa to be the delivery mechanism to train instructors in the St. John countries to the north to provide Home Base Care courses for the general population in their own countries. Funding has come from various sources including the Grand Prior's appeal to which Australia has responded generously and for which I say ' thank you' . South Africa is now delivering training in their own country of course, and in Zimbabwe, Malawi, Uganda and Kenya. Other countries will be added as resources permit. There are some other initiatives underway in South Africa including the delivery of UNICEF programs such as the Integrated Management of Childhood Illness but there is not time today to go into these.

The African Continent, particularly that part south of the Sahara Desert is one of the major challenges facing the Order of St. John today. We are one of many organizations responding to that challenge and what St. John does on the Phelophepa Train is only part of it.

My next 'saint' would be embarrassed to hear me speak of her that way but I think she qualifies. Until recently, Dr. Maram Isaac, was the pediatric ophthalmic surgeon at the St. John Eye Hospital in Jerusalem. I stand in awe of ophthalmic surgeons as a group and admire their skill in operating on something as complex as the human eye but stand in even greater awe of those who are able to operate on the very tiny eyes of children, particularly new-born children. That's what Dr. Maram does and she is very good at it. She is a Palestinian. She went to school in Bethlehem. She then went to university in Jordan graduating with degrees in science and medicine and trained as an ophthalmic surgeon. She joined the St. John Eye Hospital. There is a close working relationship between the St. John Eye Hospital and the nearby Israeli Hadassah Hospital and she was offered a place in a program at Hadassah to qualify as a pediatric ophthalmic surgeon. As the Hadassah Hospital works in Hebrew, she had to learn Hebrew. She did and qualified as a pediatric ophthalmic surgeon and went back to our Eye Hospital with her new skills. I am sure that Dr. Maram could quickly find a post in the U.S. or Europe or Australia where she could live under less stressful conditions and with much improved pay but instead she chooses to care for her people, which is why I add her to my growing list of ' saints' .

Way back in 1882, our Order founded an eye hospital in Jerusalem. It has operated for 124 years. It is more than a symbol. It is the main, low cost centre for expert eye care service in the West Bank, Gaza and East Jerusalem thereby preserving the gift of sight for tens of thousands of people in that region. It is a sad fact that eye disease is ten times more likely to occur in this region than in developed societies. Up to 80% of this blindness is preventable. Many of the communities in and around Jerusalem live without access to medical care. Most cannot move freely to see family or friends. Nearly half live below the poverty line. The great achievement of the Eye Hospital, together with its outreach clinics and care centres in Hebron and Gaza, is that we continue to deliver humanitarian support against very difficult and constantly changing odds.

A key part of the mission of the Eye Hospital is to treat patients regardless of race, religion, or ability to pay, and the exemption of fees for poor patients is an integral part of Hospital policy. As much as 30% of the population is under the age of ten years. Eye disease is especially prevalent in children, partly because of the high incidence of family intermarriage. Common conditions are squint, infantile glaucoma, cataract and trauma resulting from accidents. In adults, especially the elderly,



cataracts are quite common. The effects of cataract are entirely reversed by successful surgery and these operations form a major part of the workload. There is also a high incidence of diabetes amongst adults (about 15%), which is also potentially blinding. As with glaucoma, patients with this condition need to be diagnosed early and followed carefully.

While the majority of patients do come from the West Bank, Gaza and East Jerusalem, the reputation of the Eye Hospital does attract patients from abroad as well. Last year the Hospital treated nearly 65,000 outpatients and performed close to 5,000 operations. About 32% of the Eye Hospital's income comes from the Palestinian Authority. It, in turn, gets its money from the U.S., from the European Union, from the United Nations, and others. Now, because of the recent elections, this outside money is frozen. As a result the Eye Hospital is not being paid and obviously it cannot maintain its current level of activity minus 32% of its income. The donor organizations and countries understand the problems being created for the Eye Hospital and comparable organizations operating in that part of the world. A solution is expected but has not yet appeared. Next year, the Eye Hospital will celebrate its 125<sup>th</sup> anniversary. There will be celebrations centred on the weekend of May 26, 27. You are all invited. You cannot understand the Eye Hospital and its importance to the region until you see it.

There is no single 'saint' in my next story but a whole bunch of them. On December 26, 2004, more than 500 cadets and leaders of the St. John Association for Sri Lanka were assembling just outside of Colombo for the National Cadet Camp when the Tsunami hit causing massive destruction and loss of life. An emergency meeting was held. The cadet camp was postponed and all possible senior officers and members on the coastline were contacted and directed to start work. They were asked to start rescue and emergency care operations in all possible ways with the resources available. Volunteers who gathered at the national Headquarters were sent to affected areas to provide First Aid to the victims, remove the casualties to the hospitals and safe places, and help government authorities to set up refugee camps. The two available ambulances were sent to areas north of Colombo. Another ambulance was already working at Matara on the southern coast. Private vehicles were hired to send teams of volunteers to the most affected areas. By the day following, December 27, an Operations Centre had been established at the National Headquarters under the command of the Chief Commissioner. Appeals were made to government institutions and private establishments to assist by providing drugs, pharmaceutical items, transport etc. Many responded positively to the appeal. Essential drugs and other required items were purchased using the available St. John funds. The Chief Commissioner appealed to the Order of St. John for assistance and the response was immediate. Within days, fourteen different St. John Priories and Associations donated close to US \$1 million in cash plus close to another US \$ 300,000 in supplies.

Working through an organization called Direct Relief International, the Priory in the U.S.A. donated two fully equipped ambulances. The German Johanniter Order sent a small team and donated two additional ambulances. The Priory of Canada sent a team of three nurses who arrived at the end of January and spent five weeks in country teaching first aid and health care subjects and assisting in the updating of St. John Ambulance disaster response plans. One of the Values expressed in the Order Strategic Plan is: 'We believe that, together, each Member, each Volunteer, each Employee and each Establishment, constitute a world-wide family whose desire to serve transcends all human diversity and that we have a moral obligation to work together to attain the Mission and Vision of the Order.' The Order response to the Tsunami disaster confirms that these are not just words but a commitment on which, when challenged, we have delivered. There were lots of 'saints' involved in the Order response both in Sri Lanka and around the St. John world.

Earlier, I referred briefly to the meeting of the Grand Council held in Edinburgh a few weeks ago. These meetings provide an opportunity to learn from each other's successes. To that end, three Priories were invited to make presentations on an area of activity they do really well. Australia's presentation was on your excellent Chancellor's Leadership program. A couple of weeks ago, I spoke at the annual meeting of Ontario Council which is the largest of our provincial organizations similar to your New South Wales. I mentioned the Leadership presentation and was approached afterward by someone who has been tasked to develop one for Ontario. I have put him in touch with your Australia office. He can learn much from your experience and, in this case, by happenstance, we have avoided re-inventing the wheel.

The key to not re-inventing the wheel is communications. To that end, we invited New Zealand to present details of their excellent program of internal and external communications. In addition, at the Order level, we agreed to spend some money upgrading our website. And finally, we invited the Priory of England to share with us details of their excellent youth program. More than half of the volunteers in England are under the age of twenty-five. Involving youth in the decision making process of the Order and its individual Establishments is an important priority. Again, we can learn from Australia and I am anxious to learn more about your Youth Council and how it works.

There is not time this morning to go into any detail about many of the programs that are underway in different parts of the St. John World. Some of these include:

- New Zealand's Caring Caller program and Australia's Silver Cord program.
- New Zealand's Friends of the Emergency Room program which has been successfully adopted by the Canadian Province of Alberta.
- Canada's Therapy Dog program.



- Scotland's support of mountain rescue activities.
- Malta's cliff rescue program.
- Malaysia's kidney dialysis program.
- Hong Kong's program of dental care for special needs children.

I promised to return briefly to the other Orders of St. John. Our Order is a member of the Alliance of Orders of St. John.

The other members are the Johanniter Order in Germany and its five commanderies; and the Johanniter Orders in Sweden and in the Netherlands. We meet once a year. Every three years we meet with the Sovereign Military Order of Malta which has its headquarters in Rome. We met in Rome in October 2004. At that meeting we signed a number of agreements. The first was a Declaration on the Shared Tradition. It is a statement of mutual respect and deals effectively in my opinion, with the question you hear from time to time as to which of us, is the real Order of St. John?

The second was an International Cooperation Agreement. It's based on the premise that we will be stronger and more effective if we work together. We also approved a one page summary of our history and a one page statement explaining why the five Orders are the legitimate Orders of St. John. The International Cooperation Agreement has had an impact and resulted in active cooperation. Both the German Johanniter Order and the Sovereign Military Order of Malta provided post-Tsunami assistance to the St. John Association of Sri Lanka.

The Johanniter have donated eight ambulances to allow St. John to participate in partnership with the Colombo Fire Department and the National Hospital to establish an emergency ambulance service to cover accidents in Colombo. Using trainers from the Priory of England, appropriate training was provided by the Johanniter for the Emergency Medical Technicians engaged in providing the service. In addition the Johanniter have helped to upgrade the quality of trainers and the training infrastructure of St. John Sri Lanka. Under this arrangement and again using UK based instructors 150 plus trainers have been trained. From that pool 15 have been selected and offered employment as tutors and will be employed across the country with their salaries being covered for the first year by the Johanniter.

The Johanniter have provided a one year financial grant to St. John Kenya to finance Home Based Care training. St. John Zimbabwe has provided office space and administrative support for the Johanniter's representative in that country.

These are just the highlights. Perhaps these words by the Grand Master of the Sovereign Military Order of Malta sum it up best of all: 'Together we have an impressive operational presence in more than 150 countries with half a million people working under our cross. We carry out our worldwide activities for the poor and the sick under the same white eight-pointed cross. This cross symbolizes impartial and effective help, given by people who feel motivated by Christian love, by a centuries' old tradition, and by common values.'

I said at the beginning that as I travel around the world, I am meeting 'saints' more frequently than I used to. I've spoken about Lillian and Lynette and Dr. Maram. I could have added Nelson Mandela who is a member of the highest grade of the order and a supporter and Bishop Desmond Tutu who was Sub-Prelate of the Priory for South Africa and another supporter of the Order and its work. But these are high profile people. Let's not forget the three hundred thousand plus volunteers who fulfill the Mission of the Order and its two mottos in forty countries around the world. We are a Christian Order of Chivalry. Our mottos are For the Faith and In the Service of Humanity and we welcome as Members and Volunteers all those who share our aims without regard to their race or religion. We are a force for good in this troubled world and we should all be proud of that. On behalf of the rest of the world-wide family, I thank you for all that you have done and for all that you are going to do.

## REPORTS

This section of the journal contains the annual reports presented at the Historical Society's 2006 annual general meeting in Perth on 21<sup>st</sup> June. The Society President's report is first; and this is then followed by State and Territory reports.

### President's report for 2006 (Annual Report of the Historical Society, including the Treasurer's audited statement of income & expenditure)

I will begin this, my first Annual Report to you as your President, by acknowledging with gratitude the wisdom, foresight and hard work of my predecessor in office, Dr Brian Fotheringham, who took the early steps that led to the formation of this Historical Society.



Dr Fotheringham had been the Priory Librarian for St John Ambulance Australia for nine years when he convened the informal Priory History Group in June 1999. He held the Priory Librarian's position for an Australian record period of 13 years, from June 1990 to June 2003. What prompted him to convene the history group was the abolition of the former Priory Library Committee, which he chaired, during the rearrangement of national-level management structures within St John Ambulance Australia in 1997-98. After some 51 years of there having been a Library Committee overseeing the Priory's history and heritage functions, Dr Fotheringham did not wish to see those functions disappear along with his committee; and so he convened the Priory History Group. Rallying the support of others who regretted the passing of the committee, together they transformed the group into a duly constituted historical society within the space of two years. It was a notable achievement; and, as the saying goes, this society has been making history ever since.

My reason for wishing to draw attention to such history is that with this Annual General Meeting, the Historical Society has turned one full circle. By this I refer to the fact that, following the penultimate meeting of the former Priory Library Committee in Melbourne in June 1998, the Priory History Group held its inaugural meeting here in Perth in June 1999. That was the last time the National Conference of St John Ambulance Australia took place in Perth.

Since then, of course, there have been many changes. For instance, the place where the Priory History Group met for the first time is no longer St John property. The group met several streets away from here in Wellington Street, around the vast jarrah conference table in the board room of the old 1930s-era St John Ambulance State headquarters building. Instead we have the magnificent new headquarters building in Belmont that you will see tomorrow if you attend the official opening of the relocated St John Ambulance museum and library. The main change, however, is that this Historical Society has flourished beyond the wildest imagining of Dr Fotheringham, when, almost as an act of defiance at having his library committee removed from beneath him, he convened the first meeting of the Priory History Group.

Evidence of that flourishing is not hard to find. Thus, last year's Annual General Meeting of the Historical Society, was the first to be held in a venue different from the annual History Seminar that preceded it. If you were present, you will remember that we conducted the History Seminar at the Crown Conference Centre on Melbourne's Southbank then after lunch we adjourned to Williamstown for our AGM in order to be able to see over the superb St John Ambulance museum that our Victorian colleagues have created in a former Divisional hall there. Without boasting, I could point out that our History Seminar out-competed all the other rival National Conference events that morning, attracting a larger audience than almost all the other meetings combined, while our AGM attracted more attenders than any of the preceding three.

This year, back here in Perth again after seven years, our activities have multiplied to the extent that we can no longer run our AGM and History Seminar on the same day. For the first time, our History Seminar tomorrow will run across both the morning and afternoon sessions of the National Conference, which is why we are holding our AGM separately from the seminar and on the day before.

Our membership is another indicator of our success. At the last count several weeks ago, it had grown to 174 financial members. While that number is perhaps only a small proportion of the total membership of St John Ambulance Australia, it suggests that we have established ourselves as an important and permanent member of the Australian St John 'family'. At the same time, the increasingly large audiences we attract to our annual gatherings indicates that our get-togethers have become an important regular feature of the National Conferences.

As a Society we have set ourselves a number of goals. These are set out as the "Purposes and Objects of the Society" in our Constitution. There are eleven of them and I will not recite them all to you now; suffice to say that we have made good progress in every one of them. The one in which progress has been particularly pleasing over the past year has been the second, which requires us to "perform an educational function by enhancing and disseminating knowledge of St John history among people affiliated with St John Ambulance Australia..." Here I draw your attention to the inaugural awards to Cadets that we will present tomorrow for project work towards their "Knowledge of the Order" proficiency badges. We sponsor these awards and we are calling them the "Mark Compton 'K.o.t.O.' Prizes" in acknowledgement of the generosity of the Priory's Receiver-General in personally donating the funds to inaugurate them. The presentations will take place at Belmont tomorrow afternoon, in conjunction with the official opening of the new St John museum and library.

Activities such as these would not occur without the active support of you, our members, and the particularly hard work of many individuals. I specifically thank the retiring Chancellor, Professor Villis Marshall, for his support as Patron of our Society. I also thank the Priory Secretary, Len Fiori, and his staff in Canberra for the strong support they give us; Cheryl Langdon-Orr for her great work as our Publications Officer and Membership Secretary; James Byrne as our Treasurer; our Society's Secretary, Dr Ian Howie-Willis, Dr Fotheringham's successor as Priory Librarian; and finally the other members of our management committee. Finally, I thank you for your attendance today and move that you accept my report.

Dr Harry Oxer  
President  
St John Ambulance Australia Historical Society



# TREASURER'S REPORT: STATEMENT OF INCOME & EXPENDITURE FOR PERIOD

8 June 2005 to 4 June 2006

Credit balance in Bendigo Bank account brought forward from 08 June 2005

\$5,271.14

## INCOME

Membership subscriptions (including multi-year payments)

to 31/S106

2,094.00

Donations

\$1020.00

Undeposited funds

\$00.00

Total income

\$8,385.14

## EXPENDITURE<sup>(1)</sup>

Expenses claim (at cost) for production & distribution of 2004-

05 newsletters & journal 2004-OS

\$2,240.43

Expenses claim (at cost) for production & distribution of 2005 newsletter & journal 2005-06

\$1849.30

Total expenditure

\$4,089.73

## CLOSING BALANCE

\$4295.41

(1) Note: Production and distribution of the Society's committee circular and production of the newsletter are at no charge. Expenditure on these items has been in the form of uncoded gifts-in-kind by the Membership Secretary-Publications Officer and the Secretary as part of their pro bono activities. Postage costs for the newsletter and production and distribution costs for the journal are covered in these expenses claims.

I have examined the accounts of the St John Ambulance Australia Historical Society and confirm that this Statement of Income and Expenditure is a true and accurate summary of the Society's financial affairs for the period 8 June 2005 to 4 June 2006

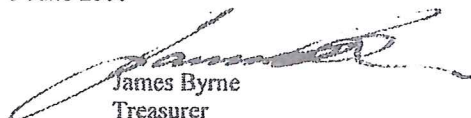


Kareen Brandt

Finance Manager, Australian Office St John Ambulance

Australia

9 June 2006



James Byrne

Treasurer

9 June 2006

## The Australian Capital Territory & the Australian Office

This report covers both the Australian Office of St John Ambulance Australia and the local Australian Capital Territory (ACT) branch. The reason for this is that the ACT branch entrusts to the Priory Secretary and Priory Librarian the task of heritage management in Canberra and the ACT. Thanks to Len Fiori & Chris Ward for agreeing to this!

Since my last report, in Melbourne on 24 June 2005, my main duties in the past year have continued as previously. They consist of the following:

- maintaining the separate Library, Pictorial and Memorabilia databases
- keeping a watchful eye on the condition of the materials in the Library, Pictorial and Memorabilia collections, and being 'pro-active' in pursuing opportunities for further developing the collections
- providing advice to the Priory Secretary on matters relating to the Order's history and heritage, including the preparation for him of correspondence on these matters and liaison with individuals who contact him about such issues



- d) making judicious purchases of items for the Priory Library, most notably new books on the history of the Order and St John Ambulance
- e) receiving materials donated to the Priory's Library, Memorabilia and Pictorial collections and liaising with the donors
- f) conducting and publishing historical research on topics relevant to the history of the Order and St John Ambulance, and facilitating the research of others
- g) liaising with other St John Ambulance historians and providing them with advice, assistance and encouragement
- h) establishing and maintaining contact with people in overseas Pories who have an interest in heritage matters
- i) continuing in my role as Historical Society Secretary, which meshes closely with the Priory Librarian's duties, especially the task of promoting interest in the Order's heritage.

As I reported fairly fully on the above matters to last year's AGM in Melbourne, I won't do so again this year. Instead I'll report briefly on just two developments, one from the ACT Branch and one from the Australian Office, as follows:

#### 1. Official history of the Operations Branch in the ACT

Richard Caesar-Thwaytes, the Deputy Commissioner in the ACT, has been commissioned to produce a history of the St John Ambulance Brigade and Operations Branch, which now has a continuous record of more than 60 years in the Canberra region. Richard has been working on this project for the past 10 months or so, and may be relied on to complete it thoroughly, producing a book that will take knowledge of St John history in the Canberra region far beyond present boundaries.

#### 2. Priory Annual Reports

The Priory Annual Reports for the past 30 years have now been bound into a series of volumes, each of which contain a "run" of five separate annual reports. Until 1975, every five years the preceding five years' reports were sent off to a bookbinder to be bound in the one volume then placed in the Priory Library. This quinquennial task was overlooked from the mid-70s, so that successive reports just accumulated in pamphlet boxes. With the co-operation of Jenny Leeson & Shirley Dyson in the Australian Office, the reports have now been bound.

The annual reports are THE key historical record of any organisation. Institutional historians always start any history-writing task by consulting them because they constitute an organisation's corporate memory. A gap in the series of accumulated annual reports is a loss of that memory. Thus, the organisation that cannot immediately refer to its previous annual reports to tell you something as simple as, say, who all the members of its board of directors were 30 years ago is one in danger of sliding into corporate dementia. Having the 1975-2005 Priory annual reports bound has been one safeguard against that happening to our Priory.

Ian Howie-Willis  
Priory Librarian  
St John Ambulance Australia

## The New South Wales Report

### New South Wales Report

#### Celebrations

As reported last year Wollongong Division celebrated 100 years of both Operations and Training Branches. New South Wales Archives provided displays for the Wollongong celebrations as well as the Wollongong City Museum. Wollongong City Museum joined the celebrations by holding a 3 month display depicting 100 years of health and first aid, giving tourists and local people the opportunity to view items such as the Wheeled Litter, stretchers and medical equipment.

Glebe Cadets and Fairfield Division both celebrated 80 years with functions. Archives provided displays depicting their histories.

#### Priory in Australia

On the 16<sup>th</sup> September 1946, His Majesty the Sovereign Head of the Order of St John sanctioned the elevation of the Commandery of Australia to the status of a Priory in the Commonwealth of Australia. September 2006 will mark 60 years since the establishment of the Priory in Australia.

#### Chapter Meeting 1975

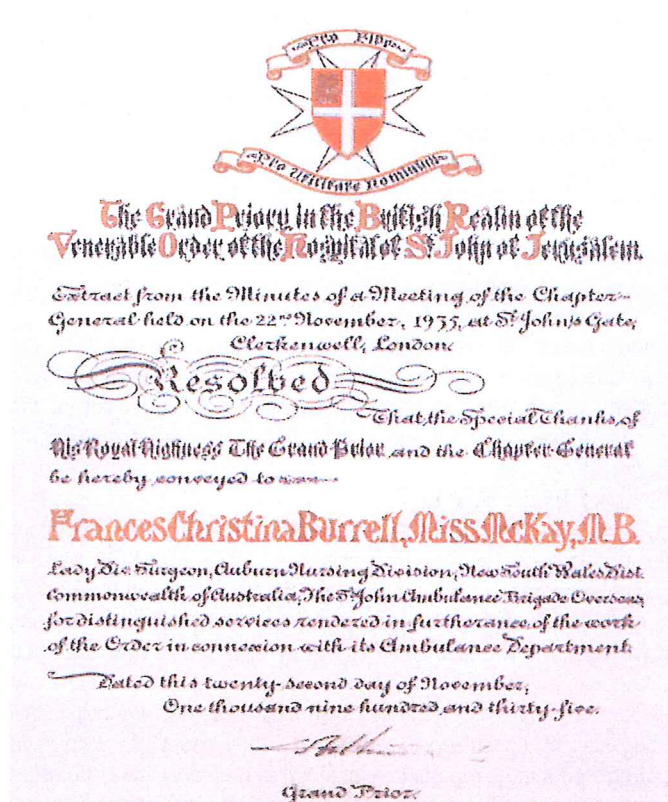
The first time Dames and female Commanders participated at the Chapter Meeting. This was held in Sydney at the Chapter House of St Andrew's Cathedral.



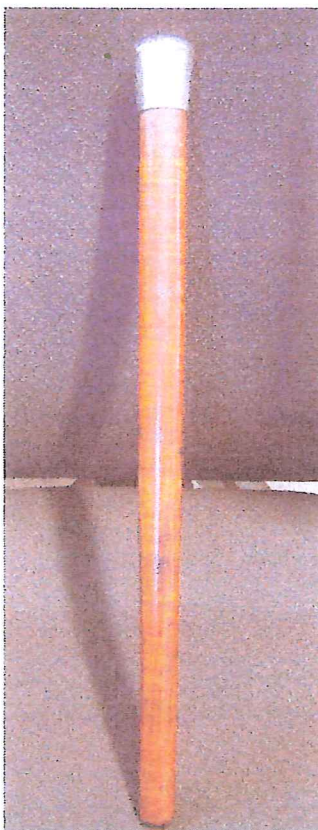
## Notable People in St John

Dr Frances McKay joined St John in 1927 as a Divisional Surgeon. In 1956 she was appointed Chief Superintendent Nursing and held that position until her death in 1969. We have received her Vellum Vote of Thanks, Serving Sister, Officer, Commander and Dame Medals as well as her Service Medal and 3 bars.

Vellum Vote of Thanks awarded 1935 to Dr  
Frances McKay



Dr Reginald Bowman was appointed Lecturer with St John in 1891. He taught first aid to members of the public, students at The Kings School and Parramatta Volunteer Fire Brigade. In 1894 he received a 'Swagger Stick' from the Parramatta Volunteer Fire Brigade members in appreciation for his services.



The Dome: The St John Ambulance Association and Cross

Front: Presented by the P.V.F.B's ambulance class to Dr. R. Bowman June 1894

Back: Festoon of Flowers





The Broken Hill artist, Kevin Charles ('Pro') Hart , who was a generous friend to St John Ambulance (NSW), died early in 2006. He painted a number of pictures on St John themes, which he then donated to the organisation. This is a copy of the original oil painting presented to the St John Ambulance Association in 1975 by Pro Hart. Depicted is St John Gate in Clerkenwell and the Knights of St John who fought in the Crusades.



## From the Past

At St John's Gate Clerkenwell Museum, one of the interesting pieces is the **Brooke Moore Challenge Shield** made from Red Cross wooden packing cases, in Stalag 383 during World War II. A total of 368 men in this prisoner of war camp gained first aid certificates under the guidance of Dr Brooke Moore and competed for the trophy. The late Dr Brooke Moore who served with 2/5 Australian General Hospital in World War II was a Divisional Surgeon for St John in Bathurst, NSW. He was a Commander of the Order of St John and died in 1972.

Betty Stirton  
Honorary Archivist

Loredana Criniti  
Archivist and Librarian



## The Northern Territory report

The membership of the Historical Society in the Northern Territory send their best wishes and greetings to our friends and colleagues at the annual meeting in Perth on 21 June 2006.

It is indeed most unfortunate that neither of our representatives are able to attend the Priory Conference this year because of unforeseen circumstances. This is in no way a reflection of a lack of interest in or support of our national body. Both Dr Alan Bromwich and I send our sincere apologies and regrets for being unable to be present with you.

In particular it is unfortunate that a planned presentation of a paper will have to be postponed until our next meeting in Canberra in 2007 and that both of us are missing the opportunity of catching up with friends and colleagues within the St John family.

Many of you who attended our first-ever conference in Alice Springs in 2004 would have received a complimentary copy of our Northern Territory desktop publication. Outback Ambulance.

A new feature within this magazine this year has the title 'History Corner' and in the June 2006 edition we have embarked upon a project that involves calling together interested people to assist in the preservation of the old records and photographs held at our headquarters building in Darwin.

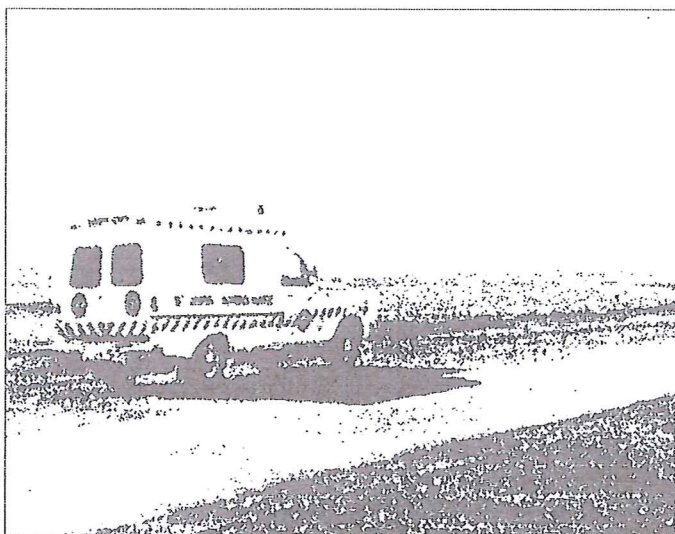
In essence, our early records are in an extremely fragile state and their storage is nothing short of deplorable. Many of us who hold material in private collections are loth to donate material for future research and preservation simply because there are not formal archival repository as such to hold such items. Many of us wish to see this change, and the sooner the better.

Our esteemed friend and respected colleague Ms Beth Dawson of Queensland has suggested that our national body investigate ways and means of advising States and Territories on just this specific dilemma and we in Northern Territory certainly look forward to any outcomes from the Historical Society's meetings in Perth this year.

At this juncture, the focus in the Northern Territory is to form an interested cadre of willing people interested in the immediate concerns of preservation and conservation of existing material, to promote the ideal of archiving and cataloguing material, such cadre to form an 'official' group under one banner and to then feed into our national body through our representatives on the national committee.

The tyranny of distance in the Northern Territory makes this traditionally a difficult task, but with people such as Dr Alan Bromwich, with his tremendous enthusiasm and knowledge of our past in our earlier years, Mr Steve Peers, Ms Marion Grayden, Ms Gwyn Balch, our hard-working Volunteer Coordinator in Darwin Headquarters and many others, I am certain that at our next Conference the Northern Territory will have much more to report.

In the meantime, we take this opportunity to wish you all an extremely enlightening and successful conference. Our special thanks must go to Dr Ian Howie-Willis as our Priory Librarian and Historical Society Secretary and also Ms Cheryl Langdon-Orr, our Membership Secretary and Publications Officer, whom we know both work tirelessly to make these opportunities into reality. And finally; our congratulations and sincere best wishes to our friends and colleagues in the Western Australian Commandery on the official opening of their new Museum in Perth. Congratulations and well done WA!



A familiar sight in the Northern Territory: an 'Outback Ambulance': carries the St John name and tradition to the Territory's most remote corners

Alan Caust OSTJ  
Alice Springs  
on behalf of the Northern  
Territory representatives of  
the St John Ambulance Australia



# St John Ambulance Australia (Queensland) History and Heritage Committee

## St John Ambulance Australia (Queensland) History and Heritage Committee

Each year provides more challenges for the History and Heritage Committee, an active, energetic and focused group which during 2005 to 2006 achieved considerable progress.

The highlight of the year was the generous donation by Dr Geoffrey Gray MBE KStJ of an attractive display cabinet which enables themed displays as well as items from the collection to be shown, at St John House. The formal presentation was made at the St John Ambulance Queensland's Annual General Meeting, on 30 March 2006.



*The display cabinet donated by Dr Geoffrey Gray.*

The initial display 'St John - Then and Now' enabled items in the 2005 Heritage Expo to be used. Members of the public, attending courses have shown considerable interest in this display.



*The restored 'Dorothy Davidson' trophy.*

The Dorothy Davidson Trophy awarded to the winner of the Individual First Aid Competition has been restored to its original condition. This has been achieved by a generous donation from Dr Murray Elliott AO KStJ a former Priory Librarian, Queensland Commissioner and committee member. This trophy was first competed for in 1965 when Mrs Davidson was District Superintendent (Nursing), Queensland. Ensuring such items of historical value are maintained is a responsibility of the committee.



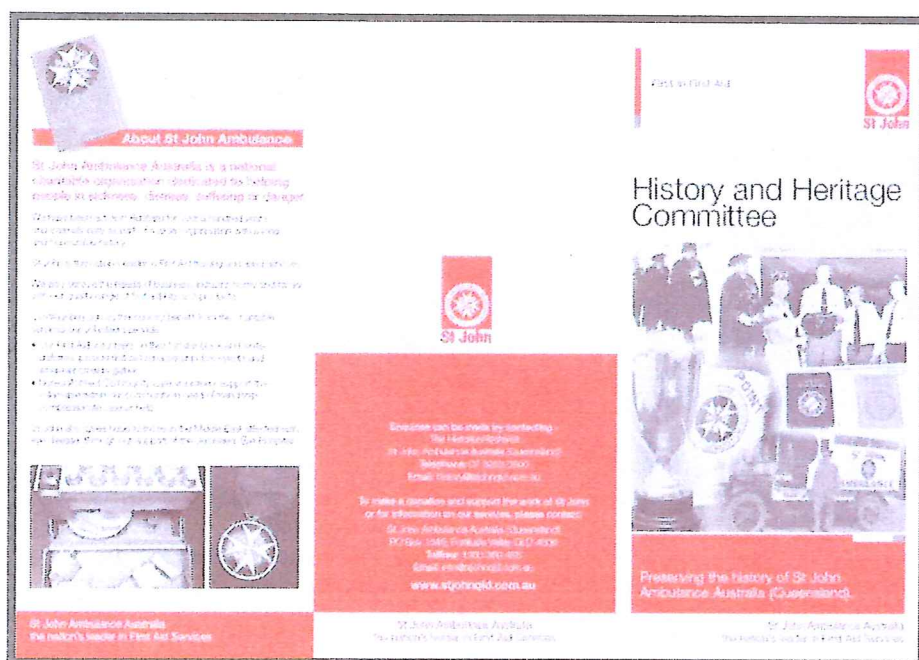
Heritage Week themed *People on the Move*, was organised by National Trust Queensland during May. This year the committee's participation involved two photographic displays, one of which included some special items and artefacts from the collection.



The 'People on the Move' display for 'Heritage Week'.

The displays were held at the Brisbane City Council, Central Library, City Plaza and the Nundah Library.

Two Grant applications were submitted during the year unfortunately we were not successful. A further grant application for a Community Heritage Grants 2006 has been submitted.



The 'History and Heritage' promotional brochure.

The interest in the history of St John continues to be fostered through the pages of Queensland's One St John Newsletter, participation in and provision of resources for Knowledge of the Order Proficiency Badge courses and the quarterly reports presented at the St John Council meetings. Early this year the Marketing and Communications Officer, Vanessa Kapper assisted the committee to design and produce a promotional brochure which was used initially at the Heritage Week displays.

A year planner was prepared by the committee to guide its activities, this has proved to be invaluable.



The numerous boxes of material continue to be sorted and accessioned by committee members at regular working bees. This task has resulted in the need for the development of more detailed policy and procedure, thus ensuring the collection is better organised. The committee appreciates the information provided by Dr Ian Howie-Willis, prepared by Cressida Finch from St John's Gate, London.



*A Committee working bee.*

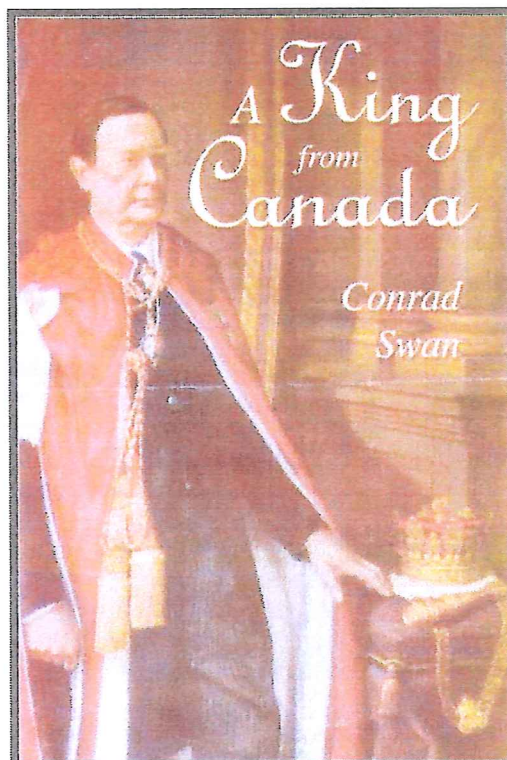
A number of the committee were privileged to attend the launch of Sir Conrad Swan's book *A King from Canada* at Government House, last October. Sir Conrad Swan was formerly a St John Genealogist and Garter Principal King of Arms. The book has been added to the collection.

During the year, a contingent of St John Cadets presented souvenirs from Hong Kong when they visited Queensland.

Sadly, 1 report the death of Brigadier John Springhall, an enthusiastic member of the committee. He was a foundation member of the committee which was established in 1989. New committee members are Miss Gail Vann, Mrs Gloria Fairfax and Mr Laurie Steinhardt.

The members of the St John Ambulance Australia (Queensland) History and Heritage Committee are as follows:

Miss Beth Dawson (Chairman/Historian/Archivist)  
 Mrs Vera Crook  
 Mrs Ann Demaine  
 Mr Norman Demaine  
 Dr Murray Elliott  
 Brigadier Trevor Gibson  
 Dr Geoffrey Gray  
 Mr Brian Dunstan  
 Ms Sandra Bout  
 Mr Anthony Harrison  
 Mr Laurie Steinhardt  
 Miss Gail Vann  
 Mrs Gloria Fairfax  
 Mrs Averil Chadwick (Corresponding member, North Queensland)  
 Mrs Margaret Hunt (Corresponding member, Rockhampton)  
 Mr Vince Little  
 Professor John Pearn (Consultant to Committee)  
 Mrs Margaret Wilkinson (Corresponding member, Bundaberg).



*Jacket of 'A King From Canada', launched at Government House, Brisbane, October 2005.*

Beth Dawson  
 Chair/Historian/Archivist  
 History and Heritage Committee



## The St John Historical Society of South Australia

It has been another interesting year for the South Australian St John Historical Society. At the first meeting for the year the chairman welcomed several new members who are now bringing their individual and collective experiences and expertise to the meetings. A feature of the meetings, which are held on the second Thursday of each month, is a segment where one of the members gives a presentation about incidents or events within St John that they especially remember.

The museum is visited by St John cadets studying for their Knowledge of the Order badge, as well as by interested St John members and members of the public.

During the year the perspex enclosure in the museum foyer for the St John motor cycle and sidecar was completed. The motor cycle attracts much attention. It is a 1949 BSA and holds an expandable stretcher in its sidecar. Members of the Adelaide Motorcycle Division used the bike at various motorcycle rallies and races during the 1950s and 1960s. It now takes part in occasional veteran and vintage rallies such as the annual Bay to Birdwood rally in South Australia.

Also in the foyer during the year, a large cloth-based wall hanging depicting aspects of St John Ambulance history was positioned directly opposite the main doors. It adds significantly to the ambience of the building, especially when illuminated at night. The wall hanging was originally made for the former St John House in Greenhill Road, Eastwood, South Australia. Images on the wall hanging cover a wide range of St John Ambulance activities over a span of more than 100 years.

We have experienced some problems with the sound track of the DVD we produced last year on the history of our organisation, i.e., the production made with an emphasis on the development of St John Ambulance in Australia. If the copy you have received is faulty, please let us know and we will replace it at no cost when copies of appropriate standard are available. New copies should be available soon at a cost of \$10 plus postage.

At our Annual General Meeting in late 2005, Keith Dansie was elected deputy chairman, David Heard as Honorary Treasurer and Lyn Dansie as Secretary. Our meetings continue to be well attended and are a social occasion as well as a vehicle for collecting and preserving St John Ambulance memorabilia.

I am sorry I cannot present this report in person, but on behalf of the St John Historical Society of South Australia, wish all members of the National St John Historical Society best wishes for your meeting in Perth and for the coming year.

Brian Fotheringham  
Chairman  
St John Historical Society of South Australia

## Report of the State Historian, Tasmania

Again the main burden of this report relates to the dearth of support and interest in the history of the Order in this state. Despite requests made last year to all current units no responses have been received. Accordingly divisional records remain unavailable to us. The continued existence of some records appears much in doubt. It is regrettable that the significance of such records is lost upon the current membership. Among retired members interest is higher but few individuals hold or have access to the documentation so essential to compile meaningful histories of units.

Two long serving members, Mr Reg Barker, now retired, and Mrs Kath Burns who is still active, have made records in their possession available. In the main information from these sources has added to, or confirmed data already located in the State Headquarters. Unfortunately the lack of suitable space has minimised the range of items currently displayed in our premises in both Launceston and Hobart. Accordingly no appeal to the State Committee for the provision of additional display cases has been made and as the provision of additional display space is remote the problem remains.

At Wynyard some photographs of historical interest exist but are confined to the interior of an office drawer. Such is the regard held for such material at this, the only other location where the local unit has ongoing tenure of the premises it occupies.

On a somewhat brighter note it can be reported that the compilation of the largely overlooked contribution made to the work of the Order by female members is progressing. Four significant members have been identified and their records clearly indicate the most impressive achievements these ladies were able to make in what was a male dominated organisation.



Last year's report made reference to a press report of November 25, 1905 it was announced that a St John gold medal had been awarded to Nurse Koerbin. A request for information concerning any such St John award was made without any response. Who can provide some enlightenment on what appears to be an otherwise unknown award.?

It is regretted that Mrs Fay Reeve has suffered recent ill health which has curtailed her pursuit of historical records and memorabilia and will prevent her from attending the meeting of the Society in Perth later this month. It is hoped that her recovery may be complete and that she will soon be able to resume her much valued contribution.

Ken Milbourne  
State Historian  
St John Ambulance Australia (Tasmania)

## The Library-Museum Committee, Victoria

During the previous year the Library was transferred to the new St John Headquarters at Mount Waverley. Sorting of the library material was carried out to minimise the amount moved to Waverley, with lower priority material transferred to the Museum at Williamstown.

Hobson's Bay Council was approached to place painting the exterior of the Museum on their maintenance schedule but they replied that this was a St John responsibility. Mr Carson has investigated the cost and has placed the task on the St, John maintenance schedule.

During 2005 we experienced problems with the alarm system, with many false alarms including at times when we were in the building with the system disarmed: After repeated complaints the faulty connections were fixed and there have been no further alarms.

Improvements have been made to the garden at the front of the Museum by the planting of suitable shrubs around the perimeter fence. We wish to thank Mr John Marshall for the donation of the shrubs.

An Open Day was held for Community Care Branch members on Sunday 30<sup>th</sup> October- 2005,

The Headquarters move resulted in the donation of large numbers of St John public relations photographs, negatives and digital images, which have now been catalogued and cross-indexed to provide a valuable historical resource.

Two second-hand bookcases with adjustable shelving were obtained for the phokWaplr albums- as we now- have- more than 8000-Photographs available for viewing. Two second-hand glass display cases have been obtained for important historical memorabilia which now includes a first edition copy of the 1878 Surgeon-Major Peter Shepherd text Aids for Cases of Injuries, which was kindly donated by Committee member Mr George Jackson.

During the year the medals and decorations of former Commissioner, Colonel Douglas Donald, previously purchased by St John Ambulance Australia (Victoria), were refurbished and mounted for display by courtesy- of Mr Gary Edwards, former Chair of Community Care Victorian Branch.

We are attempting to accumulate complete sets of old Victorian and Australian Priory Annual Reports to make bound volumes for safekeeping. We have complete sets from 1968 onwards but many earlier reports are missing. If any members have Annual reports pre-dating 1968 donations to the Museum-would-be most gratefully received to help us in the important conservation work. Similarly, we are most grateful for donations of old Minutes and other historical St John records of any age.

Recently a three-day combined emergency services exhibition was held at Ballarat with contributions from Victoria Police, St John, the Fire Services Museum, Rural Ambulance-Service and-the-Salvation-Army: This arose from discussions about the possibility of a more permanent combined educational project. Discussions continue. Thanks are extended to members of the Library-Museum Committee for their work, both at the Museum and at Headquarters, where our principal Library is located. We are also pleased to welcome Mrs Shirley Moon to the Committee on transfer from New South Wales where she was a long-time St John member.

We thank Mervyn Goodall and George Jackson for their work in the Library, including its transfer from York Street to Mount Waverley.



Thanks are also extended to Allan Mawdsley and Ian Cheesewright for their continuous work over the past year, and also I express my my appreciation to the volunteer members who have assisted on a monthly roster. These volunteers include Joan Batson, Darryl Hulls and Gladys Blackstock.

Finally I wish to thank Dorothy Bache, who as Chair of Community Care Branch is responsible for the supervision of the Library-Museum, for the support and backing that we have had in this and in past years.

J.N. Blackstock  
Chair, Library-Museum Committee

## The Commandery Archival Resource Centre, Western Australia

### General Status

For 10½ months the modest reference service continued to represent all of our history and heritage function. The last six weeks have been extremely busy with the return of the collection and re-establishing the Museum.

#### Acquisitions & Donations

Donations this year have included memorabilia from the Armadale, Osborne Park and Midland Sub Centres. 18 new chairs, 2 new cabinets, 2 new and 2 secondhand mannequins were purchased. A number of cash donations have also been received from Kevin J Young, the Armadale Sub Centre, the Midland Sub-Centre and the Ladies Auxiliary.

#### Recovering the Museum

The remodeled area was sufficiently completed to allow for work to commence on the new Museum in May. The collection was returned on May 23<sup>rd</sup>. Damage to mannequins and some glass had occurred during 3 years in storage. The task has been daunting but with prior planning and the assistance of many museum volunteers it has been completed. We also acknowledge the considerable assistance received from the Western Australian Ambulance Service, Devlyn Constructions, Elderbell Developments and the St John Ladies Auxiliary.

### Museum Volunteers

Our museum volunteers have been outstanding in their efforts to complete the unpacking, cleaning, restoring and displaying of material.

### Restoration

Most of the mannequins have had to be repaired. 5 glass panels have been replaced. The council room table was reassembled and waxed.

### The St John Historical Society

As the St John Annual National Conference will be held in Perth this year it is our pleasure to host the history seminar. An official opening of the museum will be part of the program.

### Finances

All funds have been utilised in refurbishing the museum furniture and displays. Our thanks again to the Western Australian Ambulance Service for their assistance.

### Future Projects

Our immediate need is for consolidation in many areas, but we are also interested in a new cataloguing system, the development of interactive displays and producing a new museum guide.

### Summary

A quite unique year — hopefully never to be repeated!

Edith Khangure  
Librarian and Archivist  
St John Ambulance Australia (WA) Inc.