

HISTORY OF NURSING IN SOUTH AUSTRALIA

ORAL EVIDENCE 24

MISS DOREEN NELLIE STURM

On this tape is the record of an interview conducted by Joan Durdin with Miss Doreen Nellie Sturm, commonly known amongst her friends as Anne Sturm, of Farrell Street, Glenelg, South Australia. Anne Sturm is a retired nurse. She trained at the Adelaide Hospital and is best known for the twenty four years that she spent as Matron of the Glenelg Community Hospital until the time of her retirement. The interview is being conducted to collect information for a history of nursing in South Australia. The interview is being conducted on Wednesday 15th June 1988 at Miss Sturm's home in Glenelg.

Is Anne spelt with an 'e'?

Yes it is.

Which year were you born, Anne?

1914 - 9th September 1914.

Were you born in South Australia?

Yes, I was born in Magill and lived there for some years.

You had your schooling in that district?

No. No, I had my schooling at Campbelltown Primary School, which was a lovely little school. I loved it there.

Tell me a little bit about your family. Were you one of several children?

Yes, there were three children in the family. I had a brother twelve years older than me and a sister nine years older, so I lived a very protected life - and very spoilt.

Others to look after you as well as your parents.

Yes, they were almost another mother and father for me because they were very good to me.

Did you move from Magill over to the Campbelltown area, that you went to school there?

Yes we did. My parents came from Birdwood, actually. My father's family were second generation - from Germany - and my mother, her family were English. They came from Hampshire in England, and my grandfather migrated out to Western Australia and then came to South Australia. They were farmers at Mount Torrens. My father's family were in business at Birdwood - carpentry and that sort of thing - and they moved to Adelaide, to Magill, just before I was born. So my brother and sister were born in Birdwood and I was born in the city.

And you said you had your primary schooling at Campbelltown. Was that the State school at Campbelltown.

State school at Campbelltown.

Was it a very small district in those days?

Well, I suppose it was. I can't tell you how many were in the school, but I know there were two at least - two or three classes - in the one room. It was a marvellous schooling with wonderful teachers and a wonderful headmaster who always tried to encourage me to be a teacher.

What was his name?

McCaffrey.

Some people might remember that name and be interested.

That's right, yes. He was a wonderful man.

But in fact you didn't become a teacher. What happened to you as you came on through schooling and on towards - - -?

Well, funnily enough I always wanted to be a nurse. Actually I wanted to be a nurse before I knew what it meant, I'm quite sure of that, because I used to hang around my mother's skirts and people used to say, "What would you like to be?" and I think I was a very young age and said I wanted to be a nurse (laughter) and I really didn't know what it was because I used to faint if I saw anybody in uniform. Isn't that odd?

Were there any nurses in the family?

No.

Where do you think you got that idea from?

I have no idea, no idea at all, except that I always loved children and if anybody had a baby in a pram, I always wanted to wheel it or to look after them. And naturally I wanted to train at the Children's.

What happened?

Well, it was rather difficult I suppose. I went to Norwood Central School and did my schooling there until I was about sixteen I suppose - sixteen going on seventeen. Then I went to the School of Mines and did dressmaking. I don't remember when I put my name down to be a nurse, or what I actually had to do, but I definitely wanted to go to the Children's. Then this call came for me to go to Loxton.

So you must have also had your name down with the Hospitals Department.

I must have done, yes. I don't remember doing that but I must have done. So I started my training.

What age were you?

Eighteen. I was eighteen in the September and I went to Loxton about November.

You said you were born in 1914. This makes it 1932.

1932 yes, that's right.

That was still during the time of the Depression, or coming out of the Depression period. Do you have any recollections of that economic situation affecting the family?

Yes, very much so. We were very poor, actually, I can remember that. But my grandmother died during that period and I think there was a legacy so that I was able to go on and do my schooling and was a bit spoilt about it all. And then of course once I started nursing, that was it.

So you went to Loxton. I'm glad to hear that. I haven't talked to anyone who's been at Loxton.

Haven't you? Oh, it was wonderful experience.

Tell me all about it, that you remember.

It was the most wonderful experience because I was the youngest member there and Matron Blackwell and Sister Marjorie Clarke, who'd both trained at the Children's, they were Matron and Charge Sister, and Carl Dorsch was the doctor up there - wonderful surgeon - and also Dr Tanko, who was a Japanese doctor. His son is a dentist, I think. He was a general practitioner. And Karl Dorsch was also general practitioner, but was a wonderful surgeon. Of course the Dorsch's were a wonderful family, weren't they?

Yes, well known.

Yes, and he also used to give us our lectures in physiology. My goodness me, they were really funny. We used to go to his sitting room and sit down for his lectures, and he used to throw his legs over the chair and say, "God's little fishes. I don't know what I'm going to do today". (laughter) So I don't know how I learned anything there, but I did and I passed my physiology.

How many trainee nurses would there have been?

About six I think. It was also a midwifery training school.

So many of the country hospitals were.

Yes. It was a wonderful training. My goodness me we had to work hard. I think I'd never been in a hospital before in my life. I can remember walking past Unley Private Hospital and looking in the door and seeing somebody in uniform and falling on the footpath in a dead faint, and yet I walked into that hospital and, you know, I loved every minute. It was so busy. We had such sick people. Before the days of antibiotics, of course. Sulphanilamide, I think, came in whilst I was there. I was put on night duty six weeks after I started, the only one in the general part, with a midwifery sister to look after the midwifery section. We had empyemas and ruptured appendix and broken legs and hysterectomies in the women's section, you know, and we had to cope with it all. You'd go on duty at night and the first thing you'd do was to take over and take everybody's temperature. And then you would get Matron and doctor's supper, which would be toast with tomato and cheese and coffee and whatever, take it over on a big tray and stand up in front of them and recite all the elevated temperatures without a note. (laughter)

That was fairly daunting for a girl who'd just been there six weeks.

Yes. So you accepted that. And then you'd work madly all night and to finish up you'd have to do all the dirty laundry and everything, and go off duty about eight o'clock in the morning, absolutely exhausted. That's the time when I used to feel terribly homesick. Oh, my mother nearly had - - -. Well she did, she developed diabetes when I went away from home from the shock of my going away. After my first night duty - we used to have a week off - they wouldn't allow me to go home because they thought I wouldn't go back.

What about the other trainees there? You obviously saw the distance. Did most of them stay?

Yes, all of them. Yes, and we've remained friends over the years. There's only one living and we are still friends. She was wonderful to me. She was like a mother to me during my training. She was doing her midwifery, and her name is Mrs George Turner. She married a man who was with Bennett and Fisher up there and went to live at Tumbly Bay eventually, but she lives at Magill now, strangely enough and we visit. She's in her eighties and I visit her quite regularly. She's a wonderful person. And the other two that I remained - well three or four of them really - - -. We were great friends because we transferred to the Adelaide at the same time and remained friends during that time.

You had a lot of common experience.

A lot of common experiences yes.

Who were the others then?

Joyce Weidenhofer, and she came from Mannum originally, and Julie Kelly who lived at - - -. Oh, I'm not sure where - Glandore or somewhere. Yes, they were the main ones. And the Lutheran Minister's daughter, Edna Myer. She's still living, and her sister. But these people, you know, they followed me through all the years - wonderful.

So you did - was it eighteen months or two years?

Two years there. I went to the Royal Adelaide in 1937. (correction - 1935)

We said you were born in 1914 and you started training, I thought you said, at the age of eighteen, which would have been 1932.

That's '32, that's right.

So wouldn't that bring you up to 1934 when you came to the Adelaide?

Yes, well I must have gone in 1935, having stayed a little longer at Loxton waiting for a transfer to the Royal Adelaide.

That was fairly usual I think.

I think so, yes. I can't remember right back those years. So much happens in the meantime doesn't it?

Yes it does indeed. Well now, tell me a little bit about your time at the Adelaide. You've mentioned briefly some of those experiences at Loxton.

Well strangely enough at Loxton I could never do theatre work. I would faint as soon as they'd start in the theatre, and of course they did a lot of surgery there, and particularly anything to do with gynae. or mid. somehow upset me. I'd only have to hear somebody was coming in with a miscarriage and I'd faint. I really have no idea why this should happen. But when I went to the Adelaide I vowed and declared that I would never go to the theatre. I'd leave if I was sent to the theatre, I'd leave if I went to Da Costa. Do you remember that awful little Da Costa ward?

Yes, miscarriages.

Well, as it happened I went to Da Costa and Sister Gault was there, and she was wonderful to me. She held me by the hand and took me through all the procedures and I coped with it very well. So I was very happy there. I did quite a lot of training with her, and I did a lot with Sister Kitson in Victoria Ward, which was a very busy surgical ward, but I loved it and got on very well with Kit. Did quite a lot of time in Flinders.

Sister Rogers?

Yes. Yes, she was tough, my word. They were wonderful sisters - they were really wonderful Army sisters and they really taught us very well.

You used the word, "Army" sisters, but they weren't Army were they?

Well Kitson was.

Had Kit been to the war?

Yes, Kit had, and hadn't Rogers?

No, she hadn't. I had a talk with her about her nursing and her sister went into the Army but she didn't.

Ah, right. Well she was pretty tough anyway.

But that's interesting, Kitson did.

Yes Kitson did. She was a real Army nurse. Who else? I think I did mainly my training with Kitson, you know.

A lot of surgical nursing then.

Yes, a lot of surgical nursing, so I did plenty of after care, even if I didn't get into theatre.

And you did not actually get into the theatre at the Adelaide?

No.

You managed to escape.

I managed to escape it in some way or other. So I did plenty of medical and ears, of course - ear, nose and throat. We had a TB ward at that stage. Old Torrens Ward, wasn't it?

Oh, was it a TB ward in those days?

Yes, I think so, yes.

Not Frome?

Frome, that was it - yes, Frome.

That's right, Torrens was ENT. Frome was a TB ward.

Yes.

After they closed what they called the Consumptives' Home.

That's right.

Anne, what do you recall about lectures when you were a transfer at the Adelaide?

Well I think I went to the School of Mines and did cooking - invalid cooking.

A certificate in that.

Yes certificates there. I cannot recall what other lectures I went to.

Most people seem to have recollections of going to doctors' lectures at night down in one of the University lecture rooms.

That's right. Yes, I think I can recall that vaguely, but I must say - and I'm ashamed to say - that I attended very few lectures while I was at the Royal Adelaide. Very few.

Well you weren't required to attend very many. The number was very small.

That is so, yes. I remember Miss Scrymgour coming back, and I think towards the end of my time at the Royal Adelaide, I probably attended a few more lectures after she'd come back.

Oh, did you? Yes, she had been away on her Florence Nightingale scholarship. She came back, I think, in 1937. You were there that year?

Yes, so that would have been towards the end of my training.

Did you appreciate the fact that she was there to give some lectures, or was it just something that you went along with?

Well, I don't think I went along with it very much to tell you truth. I always had a book to read or a book to study from. But I think I got most of my training from my practical work. I could always associate that with the theory. And it really was good nursing. We had to really do things for patients, because there were not the antibiotics, and people used to stay in bed so much longer in those days. They weren't ambulant as they are today. It's a very changed scene now.

Yes, particularly pre-antibiotics.

Yes, and I think that we're part of that change ourselves. I can remember thinking, when I worked in Victoria Ward with Sister Kitson, I used to think she was so tough, and I used to think, "I'll never treat trainee nurses like she treats us". (laughter)

You did find her tough in that way?

Oh she was - she was. She was very tough and it was hard going, but good training.

You felt you learnt, but it was the hard way of learning.

Oh yes. Yes, and we'd get very tired. I can remember on night duty in those wards. You'd just run all night. And the meals! We'd have to cut up about a dozen loaves of bread at four o'clock in the morning to be ready for their breakfast. They used to have boiled sago. (laughter) Big cans of boiled sago. You'd rush around the ward with bread and butter - that was breakfast.

No trays.

No trays. No, you'd plonk these things on their lockers.

Yes, there was not much finesse was there?

No, absolutely. Well, you really didn't have time to. But at least the wards were always clean and polished, and the patients were always kept clean and well sponged and cared for, which is after all the important thing.

The essence of it.

Absolutely, yes.

So you finished towards the end of 1937 and your other Loxton friends were finishing at the same time.

Yes.

Oh, you were going to tell me something, I think, about where you roomed - what your accommodation was at the Adelaide.

Yes, well I think almost as soon as I went there I roomed with Weidenhofer and Julie Kelly. We were in the main building for a time, and then I guess we went to Austral for night duty and there we remained. We roomed in a very large room in the basement at Austral House for the rest of the time we were at the Royal Adelaide. We had an open fire in the room. We'd have a bed on either side of the fireplace. How we didn't ever burn that Austral House down I'll never know. We used to keep it [the fire] going all night and we'd lean out of bed almost in our sleep and put on a log of wood. (laughter)

Yes, well I'm glad they made some concession because the coldness there must have been ghastly.

Yes, well I think when you're young you don't notice these things. I used to go home and sleep a lot. Especially on night duty I'd always go home and sleep during the day.

Well, what were your thoughts on finishing training?

Oh, I loved every minute of my training. I was just so enthusiastic about nursing - I loved it. Loved caring for people.

So did you have plans by that time, as to what your next move would be?

Yes, I was determined to do my midwifery, which I did in 1938.

More or less straight on.

Yes. I did a little private nursing in the meantime.

Did you join a nursing bureau for that?

Yes I think I must have done, but even that's a bit hazy. I don't quite remember clearly about that. Then I went to the Queen Victoria in 1938 and Miss Day was Matron and Miss Carroll was the Deputy. She was the Labour Ward sister, and a very wonderful one. I think it was Miss Carroll that really introduced me to midwifery, and I admired her so much that I loved it, and I loved her.

I'm glad to hear someone who experienced nursing with her.

Yes, she was absolutely the beginning and end of my midwifery training. I loved it because of her. She used to give us our lectures, which I also enjoyed, so I did go to lectures while I was at the Queen Victoria. (laughter) And I think I passed with a credit so it must have done something for me. Then I stayed on at the Queen Vic. I was invited to stay back, so I was there.

Did they give you more labour ward experience then?

Yes. More general. Mainly labour ward experience, and I liked that very much. But I was also ---. I think this was the Adelaide Hospital training too, where those old sisters had been there for so many years. I vowed and declared I'd never stay anywhere for any length of time. (laughter)

You felt they were too old, did you?

Yes. (laughter) And the other thing was I think I really wanted to learn more. I needed to know more about babies. But during our training at the Queen Victoria Hospital - now it makes my blood run cold ---. I think we had a trolley and we used to pack those babies on to the trolley. They were never labelled you know. They were never labelled, and yet we knew those babies and if we didn't know them, their mothers did. If we gave them the wrong baby, they'd know. And we used to run up and down that staircase with three babies in our arms at a time at the Queen Vic.

I see, you had your mothers ---.

The nursery was downstairs, the mothers were upstairs.

Wasn't that extraordinary?

Yes, we used to run up and down those stairs with three babies in our arms at a time.

And I presume there was never an accident.

Never an accident.

So nothing was ever questioned.

Nothing at all. Babies were never labelled, mothers were never labelled. Their cribs were labelled. They had their names on their cribs.

It was up to you to get the right baby back into the right crib.

This is right, yes. Well, we managed it somehow. Wonderful.

Yes, you were very alert.

Yes. Well we had to be. You know, you had to be very observant in nursing in those days. Well, I suppose they do now.

Yes, that's true, but it was certainly paramount, wasn't it?

Yes. So, I'm not sure how long I stayed at the Queen Vic. My reference is there from Miss Day. I had my name down already then to go to the Truby King Baby Training Hospital in Victoria, so whilst I was waiting for a call to go there, I was at the Hutchison Hospital, Gawler. Worked in the general and midwifery section there with Dr Covernton.

This was still just before the war, or had war broken out by this time, do you recall?

Well no. I went to Tweddle in 1940 and war broke out in 1939.

Well, end of 1939 actually.

So it was about that time. And I really wanted to join up and go to the war, but when I'd finished my four months at Tweddle, which I thoroughly enjoyed, I went to an agency on Toorak Road, South Yarra. Because I hadn't done my final exam for infant welfare. It was round about the end of October and I had a week to go before I did my final exam. So I thought I'd stay in Melbourne, have that week to relax and study and do some private nursing till Christmas time before I came back home. Of course, nurses were very short during those years.

Yes, by that year there'd be lots who'd been called up for Army service.

That's so true. So almost as soon as I got into the agency there was a call to go to a private patient in South Yarra, and that happened to be Arthur Baillieu, whose name didn't mean a thing to me. I didn't know who the Baillieu's were. He was just some other old boy who needed a private nurse.

So I went along there. This nice gentleman sitting up in bed - in his seventies he was - and he said, "Oh, you know you're only here for a few days," and I said, "Well I wouldn't have come otherwise because I have an exam to do on Friday, and I can only stay here until Tuesday anyway". He had somebody else coming at that time. So by the Tuesday he said he'd like me to stay on and be a night sister. I said, oh, I couldn't do that because I wanted to go home at Christmas time and I had my exam to do. He said, "Well, if you'll stay, you can have the chauffeur and the car to take you to your exam and bring you home". (laughter) Made it all sound very interesting. So I thought about it and said, yes I would, and I stayed there for three years. Had a very interesting - - -.

He had a family - he was a married man?

Yes. Yes, he had a married daughter whose husband was an artist - John Reid. They lived in Heidelberg, and Sidney Nolan and all that crowd were their friends. And his eldest son was the solicitor, Darren Baillieu. I think Darren's still alive - lives in Victoria. And the youngest son, Everard, went to the war soon after I arrived at the house and then he was invalided home some time later. He was at El Alamein and he had shrapnel in his leg and was sick for a long time. But yes, they were very interesting years. I tried to leave on several occasions.

Were you on night duty all that time?

No, no, no.

You'd become the senior member of the nursing team.

I was just there for a short time on night duty, and the sister whom he'd wanted and knew, because she'd looked after his son, she came, but she didn't want to stay. So I was only on night duty whilst she was there, and as soon as she went I went and lived on the premises. We used to go to Sorrento every weekend. They had a lovely home and a resident staff down there - a cook and domestics - and really had quite a wonderful time. I tried to leave and said that I wanted to join up, but he had me declared "essential duties" looking after him. (laughter) He used to ring Bob Menzies and tell him how to run the country.

He was not sick. He used to go to the office by day. So he used to buy in huge quantities. He'd order tins of raisins and toothpaste and toothbrushes, and we had a little room under the stairs, because it was a three storey house that we lived in. The American Consul rented downstairs and we had the huge flat, it was called, but it was bigger than any

house, and then there was an upstairs part. We had a big fire up there and he bought me a sewing machine and rolls and rolls of unbleached calico, and lots of cartons - by the hundreds - and we'd pack up - - -. I'd get all my friends to come and we'd pack up all these parcels to send to the troops. So anybody who came to the house, anybody that they knew who was at the war, would all have a parcel sent.

And they were doing it regularly. You were the one who was really doing it.

Organising it, yes. So that was interesting. And then Mrs Sidney Myer, who was his niece, she came to live upstairs and she gave her lovely home in South Yarra to the Navy because her eldest son, Ken Myer, was in the Navy at the time. And we used to have Mrs Billy Robinson, whose husband was a big BHP man. They used to be great in the Red Cross and would come and spend nights with us - always entertaining. He had a big poultry farm down at Sorrento. We used to go down there on Friday nights and we'd come home with all these chickens and eggs, and he'd dole them out to people. You know, people who were hungry - - -.

END OF TAPE I SIDE A.

SIDE B.

You left Melbourne, then, when Mr Baillieu died. Some time after you came back to Adelaide, and that would've been about 1943.

1943. And I went to the Truby King Clinic in King William Street and was there for quite a long time.

That was good to consolidate your infant welfare time.

Oh yes, most interesting. And they were the days when babies were fed regularly four hourly to the very minute. (laughter) Although I think I was always very lenient about that, and always felt that they should be fed when they were hungry and not allowed to be too hungry and to cry. But we used to give them all that Kariol and Karilac - a big fat diet.

And they grew lovely big fat babies.

Yes. A lot of babies couldn't tolerate it.

What was Kariol?

Kariol was the emulsion. I've forgotten what the sugar was. [Karilac]

And was it added to the milk feeding?

Yes. Yes, added to the milk feeding. So that was an interesting twelve months. Well I must have decided then that I would like to go back to hospital nursing, and that's when I went to Memorial.

Was there still manpower control in Adelaide at this stage?

I'm not sure whether it was manpower at that point in time. Well, I suppose it was.

I think it began in 1942, and I experienced it myself in 1945. So you probably had to get permission for what you wanted.

I probably did, but I don't remember it. Anyway, I got to Memorial somehow or other.

You chose Memorial for midwifery?

Yes. And whilst I was at Memorial, I was invited to open Hindmarsh Memorial Hospital, it was called at that stage. Hindmarsh was a private hospital when Memorial took it over. It was a desperate situation because the midwifery beds in South Australia were absolutely hopeless.

Inadequate in number.

In fact the girls had to book their beds before they became pregnant, if they were planning a family. Yes, they'd book a bed twelve months ahead, so they were very difficult years. So Memorial decided to buy the property and I went down there with Mr Davidson and his wife. Mr Davidson was the Secretary of the Memorial Hospital at the time. I went down with him and we set it up with everything that was necessary. They were busy years. We'd do a thousand babies, and of course the nursing staff was manpowered at that stage and we could only have a certain number on our staff. So I used to do the laundry. I had one cook. We used to have to do all our soiled laundry - terribly inadequate. Napkins we'd run short of. It was two very desperate years. My family were wonderful to me. They used to come down. My sister used to come and help me and my old aunts used to come. (laughter)

What, help with sort of domestic things like the washing, the cooking.?

Yes, cooking - - -.

But you were left there responsible for it.

Absolutely, yes.

Did you have any opportunity of letting Memorial know that things were really rather tough?

Oh they knew. Mr Davidson was always there. But you know, I was young and energetic, and I had wonderful girls around me you see. I'm still friendly with those girls who worked with me in those years. I see one regularly each week now. So they were good years, and we did have a little recreation. I can remember after working madly in the hospital - - -. And after all you never counted your hours - you just worked madly on. If ever I did go to the pictures at night, my name and a telephone number would be on the screen and I'd be out before you knew where you were. (laughter) These were also the days before specialists, you know, pretty well. There was Sir Brian Swift and Ron Verco, and Dr Wurm. I think Ruth Highway, Harry Fisher. Yes, that was about the limit.

Just a handful of them.

That was about the limit. I'd got to know them at Memorial, so it was easy to follow through. But it was amazing. We didn't ever have any - very few - stillborn babies. Not any caesarian sections while we were there. We didn't have a theatre anyway.

You don't remember occasions when you had to move anyone on for a caeser?

They would have gone to Memorial of course. And the very premature babies went to Mareeba.

You had that nearby.

Yes. So we were covered in that way. I don't think we ever had to send many there.

Did you ever keep the less premature ones - you know, the small but not desperately small - at your hospital?

Oh yes, always.

What were the provisions for looking after prem. babies there?

Oh, we'd wrap them in cotton wool and feed them with a pipette, which was what we were taught to do at Tweddle, of course. I had that backing, so I was very confident. Very young and very confident, and loved every minute of it. But when I think of the delivery conditions now, and we'd deliver babies on a theatre table. How those mothers - - -!

Was that the normal place for delivery?

They must have been so uncomfortable!

Was that because there was no proper labour ward?

We didn't have a proper labour ward bed. I don't know that we ever did get one.

Gracious, to be still on a theatre table, it's so narrow!

Well of course I would never leave a patient in labour. They used to labour on their beds in their rooms and then be taken for the delivery mainly. And they would never be left alone. That's one thing that I was very adamant about - that not anybody in labour should be left alone, whatever happened. But the babies were always kept in the nursery, and once again they were never labelled.

So, again, you put them on trollies and wheeled them.

No, well we didn't. We didn't have trollies to wheel them then. We used to run around with them individually. As a matter of fact, I can't even remember where the nursery was there. (laughter) But I only stayed there two years. It was too, too desperate and I nearly had a nervous breakdown because it really was so heavy and so busy and such a big responsibility. It was during that time that I was asked to buy - by the doctors - Le Fevre Hospital, which was a private hospital in those days. The doctors in the area offered to me to go there, but I wasn't prepared to - - -.

Had they bought it?

No, it was being sold

It was being sold and they were suggesting that you might purchase it and become the owner and the Matron of it.

Yes, that's right. But I wasn't prepared to take that responsibility at that stage. So I went off to Tasmania for a holiday, to start off with, and loved it so much that I decided to go back with some friends from the Adelaide, and we worked at the Repatriation Hospital there.

That would have been not midwifery.

Not midwifery by any means. (laughter) I didn't ever choose to do midwifery, strangely enough. I loved looking after general patients, and I liked being in men's wards, and I didn't ever choose to do midwifery, it just sort of happened.

It chose you.

Yes, so it seems. And I suppose it was because of the war years and such a desperate shortage of staff, so that anybody with the training was manpowered into it. So I guess that's how it all came about. But my sister, unfortunately, became very ill while I was in Tasmania and she died, so I had to come home. So I stayed home at that stage, because it was a great disaster and I was terribly upset for a long time after that and didn't do anything for about six months I think. It really upset me.

So then I went to Port Augusta and worked in the hospital up there. I think I was in general wing up there, and I met up with Molly Ogden.

Was she there?

Yes.

Mary Fitzgerald?

Mary Fitzgerald, that's right.

Molly was at Mount Gambier.

Mount Gambier, yes, that's right. Yes, I was trying to think of Mary Fitzgerald.

I'm hoping to interview her when I go up that way soon.

Who?

Mary Fitzgerald. She lives at Whyalla they tell me.

Does she? Oh, she married, didn't she? She married the newspaper man.

Yes. I've forgotten who she married.

Yes, well I spent a short time there, and then I was at Hamilton in Victoria - the Kia Ora Hospital which was midwifery. I was only thinking the other day how interesting it is, you know, with all the gadgets they have for midwifery these days. And I don't think in those days we ever took foetal hearts. Well, there were no foetal stethoscopes as I knew later on.

Weren't there? Did you put your ear on the mother's abdomen?

You'd put your ear on the mother's tummy, and as for examining them, you'd just ---. They'd have a sheet at the end of the bed to pull on when they were in labour. And they'd have morphia and hyoscine. They'd be absolutely up the wall because they wouldn't know what they were doing. And yet the babies'd be all right, you know. Amazing. I was only thinking about that the other day.

Yes, that's right. The actual techniques have changed so much.

Yes, so much. Well then I came home. I suppose I was up there for about six months, and I came home and I relieved the Matron at Mount Pleasant Hospital.

Who was the Matron there then? Was that Lahne?

Lahne was there, yes. And old Lionel Cowling, who was a wonderful surgeon. I learned a lot from him. I really did learn a lot from him because he was very forward thinking. A wonderful surgeon, and used to get his patients up out of bed. You know, after the training at the Royal Adelaide, and at Memorial ---. You know, Memorial Hospital in those days

was a wonderful place for people to go and have their babies. They used to come in there with their own mattresses and their pillows and their blankets. The whole house practically would come in when they were having a baby there. They would stay in bed for fourteen days, and they had these wonderful women on the staff at Memorial who would go home with mothers afterwards and care for the babies, sometimes for six weeks. They were the days weren't they? (laughter)

That's right yes. No wonder there was pressure on the beds when they stayed for that length of time.

That's so true, and of course they weren't allowed to put a foot out of bed, and so you can imagine what a turn around when I go to Mount Pleasant and here he is going to the shower the morning after a gall bladder operation. I thought this was wonderful because his theory was good, you know. No deaths from thrombosis - absolutely. So of course that was wonderful for me. I came back to Memorial after that. I probably did some private nursing. But they offered me to be in charge downstairs of midwifery wing at Memorial, which I was. And from there I was invited to come to Glenelg. The bed shortage was still desperate. This was in June of 1950.

There was a post-war baby boom wasn't there?

Absolutely, yes. Well, the bed situation was still desperate. And Harold Brown, who was head of Brown and Pearce - surgical books and equipment - he lived at Glenelg, in Roberts Street. And the doctors in Glenelg - Dr Stoddard and several of the others - -.

Stephens?

Steele - Don Steele - and Dr Bowering from Brighton. They used to have to come to Memorial to deliver their babies. There was no hospital in this area at all. Harold Brown was an Apexian - he belonged to the Apex Club - and this property in Farrell Street was for sale and a group of the Apex boys got together, with the doctors, and decided that it would be a good idea if they could raise the money to open a midwifery hospital. So that's how the idea was born. Because I was working at Memorial and the doctors knew me there, they asked me if I'd be interested to start the hospital down here. So after much deliberation and coming down and looking at it and meeting the Board, who were a pretty wonderful crowd of men, I decided that I would. I asked Pat Cussen to come with me, and she was at that time working in the nursery at Memorial. I asked her if she'd like to come down with me and we both came down and had a look at it and decided that we would both consider it. So we started down here on 1st November with the workmen still working. No equipment, no anything. We had to order all the bedding and the beds. Well, it's a long story and it's all there in that book.

Isn't that lovely? I'm delighted to think that you've got all of that record.

Yes, well you can take that away and you can take whatever you want out of that, because it's a very interesting story, Glenelg. I decided I'd stay there for five years, but it went on for twenty four! (laughter)

Twenty four. I knew it was a long time. Isn't that marvellous?

Yes. And I saw it grow from an eighteen bed. Well, it was to be opened in the December - Lady Norrie was to open it. We were camping. There was nothing in the kitchen - no stove. We'd had to cook our meals outside on an open grate. It was even before the days of real barbecues. We had an old fashioned grate with a fire under it. So that was interesting, but we had such wonderful support from the Apex boys who were marvellous.

They took a very strong interest in it.

They were there every day and every night, and the architect - Caradoc Ashton - he was wonderful, and he used to be around there. And Mr Giles was the Chairman of the Board, and they all supported us no end and it was really great. So I recruited some staff. Well three of us came from Memorial really, because Sister Green came down also. She was a very good sister.

She came at the same time, did she?

Well, soon after.

Was she also from Memorial?

Yes, she was also from Memorial. One night - I think it was about the 23rd November - - -. It was to be opened on 1st December. I'm not quite sure of the date, but this lass came in the early hours of the morning. We had already turned several away. Because Ashford was just a small private hospital at that time. But we had an arrangement with them that if we were not ready to take the mids that were booked, that they would take them. But this girl particularly wanted to be delivered at Glenelg because she had been born there when it was a hospital when she was young.

It was a private hospital in the early days?

It was a private hospital in early days, but when we took it over it was a boarding house, so it had to have a lot of alterations.

So this baby was born before it was officially opened?

Yes, we took her. It was a big day. It must have been a Saturday, because the Weirs - you know, Mr Weir the builder - - -?

I don't know the name.

Yes, well they live in White Street - they still do I think, live in White Street. There was a big do down there that day for a fete to raise money for the hospital, and everybody who was anybody in Glenelg was there. And then they put it over the microphone that the baby was going to be born at the Glenelg Community. Well, we had everybody there - the mayor and everyone else! (laughter) You'd have thought the architect was the father the way he smoked packets of cigarettes and paced up and down outside. It was a lovely experience. And then everybody after the fete came up to see the baby.

What a wonderful reception!

Yes. So, her photographs are there and all the carry on about the first baby that was born. Then we had several before the opening when Lady Norrie came along and opened it.

So there were some babies for her to see.

Yes. Yes, well we delivered over a thousand a year every year.

And you say you began as an eighteen bed hospital.

Yes, and we increased it to a forty bed hospital over the years.

So it wasn't a massive increase but forty's a nice managable size.

Yes, just right.

All the time that you were there, was it purely maternity?

Yes. No, I'm sorry, not towards the latter years as the pill came in. You see, we saw all those years, and our midwifery bookings went down. And of course in these years there were more specialists on the scene, so we co-opted a few of them on to the Board so that I can - - -. I was the only woman on the Board, you see.

I'm glad as the Director of Nursing you were on the Board right through.

Oh yes, right from the beginning, and I was consulted in every way and I think I always got my own way too. But they were a wonderful Board and they were a great group of men.

Anne, how was the hospital funded from the outset?

It was by public subscription. People raised money in the area for the hospital. The Apex Club had functions and the whole community was behind the effort, because the beds were so necessary in the area. The Mayor and Mayoress were interested, so the Town Hall was always available for functions, and people had fetes and they had beauty contests. It was quite a community effort.

All done by subscription. As you say, a very good *community effort*.

Yes. And the bank gave us a loan. Our fees at that stage were eight guineas a week when we first started, and the patients used to stay in for eight to ten days, but I can assure you their beds never got cold. We'd have to take them out of bed the morning they were going home, to put somebody else in it, and they were delivered on barouches and staff beds. You name it. In fact we had them everywhere. (laughter)

Because you had limited labour ward.

Limited labour ward, yes. Gradually we built our labour wards up to four, and then we built a theatre, we enlarged our nursery. We had a donation from Mrs Mudge, who was a very well known citizen in the area. She gave us a thousand pounds towards increasing our nursery, which made it the nursery it is almost today. We started off with a very small nursery and small cribs.

What about operating theatre? You didn't have that at the outset I take it?

No, we didn't have an operating theatre, I think it was, for about seven years.

What happened on the odd occasions when you had an emergency there?

I can remember one occasion when we had a patient with an obstructed labour and we didn't know what to do with her. But there was a little hospital in Patawillya Grove - or a big hospital; I don't know how many beds they had - called Southglenn at the time.

A private hospital?

It was a private hospital at the back of our hospital in a little lane called Patawillya Grove, which wasn't even a main road at the time. And I can remember wheeling a patient across there at night. Two of us wheeling in the middle of the night - on a trolley with a drip running - wheeling her across this bumpy road, in labour, poor soul, to Patawillya Grove to have a caesarian section. And then she came back to us in the morning - mother and baby.

A co-operative effort.

Yes it was indeed. And I think there were a few that we sent to Pier Street. That was a private hospital. They had a theatre there, so we used to go round and collect the baby and the mother would come back to us in a few days.

Yes, because they weren't a maternity hospital. She was just kept there for post-surgical.

That's right. But the one thing we did start, as soon as we started at Glenelg Community Hospital and because of my experience at Mount Pleasant Hospital and early ambulation of the patient, we got our mids up very early and got them moving, very much against the grain of the doctors who said, "My patient is not allowed out of bed". Unfortunately as soon as he turned his back, the patients would be up. The mothers used to come in and say, "My daughter shouldn't be out of bed".

How did you work that one, because you needed a little bit of persuasion obviously?

Yes, well we were very determined that it was the better thing for the patient, which it was.

It didn't prove to be otherwise.

So we kept on. I think perhaps in those days it's very different to nursing today.

Yes, but you'd have to ---. Of course the doctors had high regard for you, even though they weren't so keen on that particular thing.

Yes I guess so.

And the patients themselves, I guess, would advocate it - would recognise that they felt better.

Yes, I'm sure they did, and they were more able to cope. And the other thing was, we didn't have rooming in at the hospital. The babies were all kept in the nursery. They were not labelled either, but their cribs were labelled, but the mothers were always welcome in the nursery. They used to come to the nursery to see if their babies were crying. They used to come to the nursery to pick them up and take them back to their rooms and feed them, and we did that right from the beginning, or as early as possible. I did send two or three of my senior staff to Tweddle, in the very early years, to do their infant welfare so that I'd have proper back-up of people who knew what they were doing with the babies. So we did that right from the beginning, and we were the first hospital to start relaxation classes.

Tell me a little more about that.

We were very forward thinking in a lot of our things. Instead of having screens around the beds, we were the first ones to have curtains around the beds, and we had proper obstetric beds - oh it was heaven. And very exciting, because we had blue walls! (laughter) Colours.

You were the first ones to introduce colour?

Yes, colour into the hospital.

Now how was it that this came about? I mean, obviously you had some ideas.

Yes, and the architect was very forward thinking. We used to get together daily practically, and he'd be as interested and as excited about it all as we were, which was a great help.

Would you say that your ideas really came from a variety of situations in which you'd been?

Yes, definitely.

But you seemed to be a jump ahead of even those situations somehow. How do you explain it?

Yes. Well, I kept abreast of things, and I think I was very observant. I went to Melbourne often and had a look at the maternity hospitals over there. I used to haunt the Women's Hospital in Victoria because I still was friendly, of course, with the Baillieu family and I had other friends over there, so I used to pop over there every so often. Whilst I was there I'd visit other hospitals so that I knew what was going on, and colour in homes, even, was coming in at that stage, so it was really something to have pale peach walls and blue ceiling and one blue wall (laughter) which was hideous if you said it now.

Leaving the hospital situation for a moment, tell me about any connections that you had with groups of nurses. I recall you as a member of the Florence Nightingale Committee I think.

Yes, I was on the Florence Nightingale Committee. That was prior to me going to the College of Nursing, I guess.

What year were you there, can you remember that?

END OF TAPE 1 SIDE A. B

TAPE 2 SIDE A.

On this tape is the continuation of the interview conducted by Joan Durdin with Doreen Nellie, commonly known as Anne, Sturm, of Glenelg. The second part of the interview is being conducted on Friday 17th June 1988 at Miss Sturm's home in Glenelg.

So tell me a little of what you remember of the course at the College.

I think it was marvellous. I was very impressed. It was all a lot of commonsense as far as I was concerned, because I'd been doing administration for all those years, and it just sort of put everything into perspective, but it also made me think. Mind you, a lot of it was double Dutch for a while, because I found concentration very difficult and I found the studying very difficult. But the tutors were very good and it was a very friendly atmosphere. The girls that I did it with - - -. Lucy Bohan from Western Australia and I were great friends. We really became great friends and still are [also Margaret Jones]. We quite enjoyed it, but we'd also go and play golf occasionally and walk in the park to get away from it.

Where did you live? Where did you have accommodation when you were there?

We lived at the College - upstairs.

That was convenient.

It was very convenient, and the tutors were there. I can't even remember their names now.

Pat Chomley was the Director, and another Pat whose name I've forgotten.

Yes, another Pat. [Pat Osborne] Yes she was very good. Isn't it terrible how you forget. She was our main tutor, and we used to have lots of lectures. No, I was very impressed and I enjoyed it all. As I say, it was a very hard year of concentration, but I gained a lot. But it

also made me think because this was the time when administrators were coming into hospitals, and I think I could foresee what was going to happen and that nothing would be the same again in any hospital situation. I felt that if nurses were not careful, that their jobs would be taken away from them, and I think that was the most important thing that I used to always be saying. You know, "We've really got to do something about this, and we've got to be terribly careful".

And you felt then that you had to be as well equipped academically as anyone else who might be doing an administration job?

Absolutely, yes. But I also felt that even the situation at Glenelg Community, which was a small hospital - and we weren't even a forty bed by then - we needed more than just an ordinary Matron who could run around and do the accounts and the pays and the cooking and the labour wards and everything. There had to be changes made.

So you came back after a year of hard work, with your qualification and that dear little College badge which I notice you had as a memento of that period.

Yes, and very proud of it too.

I noticed there were other things amongst your badges. There was an Old International's badge. That must have implied that you also had a grant from the Florence Nightingale Committee.

I think so. I cannot remember very much about it at this stage, but I'm quite sure that I did have a grant from the Florence Nightingale. Well, I applied for it and I feel sure that I may have got something.

Yes, well that badge is an indication of it, because that association called the Old Internationals, was actually made up of nurses round the world who had had Florence Nightingale scholarships in one form or another. So that would be the case.

I see, yes.

And subsequently you were associated with committees in Adelaide that were related to the College.

Well of course. When I came back I joined the South Australian Branch of the College of Nursing and I was also on the Florence Nightingale Committee, and I think I was on the Education Committee at one stage, with Val Hardy. I was very friendly with Val at the time and we were on the Education Committee together.

Had she been doing her course in Melbourne the same year as you?

No. No, I don't know if Val went or when she went to the College of Nursing.

She would have gone at some stage. I just wondered if that was your link with her.

And then I was President of the Matrons' Section of the RANF.

They used to have an Annual Conference.

We had an Annual Conference. I remember we had one at Aldgate at a restaurant cum residential house. Lovely old home. I think we had a weekend up there at one of our Annual Conferences. It was a lovely weekend. I remember driving up there in the terrible fog and thinking, "Oh, I'll never find the place," but I did. Yes, so that was interesting.

Would you recall that the Matrons' Section of RANF - or they may have called it by then the Nursing Administrators' Section - - -.

No, I don't think they were. They were still the Matrons' Section.

Was it fairly well supported by the Matrons around the country?

Yes, I think so. So far as I can remember there were quite a group of us from country and from around the city. I don't remember their names and I don't think I've kept any of the material.

I dare say they've got minute books that I could refer to.

I'm sure, yes.

So those sort of activities you retained through the rest of your working life.

I did, yes. And continued on with lectures - midwifery lectures. Then there was a midwifery section, I think, of the RANF wasn't there?

Yes, there was indeed.

I used to go to most of those lectures and weekends, and then I encouraged my staff to go along. So in latter years I wasn't so well and didn't go to so many myself, but I always had somebody from the hospital who went along.

Were most of your staff ready to support RANF and become members of it? Did you have any particular drive to get membership?

No, I don't think I ever had any trouble about that. The only thing is that I used to fight very much to keep my domestic staff out of unions, and didn't ever have anybody belonging to a union on my domestic staff. In latter years I had a representative who came along and wanted them to join and they told him they were quite satisfied with their conditions and they had no intention of joining a union, and we got away with it, but I don't think we could in this day. (laughter) No, indeed. No, I think it was some time after I left - quite some time after I left - that they were forced into joining a union.

It's interesting that they felt they were better off without union membership.

Yes. Well, I must say that the Hospital Board were always very generous to the staff, and they always, in the early days, paid their staff a little more than the award rates. Right from the very beginning. I don't know that it was very much, but it was recognised that they worked hard and that they were appreciated. And the domestic staff were all part of the family. We all worked together. That's what's so nice about a small hospital, but of course all that's gone now and it doesn't matter how small it is, it's all so different.

Yes, that's right there've been many changes in structure.

Of course, and it had to be, because of the financial situation really. When you think, when we started off it was eight guineas a week, and I think I received five pounds a week working twenty four hours a day practically, and seven days a week. Yes, but we were happy. You see, you didn't even think about it in those days, whereas now it's, what, nearly three hundred dollars a day.

Is that what the charge is for hospitals now?

Yes. I went overseas. I went to a Matrons' Conference. Was it a Matrons' Conference overseas?

International Congress. Did you go to one of those?

International Congress. Yes, in Frankfurt in Germany. That was wonderful. I had a holiday on the way. I went to Hong Kong and I stopped off at India and Rome and Athens, and then flew to London, and then we flew to Frankfurt and we were there for two weeks. It was a wonderful experience - really wonderful experience - but then I had a trip around the world at that stage and I visited many hospitals. I particularly visited a little nursing midwifery hospital at Lucerne, and there I was very impressed. It was run by the Sisters, this little hospital. St Anna's Clinic it was called, and I was so impressed because they had bidets for their mids. You know, all those awful years when we started at Glenelg we used to run around with these dreadful bedpans every four hours. Even though the patient showered, they still were swabbed down. Ghastly business - every four hours. And when I saw these bidets I was so impressed, so I came back to Glenelg and we had decided to build another wing at that stage with private rooms and shared bathrooms, and so I insisted on bidets being installed. We were the first hospital to install bidets for the mids.

Yes, I hadn't heard of that. Has it been adopted fairly widely now?

Yes, they adopted it. When they were building at Flinders they came down and looked at our bathrooms and they've incorporated them there. Wonderful idea - much cleaner for the mids, and for the gynae. patients as well. It's a great thing. So that came from Switzerland. Then I visited other hospitals in England and their techniques, and in America. I don't think I saw many hospitals in America, but we came home through America and I felt I'd seen quite a lot. I had four months away at that stage.

That was about 1965. I think that was the Frankfurt - - -.

I'm sure it was that year. Yes, that was a wonderful experience. But I've forgotten a lot about it now.

Do you remember the colourful ceremonies?

Oh yes.

People in national costume.

Yes. And it was in a most wonderful auditorium, I suppose it would have been. Marvellous set up. Yes, and they entertained us very well too. Trip on the Rhine, with all the nurses from all over the world. There were two huge ships - are they called on the Rhine? We had a whole day and were entertained by the girls - by the nursing staff from Germany. Wonderful experience.

Yes, it's a wonderful experience of hospitality and sharing, isn't it?

Yes. Wonderful food, wonderful singing, wonderful companionship. It was really a wonderful experience.

As you've been talking about your experience of nursing over many years, and particularly the twenty four years that you were at Glenelg, there were obviously many changes and in some of those you were responsible for initiating the changes. I've heard you say several times - "Well, of course, there had to be change. It was inevitable because other things were changing". Could you talk a little bit about your thoughts about the changes in nursing?

Well I think it came about because of finances and the hospitals were becoming - - -. There was a lot of money involved because prices had gone up. I remember when I was in America. It was forty dollars a day to be a patient in a hospital when, I think, when I came home, we were charging about ten dollars a day by then. The Board were very impressed and said, "Oh, that'll never happen here," but of course it did happen, and it did happen before I retired. So naturally when large sums of money were being handled, there had to be people who would be responsible for that, so that part of it had to change.

So that meant that there were more business people involved in the running of a hospital.

Must be more business people involved in the running of it, and so that brought changes in other areas. And then of course there were more ancillary staff. Physiotherapy came into it and, particularly physiotherapy in with midwifery patients, teaching them relaxation. Although we never had a physiotherapist in our hospital because I had staff who were trained to do relaxation exercises. We had exercises and relaxation classes for midwifery patients from the early days of their pregnancy. When they booked up they would book up for their classes, which were free to all of them.

In those days, Anne, and up to the time that you retired, were fathers beginning to get involved?

Yes, certainly.

In the childbirth process?

I had had fathers involved for many years because I never allowed my patients to labour alone. When we were very busy and staff were short, I always had the fathers to stay with their wives and rub their backs for them and encourage them along. So that went on from very early days at Glenelg. We didn't introduce them into the delivery room until much later. Some of them didn't want to be anyway, but they were always there to care for their wives and help them through the labour. So they were never restricted in any way. But the physiotherapists came into it and other people came into it. The Mothers and Babies were involved as well, because they would see the mothers afterwards.

Yes, it became a big team. Do you recall the effects of the introduction of medical benefits and subsidies for hospitalisation? Was that operative at the time when Glenelg opened?

No. No, that came much later. I can't remember the year, but it would have been much later. You see, I was there for twenty four years and a lot of changes came gradually which one just accepted. But that was a very good system I think in the early days, of people being able to be in a private fund and be responsible for their own doctors and to come to a private hospital.

And know that they were covered.

Yes, made a big difference, and I think it worked very well in those days. Whether it would now.

And Anne, what about changes in nursing and the attitudes of nurses and so on? Have you any comments to make about that?

Well, we always had trained staff. We had all trained staff right from the beginning at Glenelg. Therefore they were all hospital-based trainees, and they stayed with me, most of them, until the time I retired. See some of them were there for twenty four - nineteen to twenty four years. So I didn't have a great deal to do with the nurses that were - - -. Sturt had opened by this time.

Well actually Sturt hadn't, no. Sturt didn't open till 1975, so it was after you retired. It's only in more recent experiences of being a patient that you've seen those sort of changes I suppose.

Yes. Well, as I say, from experience, I always encouraged people to keep up with the modern trends and to know what was going on, but I hadn't much experience of the younger ones coming along.

No, that's right. It was some time after you retired, I suppose. Although you were ill and needed surgery fairly soon after you retired, didn't you?

Yes, two years I think. I had had arthritic hips for a few years before I left, and had been having of treatment from Dr Burnell for many years for physiotherapy, but he thought - - -. This is another thing you see. Had I known that I could have a hip replacement before I retired, I could have gone on for another few years, but he said that I was too young to have hip replacement and that I shouldn't have it until I was sixty eight, by which time I would have been in a wheelchair well and truly, because it was becoming more difficult to walk about than my latter years. Or the latter year, particularly. Then I coped reasonably well after I retired with more rest, but then I had the hip replacement and I was marvellous. I drove up to Queensland six weeks after I'd had my hip replaced, so I didn't do too badly. And then two years after that I had the other one done, which wasn't a success.

But the nursing was still very good and the girls were marvellous, but they were still hospital-based a lot, but were having a lot more lectures. I really myself feel that the hospital-based nursing was a wonderful training with the block system for education. I really do think it was very important to have the theory as well as the practical, and I still feel that's important. But I guess again, you know.

Yes, well I suppose the thing is that the newer training provides a broader base. The hospital training almost inevitably has to be hospital-based, and these days with changes in attitudes to health care, so much more nursing is done outside hospitals.

Yes, and I think it will go on.

So the basic training prepares across the board for people that they want to specialise.

to find areas

Yes, I think that's the important thing. I think it's selection as much as anything, don't you? I think that if they're well selected and the administrators and the teachers and the technicians have extra training, and the bedside nurse will always be needed - always. This is one thing that I remember so much from the College, is the patient was always the centre and everything revolved around the patient. In latter years I used to say to myself, "Well my goodness me, if the patient is the central thing, it seems to me as though that's all theory, because it's not in practice". It's not happening. It definitely isn't happening today, although I think it depends on the individual a lot. If a nurse is really a dedicated nurse, well you'll get the care and attention, but when you're sick, let me tell you that the only thing you really want is somebody to hold your hand and be kind to you. You don't care how much theory they've got in their head. That doesn't matter. What does matter is that they're there when you want them. And nurses have had to change over the years. It left a lot to be desired and I think nurses used to think, because they were nurses, they could tell people what to do, and that I think was a terrible situation and something I never allowed to happen. I always allowed my patients to think for themselves, to have their own pills, and I used to be always saying to the staff, "They are people and they run their own homes, they look after their husbands, they do their cooking and their cleaning - why should they lose their identity when they come into hospital?" And that's still true today.

Yes, that's right and it still needs emphasising.

It still needs emphasising very much because I suppose anybody who's in power lets it go to their head sometimes, but I think nurses of all people have got to remember that they're human beings and they're frightened. It doesn't matter how sick they are, if they're going into hospital, it's a frightening attitude. But then again the public have changed, haven't they, now?

That's a good point. That's right, they have got different expectations.

Very much, yes. And I don't know that the younger people today really want people to hold their hands and be sympathetic towards them, and I wonder if that's because their mothers go out to work.

They've been thrown to their own resources.

They've been thrown to their own resources and made to think for themselves. That's something that we have to think about.

Society changes and therefore nursing must change.

We must always be prepared for change, no matter what, and welcome it and not resist it.

You have a very young approach. Your ideas are very young. Fresh ideas, I think, coming from your wealth of experience.

Well I think it's important, you know. All people should be prepared for change. And, you know, we don't want to sit back and do things today like we did yesterday. It's a challenge. Life's a challenge, and that's what it's all about, isn't it?

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