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Sir Henry Parkes and the Relationships That Enabled Nightingale Nursing to Advance Mental Healthcare in Nineteenth Century Australia

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ABSTRACT

This position paper explores famous colonial Australian politician Sir Henry Parkes use of relationships to reform colonial Australian mental healthcare by facilitating the integration of Nightingale-trained nurses into hospitals for the insane in the late nineteenth century. A review of historical sources including primary documents reveals that Parkes exhibited astute political skill by developing relationships with influential healthcare leaders such as Florence Nightingale, Lucy Osburn and Dr. Frederic Norton Manning. As Parkes cultivated friendships with such people, he was able to sow seeds for the deployment of Nightingale nurses including two members from the original group of six nurses sent by Nightingale to Australia in 1868, as well as three nurses trained under their supervision (probationers) into hospitals for the insane. This historical account provides evidence that enables current-day nurses to understand ways in which events of the past have contributed to the development of present-day mental health services and systems. Parkes' legacy also encourages contemporary nurses who are interested in change to consider the importance of forging diverse strategic relationships to bring their own visions into reality.

1 | Introduction

Mental health nursing is political. Individual nurses hold subjective political interests and nursing groups such as associations and unions run political campaigns. Conversely, politicians often seek to use nursing to achieve health, social, economic and political ends (Wilson et al. 2022). Given such wide-ranging implications, it is important for nurses to maintain an awareness of how politics has contributed to the evolution of mental healthcare in the past so that they are well positioned to consider and act in relation to political influences in contemporary times. Awareness of such history can illuminate why mental healthcare services have developed into their current state, which often has

little to do with the operationalisation of objective scientific evidence, but is more related to political expediency, lobby groups, money and power. In such ways, historical understanding can shed light on the human dimensions of healthcare and facilitate critical and creative thinking about the development of new approaches (Wilson et al. 2020).

This paper increases historical awareness of the role of politics in healthcare by examining how the Australian politician Sir Henry Parkes brought his vision for mental healthcare reform to fruition in the late nineteenth century. In particular, it considers how relationships he formed began the evolution away from mental healthcare reliance on pauper ex-convict nursing,

towards Nightingale nursing in the latter part of the nineteenth century.

2 | Background

Sir Henry Parkes (1815–1896) is regarded as one of nineteenth-century Australia's most influential politicians. According to his biographers (Martin 1974; Dando-Collins 2015), Parkes was born in England but had little opportunity to engage in formal education during childhood and experienced lifelong struggles managing personal finances. Despite such difficulties, he immigrated to colonial NSW with his first wife Clarinda in 1839, and after engaging in a variety of vocational and literary pursuits, he entered politics as an elected member for Sydney in the first Legislative Assembly of NSW in 1854. A decade later he became a minister in the government led by James Martin and by 1872 he was elected Premier of New South Wales for the first time. Over the next four decades, Parkes led one of Australia's most successful political careers, including five periods as Premier despite several interruptions due to financial troubles and insolvency. After a remarkable life, he died on 27 April 1896 leaving behind his third wife Julia, and eleven children (Dando-Collins 2015). The political cause Parkes is most famous for is his longstanding interest in unifying the Australian states into a single nation, which came to fruition in 1901 and led to him being remembered as Australia's 'Father of Federation'. However, he also made major contributions to causes including but not limited to, ending convict transportation, universal suffrage, education, and healthcare (Dando-Collins 2015).

When Parkes arrived in 1839, nursing in colonial Australia's hospitals and lunatic asylums was badly in need of reform (Raeburn et al. 2018). Convict transportation to NSW ended in 1840 and profound social and economic transition was underway as the colony evolved from a penal settlement into a land of hope for free migrants and their families. However, despite such major social change transpiring, the quality of nursing lagged well behind public needs and expectations (Starr 2017).

Some progress was made thanks to the pioneering leadership of the Sisters of Charity who arrived from Ireland in December 1838 (Ship News 1839). However, their work was often hampered by church politics, and their ability to produce large numbers of nurses was limited by religious requirements regarding affiliation with Roman Catholicism, which required women to enter their order of Nuns to receive nurse training (SMH 1859). Apart from the Sisters of Charity, all other health services and hospitals continued to be staffed by underresourced, poorly paid nurses from pauper ex-convict backgrounds and mental healthcare was in a similar state of decay (Raeburn et al. 2018).

In 1838, NSW had opened its first purpose-built lunatic asylum at Tarban Creek, which was the original name for Gladesville Hospital in Sydney (that subsequently underwent several name changes). However, efforts to improve the built environment provided for patients failed to be matched by commensurate advances in compensation for nurses and attendants (a nineteenth century term mostly but not always used to refer to male nurses) (Dunk 2018). In consequence, when large numbers of free immigrants moved to NSW and the economy grew during the 1840s, the wages and conditions of many workers improved but remuneration for lunatic asylum nursing remained poor. Even paupers and ex-convicts who started work in lunatic asylums often left after short periods due to poor wages and accommodation which required them to sleep in overcrowded and unsanitary wards alongside patients. Such conditions meant that nurses who stayed tended to become locked into roles that required them to deliver custodial care while spending all their time inside the lunatic asylum with limited access to wider society (Davis 2010; Monk 2009; Sands 2009). In lunatic asylums, all aspects of both patients' and nursing staff's daily activities played out in the immediate company of large numbers of others according to rules enforced by superintendents and medical physicians. Because their work was so dictated by routine and they received such low wages, nurses often became isolated from wider society for extensive periods of their lives leading them to become dependent on the asylums they worked in much like their patients. In such circumstances, many adopted a begrudging acceptance of their work as being of low value and beyond their power to change (Monk 2009; Davis 2010).

In contrast, medical physicians who worked in colonial lunatic asylums were well paid members of the male colonial elite who became increasingly frustrated by the poor quality of nursing provided to their patients. In general hospitals, new surgical techniques made possible through the discovery of novel anaesthetics and the antiseptic approach to healing wounds known as 'listerism', transformed doctors' visions of what was possible (Barrand and Podolsky 2017). In mental healthcare, many were familiar with English asylums where the approach known as 'moral treatment', was growing in popularity. Led by services such as the York Retreat, it promoted a humane approach to care that tried to use work and moral discipline to rehabilitate people believed to be insane (Charland 2007). As a result, doctors began lobbying to transform hospitals and lunatic asylums from being accommodation for the sick into advanced treatment facilities. However, they lacked well-trained nurses to make their dreams a reality. Amid such challenges, Parkes spied humanistic and political opportunity.

3 | Design

Sir Henry Parkes' role in arranging the first group of six Nightingale nurses led by Lucy Osburn to come to NSW in 1868 and in securing Norton Manning's services to lead lunatic asylum reform has long been acknowledged and has been covered by a range of authors including Parkes himself in his autobiography (1892), his first biography by Lynne (1897) and in biographies' of Lucy Oburn by writers such as MacDonnell (1970) and Godden (2006). In contrast, Parkes contribution to reforming mental healthcare by facilitating influence by Nightingale nurses has been relatively unexplored. This position paper explores Parkes' role in reforming colonial Australian mental healthcare with particular reference to his use of relationships to facilitate the integration of Nightingale-trained nurses into the fabric of hospitals for the insane in the late nineteenth century.

4 | Method

Data for this position paper were gathered through a review of historical literature. The search focused on publications referencing Henry Parkes, mental healthcare and nursing using CINAHL, PsycInfo, PubMed and Google Scholar. Major source material was also gathered from primary documents in the archives of the State Library of NSW.

5 | Findings

5.1 | Parkes Long-Term Commitment to Promoting Healthcare

Although he is most often associated with organising the arrival of the first Nightingale nurses in NSW in 1868, Parkes involvement in healthcare politics actually began a decade earlier (Ship News 1839). As mentioned previously, when he was first elected to the NSW legislative council in 1854, the colony's need for improved healthcare was urgent, and the only group pioneering advances in nursing was a small Catholic order of nuns known as the Sisters of Charity, who had arrived in 1838 (Nelson 2001). They had developed a reputation for quality care by providing nursing at the Parramatta female factory and other community services. However, by 1855 the nuns were in desperate need of a new convent to train recruits and at the same time Sydney's only hospital, the Sydney Infirmary remained overcrowded and dependent on untrained ex-convict staff. In consequence, Sydney Catholics began fundraising to purchase a building to serve as both a convent and a second hospital for Sydney (Parkes 1855).

Although a future biographer would later label him as anti-Catholic (Martin 1960) throughout his career, Parkes was deeply humanitarian and showed this through his long-term commitment to promotion of quality healthcare. In mid-nineteenth century Sydney, there were few political issues of greater importance than the need for a second hospital. Sensing opportunity to improve healthcare for his constituents and at the same time gain popularity among Catholic voters, on 27 November 1855 Parkes attended an evening fundraising function where he delivered a speech arguing that both Catholics and Protestants supported the nursing provided by the Sisters of Charity. In support, he quoted the famous Protestant nurse pioneer, Florence Nightingale, who had previously reported drawing inspiration from the work of Catholic nurses in France (Parkes 1855). Receiving loud cheers of support from the crowd, he outlined a vision for how Sisters of Charity nurses had potential to improve healthcare throughout NSW, stating that he had received interest from towns as far afield as Goulburn, Bathurst and Moreton Bay, keen to have Sisters of Charity nurses in their towns. He contended, however, that such dreams would be impossible without an adequate convent and hospital for the Sisters to use as a base for their operations in Sydney. Appealing to the compassion of his audience, he concluded:

> Let us both promote and propagate it [new hospital for Sisters of Charity] and the merit of those who now appreciate and encourage it will find reward when that day shall arrive on which the best amongst us will have occasion to look back on the little good he has done, or has had an opportunity of rendering on this side the grave. The consciousness of having shared in assisting those whose mission it is to sooth the deathbed – to wipe away the tear of affliction that "wrings the brow" of the widowed mother – and to discipline and train the heart and mind of her infant orphan, will be a joyous and cheering reminiscence.

(Parkes 1855)

Following his speech, a mixture of Catholic and Protestant colonists donated £5500, enabling the Sisters to purchase a mansion built by Sir Charles Nicholson named *Tarmons* (meaning sanctuary) leaving just £2800 needing to be paid off. Moving into the two-story building in March 1856, they converted the upstairs level to a convent and renovated the lower level into a free hospital they named St Vincents, which received its first admission on 25 August 1857 (Shand 1989). Contributing to founding St Vincents Hospital strengthened Parkes confidence in his ability to pursue a vision by forging relationships with and between disparate groups to meet public need.

In another display of his early commitment to advancing the quality of healthcare in NSW, on Wednesday, 23 July 1856, Parkes joined a different group of influential civic figures who decided to make a public donation towards a new nurse training institute being established by Florence Nightingale back in England (Maitland Mercury 1856). Following her return from the Crimean War as a national heroine, efforts to raise funds for an institute to train Nightingale nurses were underway throughout the British Empire. Accompanying the NSW donation, Parkes wrote a letter of support to Nightingale (Parkes 1866) which laid seed for their future friendship, outlined below.

5.2 | Female Influences on Parkes Thinking About Nursing

Despite beginning to develop his reputation in politics, by 1861 Parkes was battling severe personal financial difficulties when Premier Charles Cowper offered him a plum appointment to visit England as a government lecturer promoting emigration to NSW on a salary of £1000 per annum. Happily accepting the opportunity, Parkes spent the next 2 years touring England where he relished opportunities to interact with some of the most influential members of British society (Parkes 1869). While overseas, his thinking about women's suffrage, education and employment was challenged through meetings with pioneer businesswomen and feminists including, Emily Faithfull, Maria Rye and Bessie Raynor Parkes who in 1858 had become a founder and the chief editor for Britain's earliest feminist periodical titled the, *English Woman's Journal* (Diamond 1992; Parkes 1869). While in England, Parkes was also contacted by Lady Dowling (nee Blaxland) the widow of Sir James Dowling who had previously served as a member of the NSW Supreme Court 1828–1844.

Following the passing of her husband, Lady Dowling had retired to London, but she retained a keen interest in the development of colonial NSW. She felt that one way NSW could be improved would be if trained nurses from England would immigrate there and contribute to developing healthcare in the colony. Hearing that Parkes was in England, at the end of 1861, she wrote to him requesting a meeting to discuss how trained nurses might be encouraged to immigrate to Australia. She explained:

> As an old resident of Sydney, I have thought and felt most deeply on this subject, and I know no greater blessing than such an arrangement would confer upon our fellow-creatures in a far distant land, where so many of us have dear relatives... since the ever increasing flow of population, now more than ever attracted to those shores, will provide occupation for a fresh supply of nurses.
>
> (Dowling 1861)

How much credence Parkes gave to Lady Dowling's idea in 1861 is unclear, but three decades later when he published his political memoir (Parkes 1892), he neglected to mention her, nor did he record his involvement with the Sisters of Charity. Despite such a lack of attribution in 1880, Lady Dowling wrote him another letter in which she argued the NSW government should continue providing her with a pension because among other things, it had been her idea that instigated the beginning of Nightingale nursing in NSW (Dowling 1880). Although contentious, Lady Dowling's assertion reinforces that Parkes views about the importance of nursing to improving the quality of health care in New South Wales were considerably influenced by women.

5.3 | Parkes Relationship With Florence Nightingale

When Parkes returned to NSW in 1863, he found a health system continuing to lag well behind the standards he had observed in England. Over the next few years, political efforts to improve the quality of nursing in Australia's colonies gained support through a variety of inquests and committees. In 1866, a Queensland Legislative Assembly select committee report assessing hospital and lunatic asylum care stated:

> Your committee are of opinion that an efficient and experienced Matron, with competent nurses, should be provided, and that these should be procured, if possible, from some such institution as the "Nightingale Institution," London.
>
> (Queensland Legislative Assembly 1866)

Later in the year a similar position was echoed by a committee of honorary surgeons at Sydney Infirmary who requested steps be taken,

> To establish an efficient system of educated supervising nurses with trained assistants.
>
> (NSW Legislative Assembly 1866)

Such views resonated with Parkes who had just been appointed as Colonial Secretary for the first time and knew from personal visits to Sydney Infirmary that nursing needed to be improved (Parkes 1892). Assured by his experience fundraising for St Vincent's Hospital 10 years earlier that few fields resonated with the hearts of voters like healthcare, on 21 July 1866 Parkes wrote to Florence Nightingale requesting help. His letter stated:

> The Government of this colony is desirous of engaging the services of four ladies who have received efficient training as nurses in some well managed English hospital. These trained nurses are required for the Sydney Infirmary where proper apartments will be provided for them by the time of their arrival in the colony, but it is desired that in performance of their duties in this Institution they shall become the hospital instructors of such other female attendants as may from time to time be placed under their superintendence. In other words, it is hoped that a nursery for hospital attendants will be thus established from which similar charitable institutions across the country districts may be supplied....
>
> (Parkes 1866)

By 24 October 1866, Nightingale responded to Parkes by offering to send not four, but six of her nurses to Sydney Infirmary, explaining she was both keen to advance nursing and to repay NSW for the donation he had sent on behalf of the colony in 1856. For the next two decades, she maintained continual correspondence with Parkes developing a friendship that led to a long meeting between them during Parkes second visit to England in 1882 (Parkes 1892). Building on his friendship with Nightingale, he also developed a close bond with her chief nurse in NSW, Lucy Osburn.

5.4 | Parkes' Support for Lucy Osburn

Colonial NSW's first team of Nightingale nurses, Lucy Osburn, Mary Barker, Eliza Blundell, Bessie Chant, Annie Miller and Haldene Turriff, arrived in Sydney aboard the *Dunbar Castle* on 5 March 1868. Dramatically, just 1 week after embarking, they were suddenly thrust into the colonial spotlight when Australia's first royal visitor, Prince Alfred the Duke of Edinburgh, was shot in an assassination attempt. Rushed to Government House where the royal surgeon extracted the bullet, the Prince was nursed back to health by two of the newly arrived Nightingale nurses, Annie Miller and Harradine Turriff (Osburn 1868). Afterwards when the Prince praised them for the care he received, NSW newspapers applauded the Nightingale nurses (Maitland Mercury 1868; SMH 1868).

Despite their triumphant introduction, however, over the next few years Lucy Osburn and her team of nurses faced considerable practical hardship and political opposition from doctors who objected to the way the Nightingale model placed responsibility for nurses' management in the hands of their Matron (Osburn) and not under the authority of a doctor. Osburn's correspondence reveals that the

eventual establishment of Nightingale nursing in Australia owed much to support provided by Parkes (Godden 2006).

Their friendship is displayed in several of her letters to Nightingale. For instance, on 14 July 1868, she wrote:

> My first troubles were with the House surgeon and Resident Physician. While I was away in Camden to recruit, these two gentlemen got up a series of charges against the staff and wrote a letter of accusation to the Committee…I. sent for my friend Mr Parkes; he was most kind and gave me advice as to my answer… the result was we squashed our adversaries and were completely exonerated.
>
> (Osburn 1868)

Then later the same year, when Parkes political fortunes changed on 9 October 1868, she expressed her dismay writing:

> Shall I tell you the sad calamity – Mr Parkes has resigned from office…we have lost our only political friend and Mr Martin is bent on squashing the improvements at the Hospital.
>
> (Osburn 1868)

Over the next few years, Osburn faced numerous continual oppositions from doctors attempting to gain authority over her nurses. However, thanks to her fortitude and the powerful influence of Parkes, progress slowly took place. On 12 May 1873, she again credited his support, writing:

> I think I may report that our Hospital is on the whole flourishing. Nothing new in the way of buildings enlarging or even repairing, but thank God a thorough cleaning lately entirely under my own directions which I managed to bring about by means of a little scheming with Mr Parkes, who I am thankful to say is Premier again – a good man is that, and a true friend.
>
> (Osburn 1873)

Parkes ensured that Lucy Osburn and her nurses were paid, championed her position as Matron, and was supportive of women managing their own affairs. This was progressive for his time and enabled Nightingale nursing to grow to such an extent that it soon began influencing mental healthcare in NSW.

5.5 | How Parkes' Vision for Nightingale Nursing Influenced Colonial Mental Healthcare

At the same time that he petitioned Florence Nightingale to send nurses to the colony in 1866, Parkes had been reading about the improved standards of mental healthcare being offered at leading British lunatic asylums like the York Retreat (Parkes 1892). After being appointed to his first ministry as Colonial Secretary, he visited NSW's only lunatic asylum at Tarban Creek but was disappointed to find that it reminded him more of a prison than a healthcare facility. Soon after, he was contacted by a young naval

surgeon named Frederic Norton Manning (McDonald 1974), who asked for permission to inspect Tarban Creek and engaged in several conversations with Parkes expressing a genuine interest in improving the care of people who were believed to be insane (Parkes 1892). In consequence, on 3 June 1867, Parkes tabled a proposal for the NSW legislative council to improve NSW's lunatic asylums, recommending that Norton Manning should be appointed a commissioner to inspect the condition and management of major lunatic asylums in Great Britain, Ireland, Europe and the United States. Subsequently, the doctor engaged in a year of extensive travel during which he wrote a two hundred and eighty-seven-page report which he submitted to the government at the end of 1868 (Manning 1868). It received wide acclaim and became a template for efforts to improve mental healthcare until the end of the twentieth century.

Among its recommendations, the report suggested the language used in colonial mental healthcare should change. Norton Manning argued that the words 'lunacy' and 'lunatic asylum' should be replaced with words such as 'insanity' and 'hospitals for the insane' which during the nineteenth century reflected a more curative approach. He also adapted several ideas he had read in Florence Nightingale's book, 'Notes on Hospitals' (Manning 1868). With reference to the design of new hospitals for the insane, he stated:

> The principles of hospital construction which have been laid down by Miss Nightingale and which are subscribed to by the most eminent authorities on this subject, apply, though with diminished force, to hospitals for mental diseases.
>
> (Manning 1868)

Norton Manning also promoted Nightingale's view that future improvements in care would largely depend on the quality of nursing, arguing that all nurses and attendants should therefore receive specialised training in care of people who were insane. Following submission of his report, Norton Manning was appointed as Superintendent of the hospital for the insane at Tarban Creek in 1868 (Smith 2005). Familiar with the positive effect Nightingale nurses had in general hospitals, in 1874 he employed Sister Mary Bland at Gladesville Hospital of the Insane making her the first of five early Nightingale nurses to contribute to advancing care of the insane (Schultz 1991).

Sister Bland had entered training as Lucy Osburn's first Sister Probationer (trainee Sister) at Sydney Infirmary in May 1869 (Godden 2003). Following graduation, she had filled several in-charge positions at Sydney Infirmary prior to being engaged by Dr. Norton Manning as Matron at Gladesville Hospital for the Insane in 1874 where she remained for the next seven and a half years. When she left Gladesville in 1871, Dr. Norton Manning recruited one of the original Nightingale nurses, Sister Bessie Simpson (nee Chant) to replace her as Matron. Sister Simpson had left the Sydney Infirmary in 1869 to marry and since then had children and lost her husband who died in his middle age (Simpson 1908). Picking up where Sister Bland left off, Sister Simpson served as Matron of Gladesville Hospital for the Insane for the next 26 years, receiving wide acclaim for her leadership, kindness and care.

The next Nightingale nurse to enter care of the insane was another of the pioneer Nightingale nurses, Sister Annie Miller, who as mentioned previously had been made famous for the care she provided Prince Alfred during his recovery from an assassination attempt in 1868 (Osburn 1868). After leaving Sydney Infirmary in December 1870 and travelling to Queensland, she worked as Matron of Brisbane Hospital and in private practice until being appointed as Matron at Woogaroo Asylum on 1 October 1877. During her time there, the numbers of activities available to patients were increased, the diet provided by the kitchen improved, and basic training was also introduced related to resuscitation, treatment for snakebites, and other emergencies. When resigning in 1888, she was praised for substantially improving the female division of the asylum (Richards 2017). Sister Miller spent the final phase of her life nursing at the Benevolent Asylum in Melbourne, and when she died, a journal article commemorated her career, stating:

> The many old friends in Sydney and Queensland will learn with sorrow of the death of Miss Annie Miller, which took place on Tuesday 12 March at the Melbourne Benevolent Asylum, where she had been moved by her express wishes a few weeks previously. Miss Miller was a woman above the ordinary, not only in having possessed a splendid constitution, but a strong confidence inspiring personality which stood her in good stead as one of Australia's nursing pioneers.
>
> (UNA 1907)

The fourth Nightingale nurse to influence care of the insane was Sister Selina Alexander who became Matron of New Norfolk Lunatic Asylum in Tasmania on 25 December 1883 (Vreugdenhil 2012). There she managed thirty-five male staff and twenty-three females who cared for one hundred and thirty male and one hundred and forty female patients, remaining in the position until 1890, when she resigned to be married. A fifth Nightingale nurse who contributed to improving care of the insane was Sister Mary Fairburn (Godden 2003). After completing her training at Sydney Infirmary, she initially worked at Maitland and then the Coast Hospital in Randwick before Dr. Norton Manning employed her as the first Matron of his new Hospital for the Insane at Callan Park in Sydney (later known as Rozelle Hospital). During her first year at the hospital, they trialled staffing the male ward with female nurses for the first time, and Dr. Norton Manning recorded the experiment as a success, writing:

> The result has been most encouraging, the sick have been better nursed and looked after, the patients on the ward have behaved better, and it is decidedly a matter for consideration whether female nurses may not be more widely employed in the male wards if suitable persons can be found to undertake duties.
>
> (Manning 1885)

Sister Fairburn managed Callan Park until 1900, and her leadership was appreciated by management and patients.

The next year's annual report recorded less bedsores and improved cleanliness and tidiness because of the change (Manning 1886).

6 | Discussion

Colonial Australia's evolution from convict nursing to Nightingale nursing in the second half of the nineteenth century could not have occurred without the vision and strategy operationalised by Sir Henry Parkes. In an age more than a century before digital social media profiles or information harvesting, he displayed a gift for cultivating relationships with large numbers of people and supporting those with talent and drive to contribute to his grand vision of improved care in colonial Australia's hospitals and asylums (Dando-Collins 2015; Parkes 1892).

Beginning with his eclectic support for the Sisters of Charity's efforts to found St Vincent's Hospital in the mid-1850s (Parkes 1855), he understood the importance of developing relationships both locally in Sydney, while also taking an interest in international developments in London which in his era formed the administrative centre of the British Empire. Although impossible to foresee at the time, his support for the Nightingale Fund in 1856 (Parkes 1866) laid a foundation for what later became a close and influential friendship with Florence Nightingale. A further example of Parkes engagement with developments in Britain occurred when he took an interest in ideas of influential English women which appear to have contributed to his invitation of the original group of Nightingale nurses to Sydney (Diamond 1992; Parkes 1869).

Friendships he then formed with leading Nightingale nurse Lucy Osburn and lunacy reformer Dr. Frederic Norton Manning were typical of Parkes ability to forge relationships with people from different groups who shared his interest in reforming healthcare. His support for Norton Manning's international tour of Lunatic asylums in 1868 exposed the doctor to Nightingale and other thought leaders (Manning 1868). This subsequently led Norton Manning to engage Nightingale nurses such as Sister's Bland, Simpson and Fairburn at the heart of his reform agenda at Gladesville and Callan Park Hospitals for insane. Ensuing employment of Nightingale nurses as matrons of other Hospitals for the Insane in Queensland and Tasmania shows how in accordance with the vision Parkes outlined in his 1866 letter to Nightingale (Parkes 1866), her nurses gradually began to influence nursing in hospitals and asylums throughout colonial Australia. While they were not always on the best of terms with their medical colleagues, the presence of Nightingale Nurses and their acolytes in the colonial asylum system bolstered the desire of medical practitioners like Norton Manning to move care of the insane and its associated discourse closer to a medical model, away from the ethos of asylums and towards that of hospitals.

Although no records remain of conversations between Dr. Norton Manning and his Nightingale-trained Matrons, good ideas do not occur in a vacuum, and it is likely that it was following consultation with them that in 1885 he encouraged the medical superintendent at Parramatta, Dr. WC Williamson, to produce an instruction manual for nurses and attendants in

care of the insane (Williamson 1885). Written in the form of ten lectures and printed by the government publishing house, the book represented the beginning of mental health nurse training in Australia and was thereafter supplied to all nurses and attendants commencing employment.

Although the advent of such training was attributed to Doctors Norton Manning and Williamson, this was typical of an era when the contributions of nurses and attendants in developing ideas were seldom recognised and they were not given opportunity to explain, much less publish their part in such developments. However, false mythology is not only the province of doctors. Modern nursing histories often narrowly emphasise the leadership and accomplishments of nurses like Florence Nightingale (Hegge 2011) and Lucy Osburn (Godden 2003) without acknowledging the full picture of what created past change. When nurses take such a narrow view of history, they diminish the appreciation of the wider and more complex reality that change in nursing often requires political influence.

In the late 1880s, change resulting from Parkes' vision for Nightingale nursing in lunatic asylums continued to develop when a 2-year mental nurse training programme was introduced in which students spent their first year focused on general nursing and then a second year focused on nursing the insane (Smith 2005). Following examination, a satisfactory pass earned nurses a certificate of competency in caring for the insane. Although the numbers of patients in NSW's mental hospitals continued growing by the time Parkes published his memoir in 1892, the 2-year certificate course in mental nursing was considered a great success producing consensus among nurses, doctors and politicians that a more intelligent and skilled mental nurse workforce was emerging (Parkes 1892).

7 | Conclusion

By the turn of the twentieth century, Henry Parkes vision to reform colonial Australian mental healthcare was becoming a reality. Through cultivating close relationships with Florence Nightingale and Lucy Osburn, he had enabled Nightingale-trained nurses to begin leading change in colonial NSW's hospitals. Then, by building a relationship with Dr. Frederic Norton Manning, he facilitated a bridge over which Nightingale nurses began shifting from positions in general hospitals to leading teams within lunatic asylums, thereby replacing the pauper and ex-convict nurses such institutions had previously relied on. Nightingale-trained nurses increased attention to cleanliness, classification, nutrition and organised more activities for patients such as animal care, music and dances. Such changes significantly improved the quality of care provided in institutions like Gladesville and Callan Park hospitals for the insane which became more closely aligned to the moral therapy approach promoted by leading English asylums than ever before. Improved care was complimented by enhanced architectural design of buildings providing better ventilation, light and sewerage systems than had been provided in earlier lunatic asylums (Smith 2005). However, such advancement was not only due to the work of nurses, doctors and architects. Relationships built by the talented politician Henry Parkes also played a major role in facilitating improvement in colonial Australian mental healthcare.

8 | Relevance for Clinical Practice

This paper fills a gap in the historical record that enriches understanding of nursing in colonial Australia and contributes to a more complete and accurate understanding of that history. Perhaps most importantly, it draws attention to the vital role that relationships and strategic networking played in Sir Henry Parkes ability to bring the humanitarian impulse inherent in his work as a politician to fulfilment. Historical awareness of the role that politics has played in bringing about change in past approaches to mental healthcare provides a valuable reference for making sense of predicaments faced in contemporary mental health nursing. Sir Henry Parkes use of strategic relationships to facilitate his vision for Nightingale nursing reminds mental health nurses of our need to think broadly about the wide variety of people and interest groups who contribute to healthcare and to consider our need for strategic relationships when seeking change.

Data Availability Statement

Data sharing not applicable to this article as no datasets were generated or analysed during the current study.

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