

**Eureka! Women and Birthing on the
Ballarat Goldfields in the 1850s.**

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ABSTRACT

The Ballarat goldfields were a raucous, noisy, exhilarating place that was a tent home for thousands of men, women and children in the 1850s. The Ballarat goldrush and the Eureka Rebellion are among the most significant events in the history of Australia. They set the scene for this study titled Eureka! Women and birthing on the Ballarat goldfields in the 1850s. This qualitative study utilised an historical research method informed by a feminist perspective.

This account reveals the story of women's lives and their birthing at this time as found in historical documents. These documents revealed that the women birthed in their tents with a female friend, relative or lay midwife present. Trained midwives were rare and doctors were too expensive for the majority of poor diggers with no guarantee they were genuine. While most women birthed safely the appalling conditions, infection and birth complications all contributed to high rates of maternal and neonatal mortality and morbidity.

This study has implications for both women and midwives. Hearing voices through this story of their lives and birthing will expand the understanding of issues specific to women. The sharing of the story of birthing in the 1850s will raise awareness of the connections between midwifery history and the twenty-first century giving midwives an appreciation of the past along with different perspectives and greater understanding of women and birthing so their midwifery practice in the future will be enhanced.

DECLARATION BY CANDIDATE

This thesis contains no material published elsewhere or extracted in whole or in part from a thesis by which I have qualified for or been awarded another degree or diploma.

No other person's work has been used without due acknowledgment in the main text of the thesis.

This thesis has not been submitted for the award of any degree or diploma in any other tertiary institution.

All research procedures reported in the thesis received the approval of the relevant Ethics/Safety Committees.

Desley Beechey

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INTRODUCTION

The nineteenth century goldrushes in Victoria mark a romantic period in history when diggers came to the diggings in search of riches. The story of the discovery of gold is well known as is the tale of men who panned and toiled to make their fortune on the goldfields. Women were present from the beginning, however, little research has been undertaken on women, their lives and birthing. As birth is one of the most significant events in human life it is the main focus of this study, along with the role of the midwife in those early days.

The discovery of gold in Ballarat in 1851 was one of the most important events in the history of the State of Victoria and played a significant role in the history of Australia (Croggon, 2001, p. 4). Ballarat was equally famous for the Eureka rebellion in 1854 which was seen as the beginning of democracy in Australia. The discovery of gold is one of the most formative factors in the shaping of Ballarat society in the 1850s, determining the kind of people who travelled to the region from all parts of the globe, where these people lived, how they lived, as well as setting the tone for future development in Ballarat. Their vision and belief in the importance of social, educational, cultural, religious and health facilities mark Ballarat as one of Australia's major regional centres (Croggon. 2001, p. 4). This golden era and the men who lived in it are well documented from a masculine viewpoint, however, as this analysis of historical documents will show women and children were paid little attention in recorded history. While most women will remain nameless due to the passage of time, their experiences found in historical writings will be given a voice. There are many aspects of the lives of these women which are worthy of attention, but this study

will confine itself to those issues which have a specific impact on women's birthing on the Ballarat goldfields in the decade 1850 to 1860. The decision to research this decade was encouraged by many visits to the historic Ballarat Mechanics Institute library, which houses an array of documents, books and archival references of the period and makes one's heart beat with excitement at the contents revealed.

According to Lusk (1997, p. 356) there are specific criteria for the selection of a subject for historical research which includes the researcher's knowledge and interest of the subject. This study was approached with a significant personal interest as a woman, a mother, a midwife, and an historian with a fascination for women's birthing and the involvement of midwives. Having lived most of my life in the Ballarat district, history has always been 'outside my back door'. The farming property where I have resided and worked most of my life is part of the original Ercildourne station, which was settled by Thomas and Sommerville Learmonth in 1837. Ballarat, with its architecture and its mullock heaps are a constant reminder of the goldfields era and relatives' 'true stories' also provided a further stimulus for this study.

The goal of this study was to give voice to the women of the Ballarat goldfields in the 1850s so gaining an understanding of the environment, circumstances, birth attendants and other factors that impacted on their lives and birthing. There was also a desire to study the past to gain a better understanding of the present and communicate this understanding to an interested audience. History is described by Lynaugh (1996) as our "cultural DNA" (p. 1) and our source of identity. Leininger (1985, p.109) says that the past adds meaning to the present and develops a sense of ourselves as individuals and as group members. This

historical study was not to be just a comprehensive story of women, their lives and birthing but as suggested by Wright (1997, p.76), a means of finding solutions to very real problems of today. By empowering both women and midwives with knowledge and understanding, women's control over their lives and birthing can be promoted and the future of midwifery practice enhanced. The search for the voices of the women of the Ballarat goldfields in the 1850s began with historical documents archived at the Ballarat Mechanics Institute library.

Several visits to the Ballarat Mechanics Institute revealed the enormity of the background reading generated by this question and also raised awareness of further data that should be tracked down. This background reading also began to expose the richness and depth of the chosen subject. Refining the research question involved exploring the archives, immersing myself in Ballarat's history and simply by seeing the city with 'new' eyes.

RESEARCH QUESTION AND RATIONALE

Lusk (1997, p. 355) proposes that a research topic needs to be significant, with the potential to put a new perspective on current issues, so making a contribution to scholarly knowledge and understanding. He (1997, p.355) further states that the topic needs to guide, direct and confine the historical analysis while being intriguing and able to sustain the interest of the researcher. It is also necessary at the beginning of a study to determine that the study is feasible in the availability of data and resources.

As already noted, living in an historical setting such as Ballarat itself generates an interest in history. Croggon (2001, p. 4) boasts of Ballarat having beautiful, stately buildings and institutions which have a proud history based on the days of gold. The Royal South Street, a famous national eisteddfod, drawn from the Welsh heritage of the 1850s, is testament to the cultural and civic pride. The laying of the foundation stone of the Base Hospital in 1855 (Hyslop, 1989, p. 17) indicates the community concern and commitment. Early establishment of educational facilities such as the School of Mines and the University of Ballarat are examples of the vision and a desire for self-improvement. The glorious statuary, beautiful gardens and Mechanics Institute demonstrate the enthusiasm and culture of the fledgling community. Walking around the city today, visiting these grand buildings, the previously gold lined creeks, the streets and the old cemetery further kindled a desire to know more about the early inhabitants of Ballarat.

Initial investigation revealed historical writings of the 1850s were available, with a strong focus on men's lives (Fensham, 1994, p. 2). This experience ignited a desire to find out about women, to learn of, and record, their experiences on the Ballarat goldfields and their impact on the developing community. A personal interest in midwifery directed the study more specifically to women's lives, the circumstances which affected birthing experiences, birth attendants and birthing outcomes. The Eureka Rebellion in 1854 localised the time frame for this study to the 1850s as this era is one of the most famous periods of the Ballarat goldfields. This increased the quantity of historical writings relevant to one period and hence improved the likelihood of finding women's stories.

As previously noted, the focus of this study was women's lives and birthing on the Ballarat goldfields in the 1850s. These women became a lure that began to inhabit my mind as their lives were gradually revealed in whispers embedded in historical writings. The scope of this study evolved to include societal conditions of the period such as general aspects of living and factors specific to birthing. Aspects of society considered were the political and economic factors and general living circumstances including the immediate environment, diet, work, contraception and the number of pregnancies women experienced. Factors which directly impacted on birthing included health, pregnancy care and support, the place of birth, pain relief available, care during the birth and after, the birth attendants, management of complications and the silence and taboo of what was deemed women's business. All of these factors directly or indirectly affected the maternal and neonatal outcomes for the women on the Ballarat goldfields in the 1850s.

In seeking to find the true story of women's birthing on the Ballarat goldfields in the 1850s the more immersed I became, the more tangible the women became. The need to mentally reconstruct an era, and from this perspective interpret the story, was assisted by the fiction work *The Fortunes of Richard Mahony*. This book was written by Henry Handel Richardson (Richardson, 1969) the daughter of Dr Richardson, a practicing doctor on the goldfields. While this book is a work of fiction it portrays women's life on the goldfields in a detail that was invaluable to this study and gives practical insight into many factors which directly and indirectly affected women and birthing. The chosen topic has the potential to uncover exciting possibility of 'new truths' (Lusk, 1997, p. 355) as no other research on this specific topic was found. Having clarified the research question the next section will discuss the methodology which was considered appropriate for this study.

METHODOLOGY

The study is a qualitative historical study guided by feminist theory which emphasises maintaining the focus of the investigation on women (Lengermann & Niebrugge, 1996, p. 436). Streubert and Carpenter (1995, p. 198) note that no one single theoretical framework exists from which to study history. However it became apparent that a feminist theoretical framework would capture the richness and uniqueness of women's birthing at the Ballarat goldfields in the 1850s.

Tong (1995, pp. 1-9) identifies a variety of feminisms including liberal, Marxist, postmodern, psychoanalytic, socialist, existentialist and radical. She warned that, while these categories could prove limiting and data difficult to fit into one category, they were useful from an analytical function to help find a location on the spectrum of feminist thought. Tong (1995, p. 51) described radical feminists as focusing on women's sexual and reproductive issues such as contraception and abortion, while a view in Crotty (1998, p. 164-165) described reproduction as a mechanism of maintaining women's subordination and oppression. The powerlessness and conflict motherhood brought was another radical feminist view espoused by Rich (1986, pp. 34-35). Marxist feminists concentrate on issues relating to women's work and claimed that, while domestic work remained the province of women, inequality was perpetuated (Crotty, 1998, p. 164). Liberal feminism, grounded in political thought, viewed a just society as one that safeguarded personal autonomy and

allowed self fulfilment as rights of the individual (Crotty, 1998, p. 163). According to Lengermann and Niebrugge (1996, p. 450) liberal feminism sought to reason with the system which produced gender inequality, pointing to prejudices and discriminatory practices against women as the key forces.

Lengermann & Niebrugge (1996, p. 436) determine that the evolution of feminist theory over recent decades has found a wide range of guiding principles about the human experience and social life from a woman-centered perspective as indicated above. These many principles offer a myriad of differing, diverse, sometimes conflicting versions of feminist thought (Crotty, 1998; p. 53; Grbich, 1999, p. 53). Despite these differences there are consistent and enduring feminist principles regardless of one's own orientation within feminism, some of which underpin this study (Grbich, 1999, p. 53). Hall and Stevens (1991, p. 17) cite several authors who point out three basic principles applicable to feminist research, a valuing of women and a validation of women's experiences, ideas, and needs, a recognition of the existence of ideological, structural, and interpersonal conditions that oppress women, and a desire to bring about social change of oppressive constraint through criticisms and political action, in an effort to improve the lot of women and to produce a better world for women. These three major principles guided this study. Lengermann and Niebrugge (1996, p. 436) add that feminist methodology ensures that the women's situation remains the major object of research and research invests in the vantage point of a particular group of women. In this study the particular group of women were women of the Ballarat goldfields in the 1850s. These principles provided the philosophical stance to ground this historical study, using the knowledge of the past in relation to women's lives as an enlightening force for the present and the future.

A simple question by Lengerman & Niebruggel (1996); “And what about the women” (p. 438) is at the heart of contemporary feminist theory and relevant to the principles above. The consequence of asking this question disclosed that most scholarly writings, which had been assumed to represent the whole human experience and knowledge of, the world were really a record of the powerful section of society, the male experience, ignoring and omitting women’s experiences (Crotty, 1998, p. 181; Lengerman & Niebruggel, 1996, pp. 438 - 439). This is particularly relevant to the Ballarat goldfields where the men were generally literate, held positions which availed them the opportunity to record the events of the day and who economically and politically ruled the community (Bate, 1999, p. 36).

Asher (1994, p. 12) said the Australian Census figures of 1854 found one quarter of the population of the Ballarat goldfields were women increasing to thirty seven percent by 1861. The role women played included that of mothers, wives, housekeepers and business managers demonstrating a hardy, independent pioneering spirit (Asher, 1977, p. 10). The challenge of this historical study was to ‘find’ the women who lived on the Ballarat goldfields, to know and understand the women’s situation, experiences, insights and networks of support related to birthing.

In considering recognition of circumstances that oppressed women, Hall & Stevens (1991, p. 17) suggest that data analysis and interpretation include attention to the inequality, invisibility and differences in the role of the women in relation to men. Lengermann and Niebrugge (1996, p. 449) explain that the organization of society saw men and women unequally situated, women having less power, social status, access to material resources

and opportunities. In 1998 Crotty (p. 181) determined the role of women as being profoundly affected by a patriarchal society and a masculinist culture which Ritzer (1996, p. 458) described as a fundamental structure of dominance and submission sustained by economic, emotional, legal and ideological power and control. According to Swain (1998, p. 319) the family and social structure of the goldfields community in the 1850s were patriarchal and this study considered the impact of patriarchy on women's lives and birthing experiences.

Ritzer (1996, p. 450) discussed at length women's role in any patriarchal society noting that woman's work was largely the demanding, unpaid, and undervalued tasks associated with housework and childcare. Ritzer (1996, p. 450) claimed women were ornamental signs of the male status and power, pleasant partners, a source of emotional support and sexual satisfaction. Lengerman & Niebrugge (1996, p. 449) added the social location of the woman also significantly impacted on her role, along with other aspects including age, marital status, race, ethnicity, religion, and global location. In considering many of these factors, as they related to this study, it is the invisibility of the birthing women of the goldfields in the 1850s that would be reversed and the missing voices heard at last.

A further principle of feminist research, as earlier described by Hall & Stevens (1991, p. 17), was to bring about social change. The women of this historical research study were laid to rest a long time ago, many in the Ballarat Old Cemetery, however it was necessary to understand the information of the past in order to explain the present, and to generate new ideas to shape human thought and understanding for the future (Streubert & Carpenter, 1995, p. 1970). Yaginovich (2000, p. 70) espoused that the molding of social

consciousness by history is very strong, so the insight in this study could encourage action into social change with a vision of equality in all aspects of life for women and men. From this feminist theoretical vantage point, this study discovered an understanding of women's birthing on the Ballarat goldfields in the 1850s. While the women of this study lived in a particular time and social structure of oppression (Swain, 1998, p. 35), feminism developed from women working in solidarity with one another, "...in a movement for deliverance from oppression and the attainment of equality" (Crotty1998, p. 162).

RESEARCH METHOD

Having determined feminism as the theoretical framework the next step in the research process was to clearly identify the research method. Since the purpose of the study was to explore and describe women's birthing on the Ballarat goldfields in the 1850s, a qualitative approach using an historical method was utilized. One of the main focuses of this study, and also of qualitative research, was on understanding and valuing the human experience as it was lived and the subjects perceptions of aspects of the phenomena of life (Polit & Hungler, 1997, p. 15). It also allowed the study of abstract phenomena such as caring, hope, suffering, and coping. Although understanding women's lives and birthing were the focus of this study they were only partially revealed as this study was conducted one hundred and fifty years later.

The use of an historical method was therefore seen as appropriate in this study. Polit & Hungler, (1997, p.15) point out historical material is fundamentally narrative and subjective so an historical method was suited to this exploration of women's lives and birthing on the Ballarat goldfields. Roberts and Taylor (2002, p. 328) said that while there is no one single historical method they, along with Lusk (1997, p. 355) and Rees and Howells (1999, p. 33) recommend a systematic series of steps, as a sound historical research method.

Research Process

The research process commenced with the development and definition of a topic, framed by a series of questions, which delineated the study area within a time frame as discussed earlier. A bibliography of historical sources was compiled which according to Roberts & Taylor (1998, p. 331) was to include relevant texts and other sources of information regarding ideas, events, facts and people's lives in history relevant to the topic. Information was then recorded, organized into common topics, analysed, interpreted and the findings reported in this minor research project report.

Streubert and Carpenter (1995, p. 200) remarked on the need for fluidity between these historical research steps as it was necessary to be able to move from one step to the other in both directions, an aspect found to be extremely applicable during the study. The importance of keeping an open mind and avoiding premature conclusions was stressed by Wright (1997, p.75) as well as the need to make every effort to maintain flexibility and openness to new and different ways of seeing and experiencing. Particular attention was paid to this aspect as women's birthing needed to be viewed and interpreted in its historical context. Affording these women primacy was earlier presented (Hall & Stevens, 1991, p. 17) as one aspect of the feminist approach guiding this study. The above mentioned research process was applied establishing rigor from the beginning of the project.

According to Roberts & Taylor (2002, p. 379) rigor in qualitative research can be determined by various means. Hall & Stevens (1991, p. 19) claim that feminist principles afford a study dependability and adequacy whilst Grbich (1999, p. 61) adds that a tight research method reflects dependability. In this study the establishment of logical sequential

yet flexible steps in the research method ensured the successive steps had been clearly set out, as above, and undertaken with attention to detail (Roberts & Taylor, 2002, p. 377).

As the variety and amount of information increased the researcher utilised 'decision trails' or themes as suggested by Hall and Stevens (1991, p. 19). The compiling of relevant information into themes allowed analysis from multiple sources and comparison of individual versus group accounts, all further means of assuring dependability. Hall and Stevens (1991, p. 19) espoused that adequacy of method implies "...research processes and outcomes are well grounded, cogent, justifiable, relevant, and meaningful" (p. 20). The evaluation, by standards of rigor suggested by Hall and Stevens (1991, p. 20), reflect the adequacy of the whole inquiry process relative to the purpose and philosophical perspective of the study as unique to feminist qualitative research. There is a need to strike a balance between measures of rigor and the creativity of qualitative research (Thompson & Barrett, 1997, p. 58). The selection of the topic 'Eureka! Women and birthing on the Ballarat goldfields in the 1850s' indicated the purpose and philosophical stance of this study within a given time frame while attracting attention to this little researched area.

The set of questions identified included looking at the topic in its historical context with particular regard to the physical, social, political and economic factors, which influenced life and birth on the Ballarat goldfields. This research also aimed to explore women's social networks and professional and non-professional support and care during pregnancy and childbirth.

The determining of the maternal and neonatal outcomes would complete the birthing story. It was anticipated that these lines of enquiry would ensure the topic had been comprehensively researched, while realising that other areas of relevant interest may well be found as the data was located, analysed and interpreted.

In most research studies the next step is to review the literature. In historical research the published literature is largely the raw data used to answer the question (Rees & Howells, 1999, p. 34) so a distinction is made between the literature as data and that as background reading. Extensive background reading helps to provide a contextual guide and to identify the questions and elements the researcher should look for in historical documents and literature (Lusk, 1997, p. 355). Background reading also allows an understanding of the completeness of the data available on women and birthing on the goldfields and began to provide missing information that needed to be further pursued. The recording of women's lives and childbirth on the Ballarat goldfields was largely glimpsed through historical data, usually in the form of written records and historical writings of the period. The histories of other professions also made a significant contribution along with eyewitness accounts.

Polit and Hungler (1997, p. 199) state that general background reading leads to a more focused scrutiny and in depth exploration of specific aspects of the topic then overlapping with more reading to ensure a comprehensive understanding of the written and unwritten content. Comprehensive reading brings depth to the research (Lusk, 1997, p. 355) but Wright (1997, p. 75) makes the point that it is necessary to avoid becoming so knowledgeable about the topic that preconceived ideas become established about potential

study findings. With minimal reference to women and much less to references to birthing in the literature, becoming so knowledgeable was not a problem in this study.

Collecting the Data

Lusk (1997, p. 355) suggests several sources of data collection for historical research. In this study data collection included consulting with specialists in the field, taking note of primary references in the literature, and visiting the public hospital and university libraries and archives to determine the range and relevance of their collection. The Central Highlands Libraries at Ballarat and Creswick possess generous historical sections but a thorough search revealed several references to women but few to women's birthing. The archives at the local hospital, the Ballarat Health Service, which developed from the Miner's Hospital (Hyslop, 1989, p. 29), revealed admission detail but alas, no in-depth data. Hyslop (1989, p. 246) recorded the policy of the Ballarat Base Hospital was to exclude women in pregnancy and childbirth until about 1924 when a free maternity ward was opened.

A search of The Ballarat Mechanics Institute extensive database was undertaken on many occasions and further information was obtained from the same facility's extensive collection of early Ballarat newspapers, early Government publications and reference books. Sovereign Hill, a recreated historical township at Ballarat, has a research department and the staff of this facility were helpful in suggesting valuable resources. Sovereign Hill also has a shop which sells many books and other publications on various aspects of the Ballarat Goldfields. Relevant doctoral dissertations and masters theses at Australian Catholic University Aquinas Campus, La Trobe and Melbourne university libraries also

proved invaluable. This pursuit of historical data proved of great pleasure and the information provided glimpses of women's lives on the Ballarat Goldfields.

Cultural artefacts would have assisted in the study but little of relevance was located. As this historical research relied on resources preserved by posterity or relevant to the particular time in history, primary and secondary sources of documentation were identified and accessed. Primary sources described by Lusk (1997, p. 356), Rees and Howells (1999, p. 34) and Streubert and Carpenter (1995, p. 204) are documents written or constructed by people who actually witnessed or participated in an event and are otherwise called first hand accounts. Primary sources include unpublished diaries, personal notes, letters, meeting minutes and public documents such as law court decisions (Polit & Hungler, 1997, p. 97). Primary sources of information on women's birthing on the Ballarat Goldfields in the mid 1850s were extremely rare hence few were utilised in this study. Rees & Howells (1999, p. 35) purport the importance of authenticating and reviewing as many primary sources of material as possible to achieve greater consistency and accuracy

Secondary sources were accounts that responded to the ideas of the primary author (Lusk, 1997, p. 356) or all other accounts of a second or third generation reported by people who had secondhand knowledge of the event or incident (Roberts & Taylor, 2002, p. 329). Talbot, (as cited in Rees & Howells, 1999, p. 34) and Streubert and Carpenter (1995, p. 205) defined secondary sources of information as newspaper accounts, textbooks, reference books, journal articles and volumes of an encyclopedia. These may be less accurate than the primary sources as the more removed from the original source the less reliable it becomes (Beanland, Schneider, LoBiondo-Wood & Haber, 1999, p. 350). Major secondary sources

of information utilised in this study include work by noted Ballarat historians Bate (1989, 1998 & 1999), Molony (1984, 1998 & 2001) and Withers (1980 & 1999). All these respected sources are recognised as reliable and knowledgeable on the topic.

Analysis of primary and secondary sources

While it was difficult to achieve absolute reliability of the material, every effort was made to establish fact, probability and possibility in the sources. Probability was what could reasonably be expected when looking so far back into history with access to so few primary sources (Barzum & Graf, 1970, p. 155).

Burns and Grove (2001, p. 64) highlight the necessity to take great care in evaluating all documentary data as it is nothing more than what someone said about a subject.

Consequently it is subject to interpretation and personal judgements about why it may, or may not be, partially or wholly true. Rees & Howells (1999, p. 34) suggest different people would experience and document the same event in different ways. Thus the need to carefully evaluate the possibility that primary and secondary sources of information were not necessarily factual existed. As this study is guided by feminist philosophy, information supplied by women would be assumed to be truthful and reliable (Hall & Stevens, 1991, p. 25).

However, it is important to note that, in line with traditional historical method of recording facts, it was highly probable that women on the goldfields recorded very little so in fact there was an absence of accounts of women's experiences.

The more sources consulted the more accurate the research would be (McGann, 1997/1998, p. 20). Cramer (1992) suggests reading historical accounts until “You can hear people talking” (p. 6) or until data saturation, the point at which no new information is discovered. Once the same information was seen from multiple primary and secondary sources, data collection was considered complete (Wright, 1997, p.75). Wright (1997, p.75) says that this emergent, rather than a fixed research method, is symbolic of qualitative research. The intent in this study was to reconstruct a faithful historical account of the topic from a feminist viewpoint, giving due attention to the rigorous research process discussed above.

In this qualitative historical research the research question, the purpose, feminist principles and the themes directed the analysis of the historical data. One purpose of analysis, according to Polit and Hungler (1997, p. 377), is to impose some order to the large amount of narrative material, so data can be interpreted and communicated in a written report. Analysis of all aspects of the narrative including the relationships between ideas, events, people and situations of the Ballarat goldfields in the 1850s was conducted. This process required the reasoning, questioning and examination of each piece of information for clues. Beanland, Schneider, LoBiondo-Wood & Haber (1999, p. 350) describe analysis as determining the importance of data ranging in value from clear value to mildly interesting to unimportant. This process determined which data was retained and which discarded from the volumes perused. This judicious selection, rejection and arrangement of material was required to ensure an accurate and truthful interpretation of the research material (Munhall & Oiler, 1986, p. 180).

In historical research method validity and reliability are traditionally referred to as external and internal criticism (Beanland, Schneider, LoBiondo- Wood & Haber, 1999, p. 350; Lusk, 1997, p. 356; Rees, 1999, p. 24). External criticism questions the authenticity or validity of the data source (Beanland, Schneider, LoBiondo-Wood & Haber, 1999, p. 350) in an attempt to detect forgeries and frauds. Accessing genuine documents, according to Rees and Howells (1999, p. 34) and Lusk (1997, p. 356) includes the existence of an accurate date, the authenticity of the paper, ink, a wax seal and the writing. Lusk (1997, p. 356) added the need to compare documents for related style, content and other similarities.

Internal criticism aims to establish the reliability of the data as a true account of the topic (Beanland, Schneider, LoBiondo-Wood & Haber, 1999, p. 350; Lusk, 1997, p. 358). It was necessary to consider the data within the context, the language, the meaning, the customs and the habits of the people of the Ballarat goldfields. This included the process of finding further supporting accounts and cross-checking data to confirm the accuracy of data already held. Analysis contributes to an understanding of the topic and interpretation of the data (Streubert & Carpenter, 1995,p. 208).

The research data was managed by recording appropriate extracts on index cards which were organized into themes for categorisation. These themes were largely identified from the set of questions that evolved from the topic and from feminist methodology, along with those which Polit & Hungler (1997, p. 386) describe as having evolved as the research progressed. It was important to see how data fitted and refined the themes as was necessary (Polit & Hungler, p. 387).

According to Howells (cited in Rees & Howells, 1999, p. 34) themes are a means of guiding the search for material, preventing the loss of the topic's focus among the many diversions that occur in managing large amounts of data. The index card system was easily accessible, clear, inexpensive and portable. As Wright (1997, p. 77) explained this method also allowed systematic retrieval of data for comparison, evaluation, interpretation and for the data to be open to scrutiny, all vital components of quality historical research. Once the data was analysed it was interpreted, remembering that the flexibility of the steps allowed both to occur simultaneously with the data collection (Grbich, 1999, p. 150; Wright, 1997, p. 75).

Interpretation

Interpretation of historical data is described by Beanland, Schmeider, LoBiondo and Haber (1999, p. 409) as putting the final pieces of the jigsaw together so the total picture can be viewed with a critical eye. Roberts and Taylor (1998, p. 328) point out that facts, ideas, events, social trends and institutions do not speak for themselves, and describing data as just facts makes little contribution to understanding. It was necessary for a human mind to "... mentally reconstruct an era, the events and players" (Lusk, 1997, p. 359) and, from a feminist perspective, interpret the complex interrelationships that characterise human history.

Streubert & Carpenter (1995, p. 207) said this step interpreted findings in data, developed ideas and discovered truth from assembled data that could be supported by the evidence the data produced. It also allowed the explanation of data by "... making the invisible obvious, of linking and attributing consequences to antecedents" (Polit & Hungler, 1997, p. 379),

being particularly applicable to the silence of the women studied. Important in this interpretation are the social, political and economic environments of the Ballarat goldfields of the 1850s. Lusk (1997, p. 359) regards interpretation as probably the most difficult undertaking in historical research. During the interpretative phase and writing up the findings, a deliberate attempt was made, not only to explain what happened to the women on the goldfields, but also how, where and being interpretative, to answer why.

While data was collected and recorded there was frequently a need to move between narratives to clarify areas of uncertainty or to gain additional information. The truth sought after in this historical research was not only the truth about history but rather, by letting the data speak for itself, to find the truth in history (Grbich, 1999, p. 149; Hamilton, 1993, p. 46). Historical research is also much more than an accumulation of facts but includes events, ideas, cultural social and political processes, all filtered through the interpretation process to become part of the final written document. Writing the historical narrative was the final step; telling the story that had evolved from the data. The story intertwined historical facts which were compared, contrasted and interpreted to achieve a meaningful, accurate account of the topic, inspired by feminist theory.

Historical research involves specific copyright and property right restrictions relating to archival material (Lusk, 1997, p.356). Librarians appropriately managed articles that were subject to copyright. With regard to property rights the donor may restrict the use of a document or permission may need to be gained from the copyright owner to quote from unpublished material (Lusk, 1997, p.356). Letters and documents in government and public archives are generally exempt from copyright restrictions making sure useful documents

were available for inclusion in this study. The responsibility of protecting copyright is a serious concern (Lusk, 1997, p. 335), however the doctrine of 'fair use' does allow the use of short acknowledged quotations for specific reasons.

Limitations

The main limitation of this historical study was the scarce data. As the era being considered was the 1850s the reliance was on records that remain from the era and historians and researcher's relevant investigations and writings. Every effort was made to access all available information however some is held in libraries and government archives which were inaccessible because of distance. A further study limitation was researching a topic focusing on women in an era when most of the records were written by men with minimal reference to women. Scattered accounts of women's lives and birthing were drawn together to give voice to the women of the Ballarat goldfield in the 1850s.

ETHICAL ISSUES IN HISTORICAL RESEARCH

Various codes of ethics have been developed in response to human violation. The 1978 National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research issued a report known as the Belmont Report which is considered the basis for code of ethics (Polit & Hungler, 1997, pp. 129-130). Fundamental ethical principles in this report are to do no harm, respect human dignity and the participant's right to fair treatment and the right to privacy (Polit & Hungler, 1997, pp. 130-138). All of these principles are applicable to all research but with a different focus in this historical research as it relates to events of 150 years ago. While the people referred to in this research are deceased their descendants are living, thus according to Lusk (1997, p. 356), principles relating to intellectual honesty, confidentiality and privacy were to be carefully respected.

Ethics approval for this research was obtained from the Australian Catholic University Human Research Ethics Committee under the National Statement on Ethical Conduct in Research Involving Humans (1999). Although the research was historical it involved humans so consent was required (Appendix 1). An application was then made to The Ballarat Health Service, the local public health facility, to access historical records. Approval to their archives was also granted (Appendix 2)

Grbich (1999, pp. 60-61) suggests the importance of exposing the bias of the author which includes assumptions along with religious, political, cultural, social and ethical beliefs and

background. My longstanding connections with the Ballarat region and my role as a female midwife have been previously identified. These aspects of my life and my interest in local women's history have fuelled this research and are highlighted here to name my biases. Ustick (1988, p. xv) suggests that extensive internal knowledge assists in research with improved selectivity, interpretation of information and contribution to a truer record. A contribution by Sigsworth (1995, p. 898) labels feminist research as value ridden and biased however it is probably not possible for any research to be value free, as the values of the researcher invariably influences the research process.

Determining open exposure and awareness of these issues has allowed the impact of such biases to be lessened and credibility maintained. I was further very conscious of the need to set aside any personal biases to view the topic from the narrative and historical perspective. Having discussed the philosophy and method of this study, a feminist philosophical approach and qualitative historical research method, it is time to begin the story of birthing women of the Ballarat Goldfields in the 1850s.

THE HISTORY OF THE DISCOVERY OF THE BALLARAT GOLDFIELDS AND THE EUREKA UPRISING

The first permanent white settlement in Victoria was established at Portland in November, 1834 by the Henty Family (Garran, as cited in Ustick, 1988, p. 31). The infant colony grew quickly, settlers arrived from Tasmania and in the years between 1835 and 1839 more than 965 sea going vessels arrived at Victorian ports (Shipping arrivals and departures, as cited in Syme, 1984, p. 54). The free grazing land around Melbourne and Geelong was quickly occupied and by 1837 there was a need to push further into the country (Griffiths, 1988, pp. 1- 6). Withers (1980, p. 2) and Molony (2001, p. 1) tell of a party who, in 1838, set out with flocks and herds in a north westerly direction from Corio. The men had to find their way on foot and on horseback or in carts through rough unconquered terrain to reach Ballarat.

The party travelled towards a mountain which they named Mt Buninyong. From this point rich country spread in all directions along with an “ocean of forest” (Withers, 1999, p. 220). Withers (1999, p. 9) described the scene as rolling hills, gullies and grassy slopes picturesque with gum trees, wattles and honeysuckles. By 1840 the fine pastoral country of the Ballarat district was occupied by settlers (Bate, 1998. p. 2: Molony: 1984, p. 28: Withers, 1980, p. 3). An early settler, at the foot of Mount Buninyong, was Mr Andrew Scott and his family. According to Withers (1980, p. 4) and Bowden (1977, p. 1) Mrs Andrew Scott was among the first non Koori woman to travel to this district and she became a familiar figure around the neighbourhood, often on horseback. She was recorded

by Withers (1980, p. 4) and Molony (2001, p. 1) to have driven across the dry lake bed of Lake Burrumbeet in 1840. This lake is close to my home and thus Mrs Scott's adventures interest me greatly. I recall my father having a story for each of the three known times the lake has been dry. This year the lake is nearly dry and a low bluestone structure has been revealed in the lake bed which is causing great speculation in the local community.

Bowden (1977, p. 2) described the Ballarat township in 1847 as boasting some huts, a store, a hotel, a doctor and a church. In 1848 a denominational and co-educational school opened with forty boarders and twenty day pupils. According to Bowden (1977, p. 2) the students were children of local workers. This seems likely as Bowden (1977, p. 2) explains local explorers, the Learmonth brothers (who were also leading landowners), possessed a keen commitment to children's welfare. Overall a pastoral quiet reigned in the Ballarat district with a focus on wool growing, cattle breeding and regular church attendance (Molony, 2001, p. 3; Withers, 1980, pp. 7-10).

Gold was discovered in California in 1848-49, an event soon followed by the discovery of gold in Australia (Bate, 1999, p. 3; Molony, 2001, p. 4; Withers, 1980, p. 18). In July 1851 Esmond found gold at Clunes and in August 1851 gold was found at several places around Ballarat (Withers, 1980, pp. 20-21). A blacksmith from Bunninyong, Thomas Hiscock, was credited with the first discovery of gold in Ballarat which led to the great gold rush (Withers, 1980, p. 21). With the discovery of the rich alluvial goldfields thousands of people from all over the world were enticed to the Ballarat goldfields in search of quick riches (Bate, 1999, p. 3; Johnson, 1995, p. 3). This was a golden era of madness, almost insatiable lust and excitement, which transformed the whole of the surrounding

countryside. Gold was the most secure asset and the international standard of exchange (Bate, 1999, p. 4).

The Ballarat goldfields are notable in history for the civil uprising at the Eureka Stockade in 1854 (Bowden, 1977, p. 7; Withers, 1980, p. 72). Diggers had to buy a monthly license for thirty shillings (Bowden, 1977, p. 8) which entitled them to dig in a area which, according to Molony (2001, p. 10) was sixty-four square foot while Bowden (1977, p. 74) put it at twelve square feet. Whatever the area the licence was to be paid with no regard to failure or success. The great resentment of the diggers was what they saw as taxation without representation (Withers, 1980, p. 72) and licence fees and the notorious licence hunts culminated in the battle with the police and soldiers at Eureka on the 3rd December 1854 (Bowden, 1977, p. 7; Molony, 2001, p. 156). While the diggers were massacred at Eureka (Molony, 2001, pp. 160-163) a subsequent Royal Commission determined that the licence be abolished and future gold payments were to be based on export duty (Malony, 2001, p. 194; Moore, 1998, p. 28). This was called the Miner's Right (Sunter, 1998, p. 51). The uprising regained civil liberties (Bate, 1999, p. 46), and saw the Municipal Council of Ballarat in existence by the end of 1855 and the goldfields granted eight members in the Legislative Council (Bate, 1999, p. 45). Diggers also gained male suffrage and vote by ballot (Bate, 1999, p. 46; Molony, 2001, p. xiii) birthing democracy in Australia on the field called Eureka (Molony, 2001, p. xiii).

The vote was a significant outcome for the male portion of the population only (Swain, 1998, p. 31). Women in Victoria received the right to vote in November 1908, fifty three years later (Harris, 1994, p. 9; Oldfield, 1992, pp. 162-163). History defined the Eureka

Rebellion as one of the major landmarks of Australia, not just because of the events of that day but rather its significance for the future (Molony, 1998, p. 7).

The decade from 1850 witnessed enormous change from the peaceful scene of pre 1850 rural Ballarat mentioned earlier. Withers (1980, p. 36) described the change of the landscape from the camping fires of a few prospectors to hundreds of tents crowded on any available land. Van Hamond (1995, p. 1) portrayed the goldfields as noisy, raucous places where the hoteliers and storekeepers enthusiastically 'spruiked' their wares, the enormous batteries crushed quartz all day and night and arguments and fights contributed to the general uproar. Pigs, fowls, dogs and goats ran riot on the streets, open drains carried raw sewage, water was contaminated, there were abundant slaughter yards and overall the smell was overbearing (Van Hamond, 1995, p. 1). During this time however, there was unprecedented economic growth and expansion caused by the goldrush (Van Hamond, 1995, p. 2).

In the first six months of 1851 the population of the Ballarat goldfields was about 800 (Bowden, 1977, p. 5) and increased to 6000 by the end of 1851 (Withers, 1980, p. 45) and to 234,000 in 1861 (Asher, 1977, p. 14). Numerically, the community was largely male dominated (Fensham, 1994, p. 4). Asher (1977, p.12) and Van Hamond (1995, p. 2) quoted the census figures relating to Ballarat in 1854 which recorded women as comprising 24.11 percent on the diggings and 23.02 percent in the township. In fact there were 4023 women living on the goldfield in 1854 (Asher 1985, p. 53). Johnson (1999, p. 6) also stated that, in the 1850s, the ratio of women to men was one to four. Withers (1980, p. 46) and Bate (1999, p. 4) said young and largely wifeless men flocked from many countries eager to seek

gold and a fortune. They joined ex convicts along with free men and government assisted migrants (Grimshaw, Lake, McGrath, & Quartly, 1994, p. 79) in an age when the “convict stain” (Canon, 1971, p. 114) of Australia had begun to fade. Withers (1980, p. 55) refers again to the womanless crowds and the shout of delight that went up when women arrived with hardy men appearing from tents, reminded of wives, mothers and sweethearts at far away homes.

According to Adcock (1912, p. 5 cited in Fensham, 1994, p. 4) of the 8000 people camped on the Ballarat goldfields in 1852, forty five percent had taken out mining licenses and nearly all were men. The balance of the community comprised women, children and others who rushed the diggings to provide services for the diggers. During the 1850s the extensive population lived in canvas or timber dwellings among streets of general stores, theatres, churches, hotels, druggists, bowling alley, brothels and reading rooms. It is interesting to note that the goldfields community easily had the highest level of home ownership in the world (Bate, 1999, p. 5). The main thoroughfare between Ballarat and Buninyong townships was occupied by dwellings for two and a half kilometres by 1857 (Bate, 1999, pp. 96-113). In the background, on all sides, were thousands of diggers (Moore, 1998, p. 23; Withers, 1980, p. 71). Among the most famous ‘artistes’ to perform on the goldfields was Lola Montez, who was one of the women who visited whilst many other women arrived and stayed on the Ballarat goldfields in the 1850s.

This sudden population influx caught the Government unprepared and basic essential services were not met. Resources and time to provide a clean water supply, roads, and basic health amenities were lacking (Bowden, 1977 p. 124). The goldrush was a time when a

fortune could be made overnight, prestige was equally fickle and society was in a state of flux. Settlements sprang up and often, equally as quickly faded, as news of another strike arrived. This instability, along with the male dominated transient population contributed to social conventions (Van Hamond, 1995, p. 2) which held women subordinate to men. Such subordination aligns with the feminist principle of oppression outlined by Hall and Stevens (1991, p. 17) and highlighted in this study.

Historical records do not illustrate concern or appreciation of the impact of the goldrushes on community, women and children (Dixson, 1994, pp. 104-105). Dixson (1994, pp. 104-105) explained that this period was actually blamed for intensifying the already desperate plight of poor women and children. Feminist historians were less certain of its importance as they paid little attention to the entire goldrush period (Swain, 1998, p. 31).

Major records of Australian feminist history by Summers (1975), Dixson (1983) and Grimshaw, Lake, McGrath and Quartly (1994) made little reference to the women of the Ballarat goldfields (Swain, 1998, p. 31). Victorian women's history by Lake and Kelly (1985) offered a biography of fifty women with only one chapter by Asher (1985, pp. 52-60) on Martha Clendinning, having a goldfields connection. Johnson (1999) provides a brief insight into twenty-four women involved in varying ways in the goldfields with almost no reference to women's birthing or analysis of life for women on the goldfields. Women's history has been shrouded with silence leaving unveiled the very basis of society and the integral role of women in this society. The very personal aspect of women's knowledge and the value or non-value of the mothering role contributes to the silence (McGuinness, 1997, p. 7). Robertson (1992, pp. 57-58) and Misson (1985, p. 135) both

found that in the past women were reticent about private and bodily topics. Rich (1986, pp. 34-35) suggests bleeding and discharge in the patriarchal mythology was impure and corrupt and the sharing such information was denied by taboo, moral and social restrictions (Misson, 1985, p. 135). The private lives of women had been ignored because they were private, women's business and hence either off limits to the male recorders of the day or not seen to be important because it was women's business (Kitzinger, 1978, p. 13).

Researching from a position which included male historians of the day making minimal reference to the women on the goldfields, to the surviving records about females and historical data which barely mentioned birthing, the availability of information seemed unlikely. In this study the challenge was to find the silent voices of these birthing women. Accounts were found which offered relevant information, these sources were writings and documentation by both women and men with women's issues generally not the focus of the data. The drawing together of this information on women birthing on the Ballarat goldfields in the 1850s shed light on women who lived in a patriarchal society which has been largely ignored by mainstream history.

THE BALLARAT GOLDFIELDS; A PATRIARCHAL SOCIETY

Ritzer (1996, pp. 457-458) describes a power relationship between men and women in which men controlled, dominated, used and oppressed women, as patriarchy. In 1979 Hagger (p. 117) stated that the women of the Ballarat goldfields were oppressed by the male dominated society in which they lived including their husbands, priests and doctors. Women were not represented in the government, newspapers, political associations or parliament (Grimshaw, Lake, McGrath & Quartly, 1994, p. 94). That men of the Ballarat goldfields believed they were different and better than women was illustrated by Grimshaw, Lake, McGrath & Quartly (1994, p. 102) in a reference to a three night meeting held in Perth in 1853. The men debated “... whether women do or would possess the same amount of intellect as man if they had the same advantages” (Grimshaw, Lake, McGrath & Quartly. 1994, p. 102). The meeting determined that women’s lack of intellect made them incapable of equalling man, let alone ruling in a domestic or any other situation. They also resolved that women were not able to take a position in the government. The lack of intellect of the female population, decided on at this meeting, justified the findings that men should rule over women, both privately and in public.

The goldfields enshrined masculine values, including the tradition of mateship and habits of improvisation, independence and hard drinking (Bate, 1999, p. 35). Women were left out of these habits and values, while terms such as ‘mate’ were not sexist, the right to use them was (Bate, 1999, p. 36). As female immigration to the Ballarat goldfields levelled the

gender imbalance Bate (1999, p. 36) reported an increased desire, by the men, for a different kind of mate, these being a women and the comforts of a home. This shift to family life ensured babies were the chief newcomers and saw less tolerance of specific groups which included prostitutes (Bate, 1978, p. 37). Van Hamond (1995, p. 4) found that the female gender role which emerged in the social structure of the goldfields of the 1850s as in any male dominated society, created the women's sphere in the home with children and men's sphere the outside business and intellectual world. Any resentment women had of the dominance of men in their life or their exclusion from many aspects of the community such as politics, they rarely mentioned (Grimshaw, Lake, McGrath, & Quartly (1994, p. 103).

It seems that women rarely challenged the held view that men were their intellectual superiors. Grimshaw, Lake, McGrath, & Quartly, (1994, p. 103) relate the frustration expressed by talented writer and poet Menie Parkes who feared she would do little with her talent as she was expected to hold all aspects of her life subordinate to preparing herself for marriage. The recognition in feminist methodology of ideological, interpersonal and structural conditions that oppressed women and devalues the women's story (Hall & Stevens, 1991, p. 17) contributes to understanding and appreciating the past and greater understanding and freedom for women today. The next section will explore the 'new society' of the Ballarat goldfields in which women played a significant role.

WOMEN IN THE 'NEW' SOCIETY

As news of the 1851 discovery of gold spread multitudes of hopeful men, and some women, flocked to the Ballarat goldfields (Moore, 1998, p. 21). Most of the women accompanied their husbands, sons or brothers (Asher, 1985, p. 5; Hocking, 2000, p. 106; Swain, 1998, p. 32) whilst others arrived once the goldfields took on some permanency (Withers, 1980, p. 59). Some women were attracted by the spirit of adventure, by alluring prospects, in search of a husband and still others of ill repute (Bate, 1999, p. 29; Hocking, 2000, p. 106). Only five percent of the women on the goldfields in 1854 were single (Asher, 1985, p. 53) and in an effort to address this imbalance of the sexes, single women were encouraged to emigrate under the Government's assisted passage program (Bate, 1999, p. 29). This same scheme encouraged female immigration for family reunions (Bate, 1999, p. 29) and perhaps to keep men on the 'straight and narrow' path in life. Ethnically the Australian population was strongly British with a mixture of Irish, Welsh, Scots, English with an interesting cosmopolitan flavour (Bate, 1999, p. 27); this mix equally applicable to the men and the women on the Ballarat goldfields. Bate (1999, p. 7) claims there were thousands of Chinese men on the goldfields however the Sydney Morning Herald, 8th August 1857 (cited in Johnson, 1999, p. 7) reported there were very few Chinese women as the conditions were too harsh.

Canon (1971, p. 98) recorded that from 1836 Victoria had few female convicts. Some male convicts, along with their families, were shipped to Victoria, having been taught a trade and granted a conditional pardon for the remainder of their sentence. These men were free but

exiled, many were engaged as farmhands in the Ballarat district (Canon, 1971, p. 100) and ultimately were attracted to the goldfields. By 1850 women and men were migrating to Australia of their own free will (Ustick, 1988, p. 31). The women of the goldfields, while from many and varied circumstances were striking, strong and capable (Hagger, 1979, p. 117) and made significant and foundational contributions to the Ballarat Goldfields community (Johnson, 1999, p. 2).

The Inevitability of Marriage and Children

Once on the Ballarat goldfields the ratio of one woman to four men placed great pressure on the single women to marry and the culture of the times determined a women's duty was to marry (Johnson, 1999, p. 7). Most of the population were in their twenties which contributed to a high marriage and birth rates in the 1850s (Bate, 1999, p. 29). In a romantic relationship the men began and set the pace of courtship. Once a commitment was made to marriage, the church and the law supported the man's authority to initiate sexual intercourse (Grimshaw, Lake, McGrath, & Quartly, 1994, p. 93). The women were expected to comply with the Victorian ideal of submissive and modest femininity (Asher, 1985, p. 57). This was a further example of the patriarchal society described by Hagger (1979, p. 117) where women were controlled by men. One in five women were pregnant when they married which did not infer a general carelessness about sexual activity, rather that commitment, marriage and sex did not necessarily follow in that order (Grimshaw, Lake, McGrath, & Quartly, 1994, p. 92). However, while historical studies referred to by Foucault (1980, p. 25) considered sex to be very secretive and confined to the marriage bed, long term defacto relationships were an accepted and common part of the culture of the

working class of the Ballarat goldfields of the 1850s (van Hamond, 1995, p. 12) and indeed the working class Australia wide.

As the community became more settled marriage and long term relationships ensured babies were the chief newcomers (Bate, 1989, p. 37) to the Ballarat goldfields. The children increased from three or four thousand in 1853 to thirty-three thousand by 1861 (Asher, 1985, p. 53). In the 1850s women bore an average of seven live children whilst stillborn babies were not counted or recorded and it was thought that most women lost two or three babies during their reproductive years (Grimshaw, Lake, McGrath, & Quartly, 1994, p. 119). Large families were seen as the backbone of the growing nation and as an example of the man's potency (Grimshaw, Lake, McGrath, & Quartly, 1994, p. 72). A 'good' wife had many children, particularly sons, to carry on the family name and help with the daily work (Hagger, 1979, p. 118). The eldest daughters were expected to move away and the youngest to remain at home to care for the parents in their old age (Grimshaw, Lake, McGrath, & Quartly, 1994, p. 90). Anastasia Hayes, the wife of Timothy, of Eureka fame, carried a baby in her arms and had five other children clutching her skirt (Molony, 2001, p. 14) at the time of the Eureka Rebellion. Mrs Lynn and nine children travelled on the coach from Geelong to Ballarat in 1855 (Withers 1980, p. 44). However, according to Grimshaw, Lake, McGrath, & Quartly (1994, p. 94) the carrying, birthing and rearing of so many children to maturity created much anxiety and took a heavy toll of the energy and health of the mother.

Women's Place (or Value) in the New Society

Molony (2001, p. 22) portrays the Ballarat goldfields of the 1850s as generally peaceful and orderly with women respected, many children loved, Sunday observed, the law obeyed and a busy working life fundamental. The valuing of women proposed by Hall and Stevens (1991, p. 17) as a major tenet of feminism in some ways is revealed in Molony's portrayal of women and children in a respectful society of the goldfields. With a transient population and the lack of women limiting social activities there was a complex web of human relationships (Molony, 2001, p. 14). Jones (1998, p. 65) said that only one sixth of the men on the goldfields had families, a most unusual and unnatural social structure.

The classes of a colonial society were divided on the basis of property, occupation and economic considerations of men. The squatters and Government officials formed an upper class, professional people were the middle class and the labouring population at the other end (Dixon, 1987, pp. 60-61). However Australian society, including that of the Ballarat goldfields, was well known throughout the world for the unique and unusual influence the 'lower orders' had on our national mores (Dixson 1987, p. 60). Dixson goes on to say that the women had a lower status than men. Of the men whose own social status was low on the social ladder, the status of women tended to be lower. These men, including the diggers, demeaned their women to make up for the frustration they themselves felt of their own social position. Dixson (1987, p. 60) claims the women responded to the low social worth and actually became what their men needed them to be. Such a society where personal self evaluation was closely related to one's social status was called patricentric-acquisitive. Asher (1994) believes the presence of prostitutes was a significant contributing factor in the apparent low status of women on the Ballarat goldfields.

In the society that differentiated so sharply between men and women, women found they were drawn together for assistance and companionship (Janson, 1985, p. 37). Women worked together and shared resources to make and prepare all the family's requirements in the harsh environment. As mentioned earlier, the women were largely home bound and thus relied on their female neighbours for social interaction and friendship. Severe illness of a child or adult required constant attention and women relied on each other as this was 'women's work' and the men had to go to work. According to Johnson (1999, p. 8) pregnant women also relied on female relatives or neighbours for support during confinement and through the early days with a new baby. It was evident that the women of the goldfields came to rely on each other and many became close friends which is akin to Hall and Stevens (1977, p. 17) feminist principles of women valuing women.

Lifestyle of Women

For the average person clothing was generally made at home and people wore quite heavy clothes, including for the ladies, layers of undergarments and tight corsets (Johnson, 1999, p. 8). The fashion of the severely 'nipped in' waist and the 'S bend' corset required to achieve this effect had an impact on women's health and birthing (Adcock, Bayliss, Butler, Hayes, Woolston, & Sparrow, 1984, p. 28). Janson (1985, p. 33) tells the interesting anecdote of a farmer's wife who left off her petticoats on days of soaring temperatures and would also have discarded her stockings but the flies would have bitten her legs. New found wealth was portrayed by an elaborate display of dress with satins and silks of every hue further adorned with lace collars and gold chains (Bate, 1999, p. 35). On the Sabbath the family would don their best clothes and promenade over the goldfields (Withers, 1980,

p. 51). It seems that while the women were very isolated and endured great hardship they maintained a lively interest in fashion. Dresses with multiple petticoats gave way to crinolines that were suited to the Australian climate as they kept the petticoats off the legs (Adcock, Bayliss, Butler, Hayes, Woolston, & Sparrow, 1984, p. 28). Clothes were important to cover the body and to maintain warmth but played a part in creating health problems as did the diet available to the women on the goldfields in the 1850s.

It was reported by McCalman (1998, p. 25) in her history of the Royal Women's Hospital, Melbourne and by Ustick (1988, p. 40) that in the 1850s poorer women had an inadequate, limited, monotonous diet that contributed to complicated pregnancies and complicated and delayed births. Meals were cooked outside the tent on campfires using a dutch oven (Johnson, 1999, p. 6; Palmer & MacLeod, 1954, p. 72; Withers, 1999, p. 229). The basic meal was mutton or salt beef and damper (McCalman, 1998, p. 25; Molony, 2001, p. 14; Palmer & MacLeod, 1954, p. 72), supplemented by boiled kangaroo, kangaroo rat, possum, cockatoo and magpies as they were available (Janson, 1985, p. 33). All were eaten with endless cups of very sweet tea (McCalman, 1998, p. 25). At times there was no milk, eggs or butter and frequently no fresh fruit or vegetables (McCalman, 1998, p. 25). Following a breakfast of mutton chops, or a thin porridge made from broth from the previous nights boiled leg of lamb, a couple of cooked chops were wrapped for the men's lunch and others put aside for the family (Annear, 1999, p. 97). It is reasonable to presume that anaemia, malnutrition, bony disorders of the pelvis and other conditions that were caused by a poor diet would have contributed to the high maternal and neonatal morbidity and mortality of the goldfields. As the general wealth of the community increased many more people were able to enjoy an improved diet and vegetables could be purchased at a reasonable rate

(Bate, 1999, p. 20). Some women grew their own vegetables and raised poultry and pigs (Stone & Garden, 1978, p. 50) to supplement the otherwise bland diet and as a change from domestic chores. The story of the women of the Ballarat goldfields in the 1850s continues to unfold with information on their country of origin and what brought them to the goldfields. This section has further considered aspects of the new society including the daily routines of diet and dress along with marriage, children and the emerging society prior to finding 'women's way'.

Women's Way: Work and Health

Ustick (1988, p. 2) stated that in the 1850s the control of the community by the state and the church, always represented by men, determined that the occupations of the women were confined ruthlessly to secondary roles. An entry by Punch (cited in Johnson, 1999, p. 7), in 1872, said that society assured that the proper place for a woman was in the home; to be domestic. The main occupation of the vast majority of women was wife and mother caring for children, while the second most prominent occupations were domestic workers, needle women, shoe binders or milliners (Johnson, 1999, p. 7). Women were also storekeepers, cooks, nurses, brothel keepers and good time girls (Asher, 1985, p. 55; Johnson, 1999, p. 7). It was generally held that the only suitable paid employment for a woman was in another woman's home (Grimshaw, Lake, McGrath, & Quartly, 1994, p. 90). Bate (1999, p. 35) claims the most frequent commercial undertaking by women was selling sex. On the other hand Johnson (1999, p. 7) refers to women who were active in their husbands' businesses and economic affairs while others were in business in their own right. Martha Clending and her sister, just one example of enterprising women on the goldfields, opened a store in the front section of their tent with supplies they had purchased while on a

visit to Melbourne (Asher, 1985, p. 55). Martha had to pay forty pounds a year for a licence and this together with the changing consciousness of the expectations of a middle class women caused her to close down after a couple of years (Asher, 1985, p. 57). Of the one hundred and twenty nine professionals referred to in a table developed from the Census of Victoria, 1861, in Bate (1999, p. 37) it could reasonably be presumed that some were midwives. As the society determined that most women worked in the home their chores and joys centred on their family and day to day existence.

Historical records reveal women's daily life on the goldfields as an array of chores and adventures. Women baked bread, churned butter, made cheese, made the family's clothing, curtains, bedspreads, rugs and lacework (Janson, 1985, p. 33; Johnson, 1999, p. 6; Stone & Gorden, 1978, p. 50). Women spun wool and crocheted whatever was needed, to make a home in a most difficult environment. Candles, soap and hand and face creams were made from the fat of the slaughtered animal (Johnson, 1999, p. 6). Meat was eaten fresh for a couple of days and the women cured the rest (Janson, 1985, p. 33). Meals were generally cooked on outside campfires (Johnson, 1999, p. 6) whilst some more affluent families erected a chimney in the tent to allow internal cooking, particularly in winter (Asher, 1985, p. 53). As the goldfields community became more settled women began to grow vegetables, raise pigs and poultry (Stone & Gorden, 1978, p. 50).

Most of the ordinary people who flocked to the Ballarat goldfields lived in bark huts or calico tents near the digger's claim and home and furnishings were crude (Johnson, 1999, p. 6; Moloney, 1984, p. 28). A table was a box or tea chest (Palmer & MacLeod, 1954, p. 72) or constructed from gum tree saplings (Asher, 1985, p. 52). Tree stumps made chairs and a

bed was often made of saplings with forked stakes (Palmer & MacLeod, 1954, p. 72). The tents with women present were generally more comfortable and tidy with sheets on the bed and curtains offering some privacy (Asher, 1985, p. 54). As has already been discussed women's status on the goldfields was low, however women undertook all the fundamental tasks which provide a solid base for health, family and commercial stability. While history has not valued women for their contribution the feminist principles guiding this study allows this to be recognised.

Life was hard for women on the Ballarat goldfields in the 1850s (Johnson, 1999, p. 7). The need to be self sufficient and the carrying, birthing and rearing of many children to maturity, took a heavy toll of the energy and health of mothers (Grimshaw, Lake, McGrath, & Quartly, 1994, p. 94).

Living in tents on a crowded goldfield pre-empted a continual battle to keep flies, cockroaches and spiders from food, bedding and self (Grimshaw, Lake, McGrath, & Quartly, 1994, p. 121). Water from the rivers was muddy from the mining activities (Johnson, 1999, p. 7) and contaminated from multiple use. Water holes and underground water were also contaminated and fouled with human and animal excreta thus infections and fevers were quickly spread (Johnson, 1999, p. 8; Van Hamond, 1995, p. 1). Toilets were putrid drop holes dug into the earth (Johnson, 1999, p. 7) and raw sewerage ran in open drains throughout the township (Van Hamond, 1995, p.1). With the benefit of twenty-first century knowledge it is not surprising to read that Johnson's (1999, p. 8) report that minor injuries often became septic and many progressed to cause physical maiming or death.

Dysentery was the curse of the Ballarat goldfields in the 1850s (Skinner, 1995, p. 32) taking a particularly heavy toll on infants. Chapman (1986, p. 17) recorded that many of the women were suffering scurvy and there were outbreaks of diphtheria, small pox and other infectious diseases that are unheard of today because of sanitation and herd immunity. Bowden (1977, p. 70) relates the heartbreaking story of the death of nine of eleven of the Longmore family, at Learmonth, just out of Ballarat, of diphtheria in 1856. There were also many cases of smallpox in 1858 (Bowden, 1977, p. 70).

As Ustick (1988, p. 2) claims the male population controlled the church, state, medicine, astronomy and philosophy. Male domination by husbands, priests and doctors extended to health related matters particularly sexual health. It was customary for the women to believe that the men knew more about their bodily functions, their health, health complaints, menstruation, pregnancy and childbirth, than themselves (Hagger, 1979, p. 117; Ustick, 1988, p. 2). Ustick (1988, p. 3) wrote that man's invasion of the knowledge base of the natural behaviour of the female perpetuated ignorance and their ongoing dependence. Women generally accepted their husbands superiority in matters relevant to the body (Grimshaw, Lake, McGrath, & Quartly, 1994, p. 92) influenced by their own lack of knowledge, beliefs and fears. As women struggled with their own sexuality they also struggled with shame and guilt and were ignorant and fearful of their natural bodily functions and had little knowledge of pregnancy and childbirth (Hagger, 1979, p. 117). Mothers did not discuss issues of sexuality with their daughters (Hagar, 1979, p. 117) consequently they too, lived in ignorance. While many women in 2003 enjoy equality, personal freedom and have a deep knowledge and control of their bodies, it seems to me

that there are others whose circumstances in some ways resemble women's lives on the goldfields.

The code of sexual behaviour, as dictated by the church and the medical profession, determined that sex was for the procreation of children. Women's duty was to consent to the demands of her husband (Hagger 1979, p. 117). However, as all of the family lived in the one tent and often all slept in one bed Hagger (1979, p. 118) suggests a strict attitude to sexual behaviour was essential. There were some options of contraception which were openly or maybe quietly implemented to avoid a baby a year.

The main method of contraception was withdrawal or abstinence (Grimshaw, Lake, McGrath, & Quartly, 1994, p. 93) but both depended on the control and co-operation of the man. Asher (1994, p. 20) found that post coital douches with liquids such as vinegar reduced the incidence of conception and condoms made of animal gut or a cotton material were available. 'Holloway pills' were advertised to cure all 'women's problems' including bringing on an abortion in some women. Women also used herbs like Penny Royal and the mould that grew on Blackbeard to abort unwanted foetuses (Grimshaw, Lake, McGrath, & Quartly, 1994, p. 93). A fairly reliable contraceptive measure women used was to breastfeed to lengthen the distances between pregnancies (Grimshaw, Lake, McGrath, & Quartly, 1994, pp. 93-94). According to Hagar (1979, p. 118) women feigned illness to avoid coitus and unwanted pregnancies. The sequence of pregnancy, birth and another pregnancy within a year shaped most women's lives, which was accepted as the way of life and was largely beyond women's control (Grimshaw, Lake, McGrath, & Quartly, 1994, p. 119). Many women's pregnancies had a fundamental impact on women's health, energy,

time and on the likelihood of her children growing up healthy (Mongella, 1995, p. 7). The circumstances surrounding birth and birth outcomes significantly impacted on the women, their children, families and the wider community.

WOMEN'S WAYS OF BIRTHING

On the Ballarat goldfields in the 1850s the majority of women gave birth in their tent and while it was over crowded and primitive (Hagar, 1979. P. 118) it was their home. They attained whatever comforts and privacy they could secure, their family was generally present and a labouring woman's shouts were heard throughout the immediate vicinity. This vocalising added to the din of the quartz crushers and all were vital parts of life. Birthing women were attended by their mother or a female friend, relative or neighbour who had no special skills other than their own experience (Adcock, Bayliss, Butler, Hayes, Wodstron, & Sparrow, 1984, p. 30; Ustick, 1988, p. 40). Johnson (1999, p. 31) told the story of Anne Duke who gave birth in a roadside tent ten days after returning from Bendigo, with the assistance of an old, unknown woman. Historical records have not revealed the identity of this unknown woman. Categorising and cross checking historical data did not unearth any other reference to an unknown woman attending birthing women. In this study there was little reference to trained midwives on the goldfields and most women were attended by another local woman. Because women were not valued it was likely birth was just another ordinary part of life so was paid no special attention and no records made. Alternatively, the nature of taboo of women's business including birthing and midwifery may have ensured its exclusion from records.

The importance of good health, an adequate diet and antenatal care for pregnant women was not recognised at this time and women probably had other priorities. While Dr Richardson's diary revealed he was interested in a woman's antenatal history it was more

with an interest in abnormalities rather than normal development (Hagger, 1977, p. 128). Women had little knowledge, understanding or preparation for the bodily developments of pregnancy but they faced these dramatic changes with acceptance (Asher, 1977, p. 119). Antenatal complications were rarely noted, however McCalman, (1998, p. 25) found anaemia and malnutrition were prevalent in women birthing at the Royal Women's Hospital and is likely to also apply to the women on the goldfields due to a lack of fresh meat and green vegetables. Ustick, (1988, p. 40) attributed the social and environmental situation in which the poorer women lived with complications contributing to a high maternal mortality.

The onset of labour was a time of great concern as women had little knowledge of childbirth, they were frequently without female company and few women faced childbirth without fear of death (Grimshaw, Lake, McGrath, & Quartly, 1994, p. 94). In the 1850s, if the labouring woman required a vaginal examination by a doctor, the woman had to be persuaded to allow such an examination as modesty made the examination very stressful as well as intruding into the realm of physical contact which was only allowable with her husband (McCalman, 1998, p. 38). Although options for pain relief were limited some used alcohol and many managed the pain of labour with a stoic grim silence, while others were very vocal (McCalman, 1998, pp. 21-22). Chloroform administered by a doctor, was rarely used except in cases of operative vaginal birth (Forster, 1978, p. 10).

Prolonged labour was a particular problem for the women of the Ballarat goldfields in the 1850s and nearly half of the cases of maternal exhaustion due to obstruction related to pelvic contraction (De La Roche Bragge, 1866, p. 162). Both congenital and environmental

factors contributed to the incidence of women having a contracted or deformed pelvis including malnutrition, rickets, scurvy and the wearing of tight corsets from an early age (Chapman, 1986, p. 17; McCalman, 1998, p. 23). A woman with a pelvic deformity had a high risk of a tragic outcome for the baby and sometimes for herself (McCalman, 1998, p. 23). While complications were a serious problem Dr Richardson's case notes recorded ninety three percent of women laboured near term with a normal birth (Forster, 1978, p. 10).

At the Royal Women's Hospital in Melbourne in the 1850s women gave birth in the classic British obstetric position of left lateral (McCalman, 1998, p. 20). This position gave the birth attendant the best control over the speed of the birth as perineal trauma had significant repercussions for the women (McCalman, 1998, p. 20). Whether this was the practice on the Ballarat goldfields is not known, however with the women having a strong British heritage it was likely.

Immediately after the birth the attendant checked the uterus for any further babies and awaited the expulsion of the afterbirth. The continuous application of alternating cold and wet napkins and ice to the womb would control excessive blood loss (Tracey, 1863, pp. 113-114) and 'kneading' the womb encouraged contraction (Hagger, 1997, p. 124). Ustick (1988, p. 1) claims experienced lay midwives would have used the naturally occurring drugs Belladonna and Ergot to control bleeding after birth.

In the goldfield days women had frequent births and postpartum haemorrhage was a frequent complication (Adcock et al., 1984, p. 132). As the main cause of postpartum

haemorrhage was uterine atony the treatment was to grasp and express the uterus manually externally, douche cold water or apply cold packs to the lower abdomen and vulva and inject cold water into the rectum and vagina. The baby was put to the breast to strengthen contractions and Ergot and brandy administered orally if they were available (Forster, 1978, p. 10; McCalman, 1998, p. 20; Tracey, 1863, pp. 113-114). If a doctor was present a dose of opium may have been administered, Dr Richardson praised the value of opium to induce contraction of the uterus and as a general stimulant (Forster, 1978, p. 10). It seems quite natural that Hagger (1979, p. 120) supposes a blanket was to be warmed by the fire to receive the new baby and the attendants checked to see the baby's mouth was clear. If the baby did not cry at birth the baby's back was gently slapped to encourage breathing (Hagger, 1979, p. 120). Once the baby was well the cord was tied one and a half inches from the naval whilst another tie was applied an inch further away and the cord cut between the two ties. A firm bandage was applied around the abdomen to ensure the umbilicus did not protrude (Hagger, 1979, p. 120).

A difficult or mismanaged birth could result in complications that sometimes plagued a woman for the rest of life. Conditions such as a prolapsed uterus, perineal and cervical tears and incontinence (Grimshaw, Lake, McGrath, & Quartly, 1994, p. 120) all had a significant impact on women's future health and happiness. McCalman (1998, p. 20) described perineal trauma as a major dread of childbirth in the 1850s. A tear which was extensive enough to involve the anal sphincter resulted in faecal incontinence and the associated unpleasant odour. Perineal tears that were left unsutured, healed and became scar tissue or didn't heal and became chronically infected. Midwifery practice included packing the vagina and perineal tears with rock salt (Ustick, 1988, p. 1) and women may have had their

knees tied together to facilitate healing (Hagger, 1977, p. 122). Some doctors used silver wire sutures which were inserted twelve days after birth and the woman had to remain lying in the obstetric position until the wound healed, generally for weeks, with her bowels confined with opium to avoid contamination (McCalman, 1998, p. 21). This would be a time when women sought the assistance and support of other local women and relatives to enable the household to continue to function.

Other birth complications women suffered included uterine prolapse and the formation of a fistula between the vagina and either the rectum or the bladder which resulted in fecal or urinary incontinence. The new mother was to rest in bed and be looked after for at least ten days after childbirth (Adcock et al., 1984, p. 6; Bowden, 1977, p. 15). After the birth opium, which was readily available from the Chinese quarter, was available for use as a sedative (Wannon, 1970, pp. 122-124). Women were almost constantly pregnant or breastfeeding from the average age of twenty and marriage, until age thirty seven, which was the average when childbearing stopped (Grimshaw, Lake, McGrath, & Quartly, 1994, pp93-96). All women breastfed their babies, if this was not possible every effort was made to find a wet nurse. If one was not found the baby was offered cow's milk from a spoon or, if there was no milk available, given arrowroot biscuits mixed with warm water (Hagger, 1977, p. 129). Such stories of birthing and childrearing are reminders of the improvements in midwifery and medical care that are taken for granted in Australia.

In 1853 it became compulsory to register all births, deaths and marriages (van Hamond, 1995, p. 17) and this information was collected by local officials appointed by the Registrar General's Department. In 1853 a Coroner was also appointed to Ballarat (Hagger, 1977, p.

17). Prior to this appointment women and babies had been buried without any investigation as to their cause of death (Hagger, 1977, p. 17) which raises questions about the true mortality rate and practices that may have been concealed.

Birth Attendants

Midwives

As mentioned previously women were attended by their mother or a female friend, relative or neighbour who had no special skills other than their own experience (Adcock et al., 1984, p. 30; Ustick, 1988, p. 40). Some birthing women were attended by a midwife or a doctor (Adcock., 1984, p. 30). Skinner (1995, p. 53) said women were very fortunate to have an elderly, good midwife for their first birth as experienced midwives were very rare. In telling the story of birthing women of the goldfields, Martha Clendinning referred to midwifery practice as being undertaken by older women (Asher, 1985, p. 57). Such lay midwives gained their experience from their own birthing, information passed on from their mother, assisting another midwife or doctor at a birth, by observation, guesswork and trial and error (Adcock et al., 1984, p. 30; Grimshaw, Lake, McGrath, & Quartly, 1994, p. 120). Lay midwives attended most births unaided and from this practical experience an extensive and practical knowledge base developed (Ustick, 1988, p. 1). The services of the midwife were comparatively inexpensive and the midwife was possibly the only female attendant the women had (Lewis, 1984, p. 92).

On the Ballarat goldfields the term 'midwife' or 'being with the birthing women' (Johnson, 1999, p. 8) was used by lay midwives, trained midwives (if there were any) and doctors (Ustick, 1988, p. 14). Ustick (1988, p. 1) referred to lay midwife as clean, and with pride in

her office and experience in childbirth. This was in contrast to the midwives practicing on the goldfields whom Ustick (1988) described as "...unlearned, base and subscribers to evil practices and superstition" who were also drunk and illiterate (p. 2). It was suggested by Adcock et al., (1984, p. 30) that it was very unlikely there were any trained midwives on the goldfields and this study has not revealed evidence that disputes this claim. A manifest of immigrant passengers for several shipping vessels which carried early settlers recorded no entries for midwives among the many dairy maids, domestic servants, seamstresses, farm workers, cooks, school mistresses and some nurses (Historical Records of Victoria, 1984, as cited in Ustick, 1988, p.39) but no midwives. The story of the goldfields doctor, Dr Richardson 1826-1879, records him frequently being called for a birth due to the absence of trained midwives (Forster, 1978, p. 9).

Doctors held midwives largely responsible for the excessive incidents of maternal morbidity and death from sepsis and other causes (Lewis, 1984, p.92) however there are no figures that compare midwife and doctor attended births. Bowden (1977, p. 93) recounts letters written in 1860 by Wakefield in which he spoke of a midwife who was to be tried for manslaughter following the death of a woman in childbirth. Wakefield was appearing against the midwife and referred to the midwives collectively as being of the most ignorant class. It may also be significant that doctors were men and midwives women and the devaluation of women's work would have extended to birth. Valuing women and recognizing oppression are feminist principles applicable in this study to birthing on the goldfields (Hall & Stevens, 1977, p. 17). Even so in the goldfields environment it was not unusual for manslaughter or murder charges to be made against both midwives and doctors (Asher, 1985, p. 57) when a mother or baby died in childbirth.

The community eventually became uneasy with the lack of qualified midwives (Forster, 1965, p. 1048). In 1862 the Royal Women's Hospital began training nurses as 'ladies monthly nurses' who, having observed one hundred births and assisted at births under supervision, were qualified as midwives (McCalman, 1998, p. 20). This three month training included general nurse training as well. According to the 1861 Book of Household Management by Mrs Beeton (cited in Adcock et al., 1984) "...a monthly nurse should be aged between thirty and fifty, not too infirmed or old ... sober, clean, honest, noiseless and have a strong nerve in case of emergencies" (p. 30). Attempts to regulate midwives began in 1895 but met with strong opposition from the medical practitioners (Lewis, 1984, p. 94). The doctors argued that midwives lacked the necessary knowledge to care safely for labouring women and registration would create an inferior class of incompetent practitioners. It was also argued that registration of midwives would do harm to the economic interests of the medical profession and be unacceptable competitors in this area of practice, which was an important part of general practice (Lewis, 1984, p. 95). The Nurses Registration Bill was eventually passed in Melbourne in 1915. This provided registration for general, psychiatric and obstetric nurses (Lewis, 1984, p. 96). It was not until 1887 that formal midwifery training was offered at The Royal Womens Hospital in Melbourne (Forster, 1965, p. 1048).

Doctors

Doctors on the goldfields were not plentiful. They faced the same struggle in the harsh conditions as women and diggers but were however moderately wealthy. Many Irish, English and Scottish doctors came to Victoria as surgeon-superintendents on emigrant

ships and joined the rush for gold (Bowden, 1977, p. 121:Phillips, 1978, p. 14). Most found they needed the occasional fee for treating the sick to supplement their other activity (Bowden, 1977, p. 8) but the poor diggers could not afford the fee for confinements (Adcock et al., 1984, p. 30: Bowden, 1977, p. X1). A full time doctor Richard Power who settled at Buninyong stated his main cases involved confinements, accidents, measles and mumps and results of violence (Bowden, 1977, p. 3). Doctors on the goldfields who were practicing medicine identified themselves by flying a yellow flag adorned with a large pestle and mortar (Bowden, 1977, p. 15). During the decade considered in this paper any person could claim to be a doctor and practice medicine in Victoria (Bowden, 1977, p. 15). It was possible to buy a medical degree as they were freely advertised in local papers (Phillips, 1978, p. 16). According to Phillips (1978, p. 20) a 'well known specialist physician' was before the court and revealed the MRCP he used after his name referred to Malvern, Royal Park, Carlton and Preston, areas where he had lived, rather than the inferred Member of the Royal College of Physicians.

Bowden (1977, pp. 17-18) recounts the death of Eunice Bloggs in 1856 who, following the birth of her fourth child, died from haemorrhage. A Dr Hyde attended her and was subsequently found to be unqualified, a fact not known to the family (Bowden, 1977, pp. 17-18). Dr Hyde was also involved in the death of Mrs Clegg who suffered a retained placenta. He told the husband his hands were too big to deliver the afterbirth. He called in Dr Dennistown who manually removed the adherent placenta but Mrs Clegg died eleven days later (Bowden, 1977, p. 17). Both doctors were charged with manslaughter and subsequently found not guilty (Bowden, 1977, p. 17). According to Phillips (1978, p. 15) in the early years of the colony unregistered doctors vastly outnumbered those who were

registered. In an effort to control the unqualified practice of medicine the Ballarat Medico – Chirurgical Society was formed in 1854 (Bowden, 1977, p. 102). Local legally qualified doctors were invited to submit their qualifications and the list was published in the Ballarat Star (Bowden, 1977, p. 102). It was not until the Medical Practitioners Statute Act was passed in 1865 that legally qualified medical practitioners were required to be registered, so the goldfields were “awash with quacks and imposters” (Bowden, 1977, p. 19) until then. Hence forth all people who dealt with the public on health issues had to be licensed, so the medical fraternity claimed a firm control of health services and the medicalisation of childbirth in Australia had begun. It was significant that prior to 1886 medical training in Great Britain did not include any formal midwifery training (Adcock et al., 1984, p. 81) yet these doctors were relied upon for these skills.

An insight into women’s birthing was gained from letters held by the National Library, Canberra written by George Wakefield to his parents in London during the 1850s (Bowden, 1977, pp. 89-98). In a letter written in 1857 Wakefield describes income sources including five pound for a ‘midwifery case’, one he had to deliver with forceps after a protracted time. He also notes that twins were common, triplets not uncommon and quads also occurring. Wakefield also commented on the advanced age of the women, one of fifty years having her first baby (Bowden, 1977, pp. 89-98). Forster (1978, p. 10) recounts the case notes of Dr Richardson recording five hundred and sixty three births in which 93 percent of women laboured near term, 2 percent required a forceps births and 1.5 percent a craniotomy or perforation. Dr Richardson made reference to short and long forceps in his registry, the short probably a straight forceps and the long likely Simpson’s forceps (Forster, 1978, p. 10). The birth attendants called doctors for complicated births particularly when forceps

were required (Grimshaw, Lake, McGrath, & Quartly, 1994, p. 120) but this was generally after a prolonged period of labour. De La Roche Bragge (1866, p. 161) claimed that using forceps for a birth was not without risk but was less of a danger to the mother than hours upon hours of labour. (Bowden, 1977, p. 8). Qualified doctors carried a generous supply of drugs and prepared their own medicines on the spot (Bowden, 1977, p. 3). While most women birthed safely some experienced suffering and health problems as a result of many pregnancies and poor care, including that offered by some midwives and doctors (Lewis, 1984, p. 92). Recourse to hospital care was limited or non-existent.

Access to Hospitals

There were two private tent hospitals set up by medical practitioners in Ballarat, and a third at the Government camp that was initially for Government servants only. The Ballarat Miner's Hospital was built in Drummond Street with a government donation and monies raised by the diggers. The foundation stone was laid in 1855 amid great ceremony and Masonic pageantry (Bowden, 1977, p. 83). It opened with forty-two beds in 1856 (Hyslop, 1989, p. 21). Maternity patients were banned from the early hospital facilities as the need of the miner was considered more pressing than a woman in childbirth (Johnson, 1999, p. 8). The first Victorian 'Lying In' hospital was built in Melbourne in 1856 (McCalman, 1998, p. 15) and such a facility was not available at the Ballarat Base Hospital until 1869 (Hyslop, 1989, p. 52). While women birthed at home they were not exposed to the dread of the lying in hospitals such as puerperal fever which McCalman (1998, p. 32) spoke of and other infectious diseases prevalent at the time. However there were other conditions and situations which contributed to poor maternal and neonatal outcomes for many.

MATERNAL AND NEONATAL OUTCOMES ON THE GOLDFIELDS

There was a high maternal mortality and morbidity rate during childbirth due to the appalling conditions (Johnson, 1999, p. 8) high infection rates (Hepper, 1979, p. 125) and the birth process. The living conditions of the day contributed to the high infection rate (Forster, 1978, p. 11) and general precautions against the spread of disease such as hand washing was unknown. As is known it was not until the 1870s that Semmelweiss's hand washing, Pasteur's reforms and Lister's antiseptic procedures were practised by the health professionals and general populus. Dr Richardson (Forster, 1978, p. 9) recorded seven maternal deaths in his medical practice, two after the administration of chloroform, one following an abortion, one after a manual removal of the placenta, one after an internal version for a prolapsed arm, one from intersusception and one of delirium. Richardson reported an increased incidence of abortion and premature birth in Ballarat compared to Europe (Forster, 1978, p. 9). As has already been discussed, many women had prolonged and often obstructed labours which, without access to appropriate assistance, would have contributed to the maternal morbidity and mortality.

The overall mortality rate of women who had an instrumental birth was one in twenty-four, however De La Roche Bragge (1866, p. 161), in speaking of births requiring forceps, found there were no maternal deaths but one in fourteen babies died (McCalman, 1998, p. 24). In writing the history of The Royal Women's Hospital in Melbourne McCalman (1998) described puerperal fever as "...the dread of lying in hospitals" (p. 32) prior to 1870, as

infection was transferred to otherwise healthy women on doctors hands and clothes. As women on the goldfield birthed at home it was reasonable to suggest this threat was minimal. Ustick (1988, p. 40) offers the consideration that it was remarkable that so few women died during labour and birth at this time but the impact of women's business and taboos on the accuracy of records is unknown.

While maternal mortality and morbidity were high the neonates fared much worse. Ustick (1988, p.40) disclosed entries from early church registers in the 1850s which recorded entry after entry of infant death under three weeks. Alexander (2001, p. 27) revealed that over one in ten babies died and this did not include stillborn babies. Most families had at least one baby still born during their childbearing years. De La Roche Bragge (1866, p. 162) stated that the numbers of babies stillborn after twenty-four hours of labour was one in fourteen. The main causes of infant mortality were recorded as lack of care during pregnancy, prematurity, unsanitary damp conditions, failure to thrive, parental ignorance and neglect and weaning babies early (Hepper, 1979, p. 128). Many babies failed to thrive because their mother lacked proper care during pregnancy (Hagger, 1977, p. 128) and the diet and domestic demands inhibited lactation. Babies weaned early sometimes suffered a gradual wasting disease caused by a lack of sufficient nourishing food (Hagger, 1997, p. 129).

Canon (1971, p. 59) claimed that in the mid nineteenth century it was rare for people to be very concerned about children as they were regarded as expendable. This may have been a mechanism for mothers especially to protect themselves from ongoing grief. In contrast Hepper (1979, p. 128) refers to the diaries and letters of pioneer women which reveal the

anguish and suffering they experienced when they lost a baby. This was supported by a reference by Stone and Gordon (1978, p. 50) to a woman not being able to put into words what she experienced when her baby died in her arms. She was on her own and the only brightness, among the hardship and privations she had to endure, had been extinguished.

DISCUSSION

This historical research study has raised several revealing factors for women and midwives today. In describing history as our 'cultural DNA' (Lynaugh, 1996, p. 1), as our sense of identity in addition to Leininger's (1985, p. 109) claim that the past gives meaning to the present a sense of ourselves as individuals and as group members is developed. By empowering both women and midwives with knowledge and understanding, women's control over their lives and birthing will be promoted and future midwifery practice enhanced.

One hundred and fifty years ago women on the goldfields birthed with a lay midwife or female attendant. Conversely many women in third world countries still birth alone or with a traditional midwife. An example is East Timor, one of Australia's closest neighbours where data for 2002 from Ainaro, Ballarat's friendship city, reveals that only seventeen percent of births were attended by a trained midwife (Overview of Health Activities, 2003, p. 11). The Ainaro community continues to suffer a maternal mortality rate of 0.8 percent and an infant mortality of 7-9.5 percent (Health Profile Democratic Republic of Timor-Leste, 2002, p. 26), both very high rates in light of current health practices available in developed countries. The infant mortality in Ainaro is documented to be due to infection, prematurity and birth trauma (Health Profile Democratic Republic of Timor-Leste, 2002, p. 4) which align with causes of infant mortality on the goldfields as revealed by this study. Women and midwives need to continue to strive to improve birthing outcomes for all

women and babies particularly through education, enhanced clinical practice, accessing available health resources and improved infection control measures.

The literature revealed that choices for birth place, care or carer was limited for the goldfields women due to the lack of options and oppression by a patriarchal society. Today Ballarat's maternity services are vastly different. Women of the goldfields region have numerous options with regard pregnancy and childbirth comparable with the best twenty - first century western world options. Over recent years women increasingly know their rights and responsibilities about health care during their pregnancy, childbirth and parenting and so are confident in their involvement in decision making.

The fact that women birthed in tents a mere 150 years ago means there have been great changes in childbirth practices. In the 1860s the Ballarat Asylum accepted women for confinement and the first maternity ward in Ballarat was opened at the Ballarat Base Hospital in 1924 (Hyslop, 1989, p. 246). It has been usual for many years for most women to birth in hospitals however many want birth choices and question hospitals as the safest place to birth. Birthing in hospitals has other concerns for certain communities. For example Stewart (2003, p. 8) raises concerns about Australian women in remote areas of northern Australia who have to travel from their community to a regional centre to give birth. This separation from family, community and culture make birthing an isolated and lonely experience. The senior indigenous Australian women are concerned about the loss of connection to culture among the young, of which birthing away from the 'country' is an example. The need for culturally appropriate birthing incorporating western and indigenous health practices and qualified midwives is being advocated by many as a vital option for

indigenous Australian women. The Safe Motherhood initiative and the Australian College of Midwives Incorporated may well play a significant role in the provision of these options.

As this study reveals qualified midwives of the goldfields were rare and doctors were too expensive for the poor diggers. The early hope of this research making a significant contribution to midwifery history is dashed as the midwives referred to in the data were experienced rather than qualified. However, recording their experiences and aspects of their practice as found in the data, is midwifery history and the basis of current practice. This study has added substantially to the history of women and birthing on the Ballarat goldfields. The history of midwifery in Victoria however requires exploration. It seems the time is right in 2003 as Ballarat and Australia celebrates the 150 year anniversary of the Eureka uprising, to call for more a comprehensive study into the history of midwifery in Victoria.

The establishment of medicine as a profession in Victoria which incorporated midwifery practice, made it easy to bar lay midwives whom medical practitioners held largely responsible for maternal and neonatal death. Formal midwifery education was first offered at the Royal Women's Hospital in 1887 (Forster, 1965, p. 1048), at the Ballarat Base Hospital in 1926 (Hyslop, 1989, p. 246). The education of midwives in hospitals was dominated by male doctors who set the curriculum, delivered lectures and often set and marked exams. This control of midwifery practice and midwives resulted in subservient obstetric nurses. Ehrenreich and English (1973, p. 42) suggest the medical control of nursing and midwifery is typical of the sex and class struggles in all areas of life supported by a social and educational system which supports male power. In more recent times

women have entered medicine and while some enjoy the status the position offers others apply their position and knowledge to improvement of women's health. While this alters the male power base of midwifery it maintains the medicalisation of birthing. Many women today accept and actually expect medical intervention. Consequently, it seems we are witnessing the era of a caesarian section on demand.

Midwifery in Australia has developed as a profession with tertiary standing and an educational curriculum including both a scientific and a women centered initiative focus. The scope of practice for midwives in Australia is to care for women during their normal pregnancy, labour, birth and puerperium. A midwifery model aims to form a partnership with women and be 'with' women in a way which enables women to trust themselves, to birth under their own power without the need for medical intervention (Parratt & Fahy, 2003, p. 22).

In 2002 the withdrawal of indemnity insurance for midwives meant that midwives could no longer practice outside the insurance umbrella of a hospital. As only doctors have admitting rights to hospitals this remains a severe restriction to independent midwifery practice. Some suggest midwifery practice in hospitals has become more subjected to the requirements of medicalised birth so preventing midwives undertaking an essential part of their role, being with women. The doula or care assistant offering to fill this gap creates similarities to the female birth attendants on the goldfields. In this, perhaps, history does repeat itself.

CONCLUSION

The women of the Ballarat goldfields in the 1850s may well have been envisaged as quaint figures in the background of a society focused on men, gold and the Eureka uprising. This research has found women to be adventurous, strong people who were a vital cog in the 'madness' and excitement of the Ballarat goldrush era. This historical research study, guided by feminist principles has revealed the multiplicity of environmental and daily life factors which impacted on the lives, health and birthing of the women.

The research followed systematic steps as determined by Lusk (1997, p. 355), Rees & Howell (1999, p. 33) and Roberts & Taylor (2002, p. 328) to be a sound historical research method. Incorporated in the process was due attention to rigor, internal and external criticism, copyright and ethical issues relevant to historical research. The biases of the author clearly identified an unwavering interest in local women's issues, being a female midwife, an historian and having a familial interest in the area were acknowledged early.

A brief history of the Ballarat area focusing on the discovery of the rich alluvial goldfields in 1851 and the flocking of thousands of people from mainly the British Isles in search of quick riches set the scene for this study. The civil rebellion at the Eureka Stockade in 1854 was the culmination of significant unrest among the diggers and achieved among other gains male suffrage so creating democracy in Australia. As the population of the Ballarat goldfields exploded with diggers, women were also an early and permanent presence.

Women were an important part of the domestic, social and economic spheres of the Ballarat

scene throughout the 1850s, as this study has shown. However much of women's history was shrouded in silence as the recorders of the day were literate men. Historical records do illustrate though that while this society was patriarchal, men's experiences were affected by women as women's experiences were by men, even though women had no representation or vote and were seemingly lesser beings.

The early ratio of one woman to four men created an unusual social structure at the time but also ensured single women soon married. Marriage and children followed in natural sequence for the women in the 1850s. Most women birthed an average of seven live children with no record of stillborn babies. Children were seen as the backbone of the growing nation and a 'good woman' had many children, particularly sons (Grimshaw, Lake, McGrath, & Quartly, 1994, p. 72; Hagger, 1979, p. 118).

There are varying portraits of the Ballarat society from madness and excitement to orderliness and peace. The society was divided on the basis of money, occupation and property with women generally being relegated to a status lower than the lowest man. This social rejection saw women drawn together in mutual support and companionship, this unity no doubt contributed to the support women offered each other in childbirth.

There were many aspects of daily living which impacted on birthing, the mode of dress potentially caused bony deformities, the diet malnutrition and anaemia. Women were expected to contribute to physical labour as well as run the household, thus women who flourished were tough and practical. Women in the paid workforce were employed as dressmakers and milliners and in other traditional women's roles. As Ballarat expanded the

demand for domestic help in both the business and home spheres increased. Women in the home made all the family food, clothing, furnishings and sundries in the family tent with basic furniture made from trees. Reportedly they cooked a monotonous diet on campfires.

This study found it was a hard life for the women on the Ballarat goldfields in the 1850s. Living in tents in a crowded environment, with putrid toilets, a contaminated water supply and limited personal hygiene, disease was rampant. Women generally accepted their husbands' superiority and their own inferiority in matters relevant to their body and childbirth (Hagger, 1979, p. 117). While the church dictated the code of sexual behaviour there was limited contraception options with breastfeeding among the most popular. During their childbearing years married women were generally either pregnant or breastfeeding.

Just one hundred and fifty years ago women birthed in the same tents they lived in, attended by a female relative, friend or lay midwife. Most women faced birth with great fear and as no pain relief was available it was often a terrifying experience. While most women birthed safely the poor environmental and social situation along with a lack of antenatal care, malnutrition and bony deformities contributed to complications and long labours. Postpartum haemorrhage was a common complication and active measures were undertaken for prevention and control. Perineal trauma and fistulas were a major dread of birth with interesting repair measures recorded. All women breast fed or infrequently found a wet nurse as breast milk was vital to avoid childhood illnesses.

Women were attended in birth by a female relative or friend or a lay midwife. While the lay midwives were experienced their reputation ranged from respectability to drunkardness.

They lacked the formal ladies monthly nurse training which was offered in at the Royal Women's Hospital, Melbourne in 1862 (McCalman, 1998, p. 20) and preceded midwifery education introduced in 1887 (Forster, 1965, p. 1048). On the goldfields doctors were rarely called as most diggers could not afford their fees and many were unregistered. Two particular surviving medical records by Wakefield (Bowden, 1977, p. 89-98) and Richardson (Forster, 1978, p. 1-15) give insight into medical midwifery practice on the goldfields. These records and others refer to the high maternal and infant mortality rates caused by the seemingly appalling conditions, infection, lack of antenatal care, birth complications and prematurity (Johnson, 1999, p. 8; Hepper, 1979, p. 125-128).

This historical research concludes with a short discussion on factors raised which have particular significance for women, midwives and doctors in the early twenty-first century. These issues include midwives being with women at birth and the continuing maternal and neonatal morbidity and mortality in some parts of the world. The right and need for all women to have choice and birthing options is a world wide necessity. The professional development of midwifery as a profession, the impact of medical control on midwifery and childbirth along with the withdrawal of medical indemnity insurance for midwives completes the discussion.

The discovery of gold in Ballarat in 1851 and the Eureka rebellion in 1854 established Ballarat firmly in Australia's history. This study adds to this history in providing an understanding of women and the many aspects of birthing on the Ballarat goldfields in the 1850s.

REFERENCES

- Adcock, W., Bayliss, U., Butler, M., Hayes, P., Wodstron, H., & Sparrow, P. (Eds), (1984). *With courage and devotion: A history of midwifery in New South Wales*. Marrickville: Anvil.
- Allen, M. (1985). Mother Ursula Frayne: Caring for the children. In M. Lake & F. Kelly (Eds.), *Double time: Women in Victoria-150 years* (pp. 61-68). Ringwood: Penguin.
- Annear, R. (1999). *Nothing but gold*. Melbourne: Griffin.
- Asher, L. (1977). *Women on the Ballarat goldfields, 1850s and early 1860s*. Unpublished 4th year thesis, Department of History, University of Melbourne.
- Asher, I. (1985). Martha Clendinning: A womans life on the goldfields. In M. Lake & F. Kelly (Eds.), *Double time: Women in Victoria – 150 years*. Ringwood: Penguin.
- Baird, P. (1992). *An unlettered girl*. Melbourne: SRM Productions.
- Barzum, J., & Graf, H. (1970). *The modern researcher* (rev. ed). New York: Harcourt, Brace & World.
- Bate, W. (1989). *Lucky city: The first generation in Ballarat:1851-1901*, Carlton: Melbourne University Press.
- Bate, W. (1998). Eureka: Kennett brings history to life. In A. Sunter, & K. Livingston (Eds.), *The legacy of Eureka: Past, present and future* (pp. 15-20). Ballarat: Australian Studies Centre.
- Bate, W. (1999). *Victorian gold rushes*, Ballarat: The Sovereign Hill Museums Association.
- Beanland. C., Schneider, Z., LoBiondo-Wood, G., & Haber, J. (1999). *Nursing research* Sydney: Mosby.
- Blainey, G. (1998). Eureka: Why Hotham decided to swoop. In A. Sunter & K. Livingston (Eds.), *The legacy of Eureka: Past, present and future* (pp. 1-6). Ballarat: Australian Studies Centre.
- Bowden, K. (1977). *Goldrush doctors at Ballarat*. Mulgrave: Magenta Press.

- Brown, J. (1993). Some thoughts about theoretical frameworks in historical research. *American Association for the History of Nursing Bulletin*, 37(3), 1-2.
- Burns, N., & Grove, S. (2001). *The practice of nursing research: Conduct, critique and utilisation* (4th ed.). Philadelphia: Saunders.
- Canon, M. (1971). *Who's master? Who's man? Australia in the Victorian age*. Hong Kong: Toppan.
- Carter, H. (1994). Confronting patriarchal attitudes in the fight for professional recognition. *Journal of Advanced Nursing*, 9, 367-372.
- Census of Victoria (1854 and 1861). Microfiche Collection, State Government Offices.
- Chapman, D. (1986). *1788 The people of the first fleet*, Sydney: Doubleday.
- Clark, C. (1962). *A history of Australia*, Melbourne: Melbourne University Press.
- Cluett, E., & Bluff, R. (Eds.). (2000). *Principles and practice of research in midwifery*, Sydney: Bailliere Tindall.
- Cramer, S. (1992). The nature of history: Meditations on Clio's craft. *Nursing Research*, 41, 4-7.
- Croggan, J. (2001). Ballarat: First & richest, *The Flag*, University of Ballarat, 11, 1-7.
- Crotty, M. (1998). *The foundations of social research*. St Leonards: Allen & Unwin.
- De La Roche Bragge, R. (1866). Some statistics of midwifery in private practice, *The Australian Medical Journal*, June, pp. 161-165.
- Dixon, M. (1994). *The real matilda: Women and identity in Australia 1788 to the present* (2nd ed.), Ringwood: Penguin.
- Duyker, E. (Ed.). (1995). *A women on the goldfields*. Carlton: Melbourne University Press.
- Ehrenreich, B., & English, D. (1973). *Witches, midwives and nurses: A history of women healers*. New York: Feminist Press.
- Evans, M. (1998). From a hallowed spot to a miniature marathon: Remembering Eureka, 1855-1886. In A. Sunter., & K. Livingston (Eds.), *The legacy of Eureka: Past, present and future* (pp. 43-50). Ballarat: Australian Studies Centre.
- Fensham, B. (1994). *Right handsome girls: Women on the Ballarat diggings in the 1850s*. Unpublished thesis for a Masters of Public History, Department of History, Monash University.

- Forster, F. (1965). Mrs Howlett and Dr Jenkins – Listerism and early midwifery practice in Australia. *The Medical Journal of Australia*, II(26), 1047-1054.
- Forster, F. (1978). *Walter Lindesay Richardson, 1826-1879, as obstetrician*. Authors offprint from the limited edition, Festschrift for Kenneth Fitzpatrick Russell.
- Foucault, M. (1980). *The history of sexuality*. New York: Random House.
- Fuller, M. (1996). Women in the nineteenth century. In M. Schneir. (Ed), *The Vintage book of historical feminism* (pp. 62-65). London: Vintage.
- Gilligan, C. (1982). *In a different voice: Psychological theory and women's development*. Stanford: Harvard University Press.
- Grbich, C. (1999). *Qualitative research in health*. St Leonards: Allen & Unwin.
- Grimshaw, P., Lake, M., McGrath, A., & Quartly, M. (1994). *Creating a nation 1788 – 1990*. Ringwood: Penguin.
- Griffiths, P.(1988). *Three times blest*. Ballarat: Wallar & Chester.
- Hagger, J. (1979). *Australian colonial medicine*. Adelaide: Rigby.
- Hall, J. & Stevens, P. (1991). Rigors in feminist research, *Advances in Nursing Science*. 13(3): 16-29.
- Hamilton, D. (1993). The idea of history and the history of ideas, *Image:Journal of Nursing Scholarship*, 25(1), 45-48.
- Harding. S. (1987). Introduction: Is there a feminist method? In S. Harding, (Ed.), *Feminism and methodology*. Bloomington: Indiana University Press.
- Harris, H. (1994). Helen Hart – Pioneer suffragist. In *Central Highlands Historical Journal*, 2, Smythes Creek: Central Highlands Historical Association Incorporated, 9-14.
- Health Profile Democratic Republic of Timor-Leste*. (2002). Dili: Republica Democratica De Timor-Leste.
- Hicks, C. M. (1996). *Undertaking midwifery research*. Melbourne: Churchill Livingstone.
- Hocking, G. (2000). *To the diggings*. Melbourne: Lothian.
- Holly, M. (1991). *Keeping a personal-professional journal*. Geelong: Deakin University Press.

- Hyslop, A. (1989). *Sovereign remedies: A history of Ballarat Base Hospital 1850s – 1980s*. Sydney: Allen Unwin.
- Janson, S. (1985). Penelope Selby: Farmer's wife. In M. Lake & M. Kelly (Eds.), *Double time Women in Victoria – 150 years*. (pp. 31-39). Ringwood: Penguin. Johnson, L. (1999). *Women of Eureka*. Ballarat: University of Ballarat.
- Jones, B. (1998). Eureka's significance for the future. In A. Sunter., & K. Livingston, (Eds.), *The legacy of Eureka: Past, present and future*, (pp. 65-68). Ballarat: Australian Studies Centre.
- Kitzinger, S. (1978). *Women as mothers*. London: Fontana.
- Lcap, N & Hunter, B. (1993). *The midwives tale*. London: Scarlet Press.
- Leininger, M.(Ed). (1985). *Qualitative research methods in nursing*. Philadelphia: W.B.Saunders.
- Lengermann, P. & Niebrugge, J. (1996). Contemporary feminist theory. In G.Ritzer (Ed.), *Sociological theory* (4th ed.), (pp. 436-486). New York: McGraw-Hill.
- Lewis, M. (1984). Doctors, midwives, puerperal infection. In H.Attwood., F. Forster & B. Gandevia (Eds.), *Occasional papers on medical history Australia* (pp. 12-20). Melbourne: University of Melbourne.
- Lusk, B. (1997). Historical methodology for nursing research. *Image: Journal of Nursing Scholarship*, 29(4), 355-359.
- Lynaugh, J. (1996). Editorial. *Nursing History Review*, 4(1), 1-2.
- Mackay, A. (1936). Medical practice during the goldfields era in Victoria. *The Medical Journal of Australia*, 2, 421-428.
- Matejski, M. (1986). Historical research: The method. In P.L.Munhall, & C.J.Oiler (Eds.), *Nursing research:A qualitative perspective* (pp. 175-193). Norwalk: Appleton-Century-Crofts.
- McCalman, J. (1998). *Sex and Sufferin;; Women's health and a women's hospital*. Carlton: Melbourne University Press.
- McGann, S. (1997). Archival sources for research into the history of nursing. *Nurse Researcher*, 1997/98, 5(2), 19-29.
- McGuinness, B. (1997). *Women's ways of birthing in Ballarat in the 1940s*. Unpublished thesis for Masters of Nursing. School of Nursing, The Flinders University of South Australia, Adelaide.

- Molony, J. (1984). *Eureka*. Ringwood: Viking Penguin.
- Molony, J. (1998). Eureka; Human rights and the beginning of Nationality. In A.Sunter, & K.Livingston (Eds.), *The legacy of Eureka: Past present and future*, (pp. 7-14). Ballarat: Australian Studies Centre.
- Molony, J. (2001). *Eureka*. Carlton: Melbourne University Press.
- Mongella, G. (1995). Change for the last and the least. In K. Healey (Ed.), *Women and development* (pp. 7-8). Balmain: Spinney.
- Moore, K. (1998). The role of the local Catholic school leaders in the uprising at Eureka. In A.Sunter., & K.Livingston (Eds), *The legacy of Eureka: Past present and future*, (pp. 21-30). Ballarat: Australian Studies Centre.
- Mulhall, P. & Oiler, C. (1986). *Nursing research*, Connecticut: Appleton-Century-Crofts.
- Olesen, V. (1994). Feminism and models in qualitative research. In N. Denzin, & Y. Lincoln (Eds.), *Handbook of Qualitative Research* California:Sage.
- Oldfield, A. (1992). *Women suffrage in Australia*, Cambridge: Cambridge University Press.
- Overview of health activities 2002*. (2003). Republica Democratica De Timor-Leste, 1-20.
- Palmer, H., & MacLeod, M. (1954). *The first hundred years*. London: Longmans Green.
- Parratt, J., & Fahy, K. (2003). Trusting enough to be out of control: A pilot study of women's sense of self during childbirth, *Australian Midwifery*, 16(1), 15-22.
- Phillips, P. (1978). *Kill or cure: Lotions, potions, characters and quacks of early Australia*, Richmond: Greenhouse.
- Polit, D., & Hungler, B. (1997). *Nursing research: Principles and methods*, (4th ed.). Philadelphia: Lippincott.
- Rafferty, A. (1996). Historical research. In D. Cormack (Ed.), *The research process in nursing* (3rd ed.). Oxford: Blackwell Science.
- Rathdone, W. (1861). Letters from William Rathbone to Elizabeth Rathbone, Sydney Jones Library, University of Liverpool, 1X. 9.9. In K. Gleadle, (1995). *The early feminists*, New York: St Martins Press.
- Rees, C., & Howells, G. (1999). Historical research: Process, problems and pitfalls. *Nursing Standard*. 13(27), 33-35.
- Reinharz, S. (1992). *Feminist methods in social research*. New York: Oxford University Press.

- Rich, A. (1986). *Of women born: Motherhood as experience and institution*, (10th anniversary edition). New York: Norton.
- Richardson, H. (1969). *The fortunes of Richard Mahony*. London: Heinemann.
- Ritzer, G. (1996). *Sociological theory*. (4th ed.). New York: McGraw-Hill.
- Roberts, K. & Taylor, B. (2002). *Nursing research processes* (2nd ed.). Southbank: Nelson.
- Robertson, B. (1992). Old traditions and new techniques: An oral history of childbirth experiences in South Australia. *Oral History Association of Australian Journal*, 14, 57-68.
- Ruffing-Rahal, M. (1992). Incorporating feminism into the graduate curriculum. *Journal of Nursing Education*, 31, 247-252.
- Sarnecky, M. (1990). Historiography: A legitimate research methodology for nursing. *Advances in Nursing Science*, 12(4), 1-10.
- Scott, J. (1996). *Feminism & history*. New York: Oxford University Press.
- Searle, D. (1963). Introduction, In R. Carboni. *The Eureka Stockade*. Parkville: Melbourne University Press.
- Sigsworth, J. (1995). Feminist research: It's relevance to nursing. *Journal of Advanced Nursing*, 22(5), 896-899.
- Skinner, E. (1995). A strange and wonderful country. In E. Duyker (Ed.), *A woman on the goldfields*. (pp. 29-35). Carlton: Melbourne University Press.
- Skinner, E. (1995). New scenes. In E. Duyker (Ed.). *A woman on the goldfields*. (pp. 51-72). Carlton: Melbourne University Press.
- Stanley, L., & Wise, B. (1990). Method, methodology and epistemology in feminist research processes, In L. Stanley (Ed.), *Feminist praxis: Research, theory and epistemology in feminist sociology*. London: Routledge.
- Stewart, M. (2003). Sharing stories equals strength and survival, *Australian Midwifery News*, 3(1), 8-9.
- Stone, D., & Gordon, D. (1978). *Squatters and settlers*. Sydney: Reed.
- Streubert, H., & Carpenter, D. (1995). *Qualitative research in nursing*. Philadelphia: Lippincott.
- Sunter, A. (1998). Flying the flag; The saga of the Eureka flag. In A. Sunter & K.

- Livingston (Eds.), *The legacy of Eureka: Past, present and future*. Ballarat: Australian Studies Centre, University of Ballarat, (pp. 51-).
- Swain, S (1998). Remembering Eureka: Is it a boy's own game. In A.Sunter & K.Livingston (Eds.), *The legacy of Eureka: Past, present and future*. Ballarat: Australian Studies Centre, University of Ballarat, (pp. 31-36).
- Syme, M. (1984). *Shipping arrivals and departures: Victorian ports 1798-1845*. Sydney: Roebuck.
- Thompson, S., & Barrett, P. (1997). Summary oral reflective analysis: A method for interview data analysis in feminist qualitative research. *Advances in Nursing Science*, 20(2), 55-65.
- Tong, R. (1989). *Feminist thought; A comprehensive introduction*. London: Unwin-Hyman.
- Tong, R. (1995). *Feminist thought: A comprehensive introduction*. London:Routledge.
- Tracy, R. (1863). Clinical midwifery notes. *Australian Medical Journal*, 8, 112-115.
- Ustick, R. (1988). *The rabbit-snatcher* Unpublished thesis for the degree of Doctor Of Philosophy, Monash University, Melbourne
- Van Hamond, L. (1995). *Prisoners of poverty? Prostitution on the Ballarat and surrounding goldfields, 1855-1870*. Unpublished thesis for Bachelor of Art (Hons) Degree, Australian Catholic University, Aquinas Campus.
- Wakefield, G. (1857 & 1860). Letters held by the National Library, Canberra. In K, Bowden. (1977). *Goldrush doctors at Ballarat*. Mulgrave: Magenta Press.
- Wannon, B. (1970). *Folk medicine*. Melbourne: Content.
- Withers, W. (1980). *History of Ballarat*. Ballarat: Niven.
- Withers, W. (1999). *History of Ballarat and some Ballarat reminiscences*. Ballarat: FRP.
- Wright, K. (1997). Qualitative research: Exploring new frontiers. *Gastroenterology Nursing*, 20(3), 74-78.
- Yuginovich, T. (2000), More than time and place, using historical comparative research as a tool for nursing. *International Journal of Nursing practice*, 6, 70-75.