It is more than 150 years since the first women joined the Medical Register in Britain. The achievements of early pioneers like Elizabeth Blackwell and Elizabeth Garrett Anderson are often celebrated as milestones in the history of women in medicine. It is less well-known perhaps that the Victorian period also saw the movement for medical women develop into a concerted campaign. By 1892, there were 135 female practitioners on the register. Unsurprisingly, their inroads into the profession were met with hostility and resentment.

The RCS Library has an extensive collection of medical journals from the 19th century and these provide a fascinating insight into contemporary debates about whether women could or should study and practise medicine. The subject was covered in familiar titles such as the *Lancet* and *British Medical Journal (BMJ)*, as well as lesser-known journals including the *Medical Press and Circular (MPC)* and *Medical Mirror*. It featured in their editorials and news articles, correspondence columns, and transcripts of debates at professional societies. The topic was so ubiquitous that by 1877 the *Lancet* complained that ‘[t]he medical-women question is perennial. It knows no limits; we encounter it at every turn.’

As the first female President of the RCS finishes her term, we take a look at how the role of women in medicine was represented in the Victorian press. How far have we come?

Alison Moulds  DPhil Candidate, University of Oxford
When Blackwell and Garrett Anderson joined the register in 1859 and 1864 respectively, it was through loopholes in the system that were subsequently closed to prevent other women following suit. In 1869, Sophia Jex-Blake and several female peers successfully lobbied for their admission to a recognised medical degree at the University of Edinburgh. With the prospect of medical women becoming more plausible, professional journals began debating the subject with increasing urgency and zeal.

Many were initially vociferous in their opinions. In 1870, the *BMJ* featured a leading article in which it suggested that women entering professional life would be detrimental to the interests of their gender and society. In sensationalist language, it branded the ‘lady-doctor’ a ‘traitress to her sex’ and insisted that, in a civilised society, women should not follow their own ‘eccentric longings[s] for the will-o’-the-wisp pleasures of independence’.\(^2\) Meanwhile, the rather more progressive *Medical Mirror* defined its position against the views of its contemporaries, deriding the *BMJ* for its ‘medieval notions concerning woman’.\(^1\) The MPC adopted a moderate stance, arguing that – in the spirit of ‘toleration’ – women should be allowed to pursue medical education, though it doubted whether they would ever succeed.\(^3\)

A particular bone of contention was the prospect of mixed or co-educational medical classes, which were seen as a threat to Victorian ideas of propriety and delicacy. In the face of opposition, Jex-Blake and her peers were denied the right to graduate and had to obtain their degrees abroad. Despite this setback, there were significant developments in following decades. Schools designed exclusively for female students opened in London (1874) and Edinburgh (1886). There were also wider reforms to the professional and educational landscape. In 1876, legislation formally authorised universities to award degrees to women (although it did not compel them to do so). A year later, the King’s and Queen’s College of Physicians of Ireland – one of Britain’s 19 medical licensing bodies – opened its final examinations to women.

From the early days of the movement, commentators debated where and how this new cohort of medical women would practise. Aspiring women doctors and surgeons claimed that there was an appetite or demand for their services among female patients, drawing on emerging ideas of patient preference or choice. They alleged that women were reluctant or unwilling to consult medical men, particularly when it came to their intimate health. In March 1870, the *Lancet* suggested that women and children’s medicine was ‘the most appropriate field’ for female practitioners.\(^5\) Two months later, however, it refused to cede even this territory, suggesting there would be no demand for medical women among female patients. In a particularly vitriolic aside, it asserted that ‘women hate one another, often at first sight, with a rancour of which men can form only a faint conception’.\(^6\)

With more women entering the profession, however, hostility gradually began to wane. The perceived necessity of female practitioners for work in the British Empire was crucial to tempering opposition. In 1885, the National Association for Supplying Female Medical Aid to the Women of India was established, with the backing of Queen Victoria. It provided support for medical women of British and Indian descent and catered for female patients who observed practices of veiling or segregation. In colonial journals such as the *Indian Medical Gazette* and *Indian Medical Record*, medical women were not only tolerated but celebrated. They were seen as extending the reach of Western medicine and thus incorporated into wider ideas about the imperialist project.

Significantly, historical medical journals grant access to the voices of early medical women themselves. They wrote in to participate in debates and share their own experiences. In the *Lancet*, Jex-Blake criticised suggestions that women should be given poorly remunerated midwifery cases, while Marion Ritchie (from the Clapham Maternity Hospital) tried to deflect allegations that medical women were undercutting men by working for lower fees. Their voices did not appear purely in the context of debates about the medical-woman movement; they also contributed clinical material. Even before the British Gynaecological Society admitted women in 1901, it published contributions from them. In the 1890s, it featured observations from Mary Ann Scharlieb (SeniorSurgeon at the New Hospital for Women) on hysterectomy cases and an article from American doctor Mary Dixon Jones on diseases of the ovary.

Women’s engagement with the medical press was sporadic – unsurprising, perhaps, given its initial hostility towards them. Aspiring female practitioners often turned to other types of writing to make their case. In 1869, Jex-Blake produced a polemical essay entitled *Medicine as a Profession for Women*, while novels such as Margaret Todd’s *Mona Maclean, Medical Student* (1892) and Arabella Kenealy’s *Dr Janet of Harley Street* (1893) aimed to influence popular audiences.

Resistance among the profession continued until the century’s close, however. During the 1890s, the BMA, RCS and RCP all debated whether to admit women to their ranks. Although the BMA voted in
favour, both royal colleges voted against. (Decisions that were only overturned in 1908.) The *Lancet* and *BMJ* published transcripts of these debates, which show arguments advanced on either side. Some questioned whether women's participation might weaken the reputation or authority of the professional bodies. At the RCS, general practitioner FH Alderson said he did 'not think it would give strength to the College to admit women to the best surgical diploma in the world'. In a letter to the *Lancet*, however, physician John Walter Carr countered that many women 'would grace the profession even more than the domestic circle'. He implied that femininity could elevate medicine. The MPC criticised the arguments put forward against female practitioners during the royal college debates. Although uncertain about women's physical and mental fitness for medical practice, it suggested that arguments against them were cynically based on 'sordid, commercial ground'.

The mixed coverage of medical women reveals not only Victorian attitudes towards gender, but also the anxieties and aspirations of the medical profession. In part, resistance to female practitioners was linked to ideas about women's physical or mental weakness and their perceived roles as wives and mothers. However, opposition also stemmed from insecurities about professional status. Medicine was seen as overcrowded and often unremunerative; women therefore presented unwanted competition. Although physic had long been held in high esteem, surgery and general practice were still in the process of establishing themselves, shedding their old associations with trade and consolidating their respectability. The profession was divided about whether women's participation would improve or undermine its public image and medical journals were a key site for contestation and debate.

**References**


Alison is in the final year of her DPhil English Literature at the University of Oxford, where she is researching the formation of professional identities in Victorian medical writing. She is part of the Constructing Scientific Communities project, which works in partnership with the RCS.