

FORMER BABY HEALTH CARE CENTRE



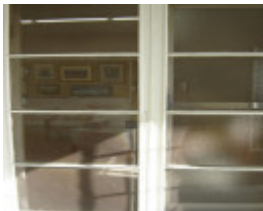
FORMER BABY HEALTH CARE CENTRE SOHE 2008



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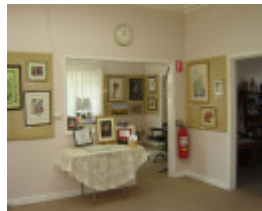
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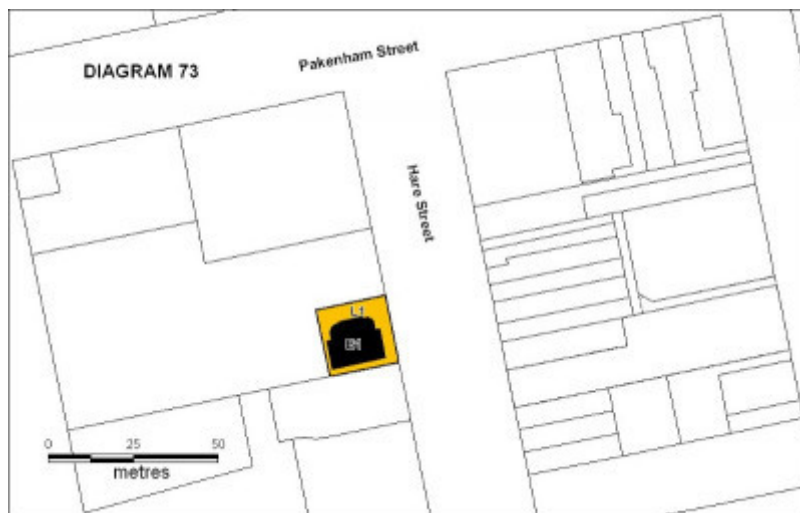
h00073 echuca baby health centre may05 front door



h00073 echuca baby health centre may05 rear



h00073 echuca baby health centre may05 waiting room4



h00073 echuca baby health centre plan

Location

109 HARE STREET ECHUCA, CAMPASPE SHIRE

Municipality

CAMPASPE SHIRE

Level of significance

Registered

Victorian Heritage Register (VHR) Number

H0073

Heritage Overlay Numbers

HO80

VHR Registration

March 2, 2006

Heritage Listing

Victorian Heritage Register

Statement of Significance

Last updated on - June 28, 2005

What is significant?

The health of mothers and infants became of increasing concern in the first decades of the twentieth century. The early baby health movement was driven by committed volunteers frustrated at government inaction. Dr Isabella Younger Ross (1887-1956) who had studied infant health in England helped set up Victoria's first baby health clinic in Richmond in 1917. By 1918 the voluntary Victorian Baby Health Centres Association (VBHCA) was formed to oversee the growing number of centres. Financial support also came from local councils and in 1926 the State government formed the Infant Welfare Section of the Public Health Department and appointed Dr Vera Scantlebury Brown as the first Director.

The first Baby Health Centre in Echuca was conducted from two small rooms in the Town Hall between 1925 and 1950. By 1947 the rooms were insufficient for the needs of the service. In the following year, despite severe post-war labour and material shortages, the Committee of the Baby Health Centre embarked on a fund-raising campaign for a new building, supported by the Echuca Rotary Club. The council provided land on Alton Reserve situated at the end of the commercial centre of the town, but provided no funding for the building. The committee took advantage of the newly introduced State Government construction subsidy of £1000 and the building was eventually completed by voluntary labour, donated materials and funds from individuals and local businesses and organisations. The building, opened by Dr. A. E. (Betty) Wilmot, Acting Director of the Maternal and Child Hygiene Section of the Health Department on 30 September 1950, is one of the first centres to be completed in country Victoria after World War Two. The architect for the building is unknown.

In plan form the domestic-scale building is symmetrically arranged with double door entrances accessed by porches on either side of a central, projecting waiting room. The entrances and pram porches were specifically designed to provide easy pram access, as well as space for pram parking. Other rooms include the consulting suite, as well as a utility room, kitchen, toilet, tools and wood room. Domestic in scale and design, the centre resembles a house typical of the austere period after the Second World War. The style can be described as Post-war Functionalist or Post-war Austere. The hipped roof is tiled, the brick fabric is rendered (now painted white), and the windows metal framed. The porches are semi-circular, with sections of glass bricks and double wrought iron gates at their entry. The large wrought iron lettering mounted on the render above each entry originally read "HEALTH", the other "CENTRE". A Rotary logo is located at the top part of the chimney. The building is owned by

the Campaspe Shire Council and is still in community use as a gallery.

How is it significant?

The former Echuca Baby Health Care Centre is of historical, architectural and social importance to the State of Victoria.

Why is it significant?

The former Echuca Baby Health Centre is of historical significance for its associations with the baby health movement in rural Victoria. The building epitomises the enthusiasm and importance of the baby health movement in a country community. As one of the first baby health centre buildings to be completed in country Victoria after World War Two and one of the first to utilise the State Government construction subsidy, its existence is symbolic of the determination of the local community and the strength of the baby health care movement in Victoria. The centre has further historical significance for its associations with the strong Australian culture of volunteerism, owing its existence to the very determined efforts of its committee, the Rotary Club and various local citizens and organisations. The building is representative of the purpose-built centres which appeared from around 1926 and which proliferated in the post-war, baby-boom period. Homely in scale and appearance, the centres demonstrated a philosophical association with domestic housing design, both places traditionally perceived as the domain of women and children.

The former Echuca Baby Health Centre is of architectural significance for its consideration of the functional needs required of a baby health centre which have been successfully integrated into the design of a domestic house. The building is an extraordinary example of a building predominantly constructed by voluntary labour and completed in spite of post-war shortages.

The former Echuca Baby Health Centre is of social and cultural significance for its enduring civic value to the community. The centre symbolises the combined initiatives of local women and community organisations and individuals, and is symbolic of a culturally progressive caring society, a place associated with new scientific ideas and programs designed to improve the health education of women raising families often in very difficult rural conditions. The building has a strong sense of attachment for the generations of women and children for whom it was their primary meeting place in the town.

Permit Exemptions

General Exemptions:

General exemptions apply to all places and objects included in the Victorian Heritage Register (VHR). General exemptions have been designed to allow everyday activities, maintenance and changes to your property, which don't harm its cultural heritage significance, to proceed without the need to obtain approvals under the Heritage Act 2017.

Places of worship: In some circumstances, you can alter a place of worship to accommodate religious practices without a permit, but you must [notify](#) the Executive Director of Heritage Victoria before you start the works or activities at least 20 business days before the works or activities are to commence.

Subdivision/consolidation: Permit exemptions exist for some subdivisions and consolidations. If the subdivision or consolidation is in accordance with a planning permit granted under Part 4 of the *Planning and Environment Act 1987* and the application for the planning permit was referred to the Executive Director of Heritage Victoria as a determining referral authority, a permit is not required.

Specific exemptions may also apply to your registered place or object. If applicable, these are listed below. Specific exemptions are tailored to the conservation and management needs of an individual registered place or object and set out works and activities that are exempt from the requirements of a permit. Specific exemptions prevail if they conflict with general exemptions.

Find out more about heritage permit exemptions [here](#).

Specific Exemptions:

General Conditions: 1. All exempted alterations are to be planned and carried out in a manner which prevents damage to the fabric of the registered place or object. General Conditions: 2. Should it become apparent during further inspection or the carrying out of works that original or previously hidden or inaccessible details of the place or object are revealed which relate to the significance of the place or object, then the exemption covering such works shall cease and the Executive Director shall be notified as soon as possible. Note: All archaeological places have the potential to contain significant sub-surface artefacts and other remains. In most cases it will be necessary to obtain approval from Heritage Victoria before the undertaking any works that have a significant sub-surface component. General Conditions: 3. If there is a conservation policy and plan approved by the Executive Director, all works shall be in accordance with it. Note: The existence of a Conservation Management Plan or a Heritage Action Plan endorsed by Heritage Victoria provides guidance for the management of the heritage values associated with the site. It may not be necessary to obtain a heritage permit for certain works specified in the management plan. General Conditions: 4. Nothing in this determination prevents the Executive Director from amending or rescinding all or any of the permit exemptions. General Conditions: 5. Nothing in this determination exempts owners or their agents from the responsibility to seek relevant planning or building permits from the responsible authorities where applicable.

Exterior:

Removal of extraneous items such as air conditioners, pipe work, ducting, wiring, antennae, aerials etc, and making good.

Installation and repairing of damp proofing by either injection method or grout pocket method.

Installation or removal of external fixtures and fittings such as, hot water services and taps.

Interior:

Painting of previously painted walls and ceilings provided that preparation or painting does not remove evidence of any original paint or other decorative scheme.

Installation, removal or replacement of carpets and/or flexible floor coverings.

Installation, removal or replacement of curtain tracks, rods and blinds.

Installation, removal or replacement of hooks, nails and other devices for the hanging of mirrors, paintings and other wall mounted art works.

Demolition or removal of non-original stud/partition walls, suspended ceilings or non-original wall linings (including plasterboard, laminate and Masonite), bathroom partitions and tiling, sanitary fixtures and fittings, kitchen wall tiling and equipment, lights, built-in cupboards, cubicle partitions, computer and office fitout and the like.

Removal or replacement of non-original door and window furniture including, hinges, locks, knobsets and sash lifts.

Installation of stud walls, which are removable.

Refurbishment of existing bathrooms, toilets and kitchens including removal, installation or replacement of sanitary fixtures and associated piping, mirrors, wall and floor coverings.

Removal of tiling or concrete slabs in wet areas provided there is no damage to or alteration of original structure or fabric.

Installation, removal or replacement of ducted, hydronic or concealed radiant type heating provided that the installation does not damage existing skirtings and architraves and that the central plant is concealed.

Installation, removal or replacement of electrical wiring.

Installation, removal or replacement of electric clocks, public address systems, detectors, alarms, emergency lights, exit signs, luminaires and the like on plaster surfaces.

Installation, removal or replacement of bulk insulation in the roof space.

Installation of plant within the roof space.

Installation of new fire hydrant services including sprinklers, fire doors and elements affixed to plaster surfaces.

Landscape:

The process of gardening and maintenance, mowing, hedge clipping, bedding displays, removal of dead plants, disease and weed control, emergency and safety works to care for existing plants and planting themes.

Repairs, conservation and maintenance to hard landscape elements, roads and paths, drainage and irrigation system.

Management of trees in accordance with Australian Standard; Pruning of amenity trees AS4373.

Removal of plants listed as noxious weeds in the Catchment and Land Protection Act 1994.

Installation, removal or replacement of garden watering and drainage systems.

Non-commercial signage, lighting, security fire safety and other safety requirements, provided no structural building occurs.

Resurfacing of existing paths and driveways.

Construction dates	1949,
Heritage Act Categories	Registered place,
Other Names	INFANT WELFARE CENTRE, ALTON GALLERY,
Hermes Number	6052
Property Number	

History

The contextual history was written by Michele Summerton. It draws largely on Cheryl D. Crockett, "The History of the Baby Health Centre Movement in Victoria 1917 - 1976, Including a Heritage Study of Extant Purpose-built Baby Health Centre Buildings Constructed Before 1950", Department of History, Monash University, 31 January 1997. The history of place section is taken from Cheryl Crockett's thesis.

Contextual History

The health of mothers and babies became a topic for concern in Australia in the first decades of this century. There were concerns about the birthing process and the sicknesses, permanent disabilities and even deaths experienced. The authorities were slow to address these worries, and the dissemination of safer birthing control methods was also officially discouraged. During these years newly formed womens groups were involved in these issues, but even by 1928, years after these issues were first raised, a Royal Commission on Health reported that maternal mortality and disability still constituted 'a grave national danger'(Crockett 1997:1: Royal Commission on Health, Report, Commonwealth Parliamentary Papers 1926-28 vol 4, p 32).

An attempt to combat infant mortality had been made in 1909 with the formation of the Lady Talbot Milk Institute. Its main activity was to oversee the distribution of regulated fresh milk supplies, as there were increasing doubts about the quality of cow's milk (as a very perishable commodity) and its suitability for infants, a concern that was already being addressed in NSW and overseas. The Institute relied on state and municipal grants, and Talbot

nurses visited houses imparting knowledge to women on how to nurse their children and store milk. Small ice chests and blocks of ice were also sent as part of the service (Crockett:2)

By 1916 it was becoming clear that the best food for babies is human milk. That year a report by a committee of Melbourne medical practitioners advised that every effort should be made to educate mothers about maintaining their health and to encourage them to breast feed their babies. They advised that any cow's milk should be pure and the supply should be controlled and adequately provided. They noted that mortality rates amongst infants had largely been due to infected milk, and they deplored the conditions under which most milk was still handled between the numerous stages between farm and home. In order to improve education on the 'feeding, nursing and care of infants', the committee recommended the establishment of ante-natal and infant clinics similar to those in England (Crockett:2: VPRS 9291P1/17/T/6, p 34). They strongly advised on implementing a system of health administration in all country and suburban municipalities which would be controlled by the state government health department. They specifically referred to the system of baby clinics already established in New South Wales and their benefits. In emphasising the necessity of clinics, they pointed to the fact that during 1915, 9107 children died within their first year, and of these 3227 or 35% died within the first week of life. Such clinics should provide a service for expectant mothers as well as post-natal care and advice. They further advised that the government conduct an experiment by establishing a clinic in one selected area first.(Crockett:3: VPRS 9291P1/17/T/6, pp 38, 40) There was evidently no immediate response to the committee's advice.

The following year, in May 1917, three women in a voluntary capacity opened the first baby health clinic in Victoria in a shop front offered by Richmond Council. By 1918 a voluntary body, the Victorian Baby Health Centres Association had been formed to oversee and affiliate new centres now growing in number. The Public Health Dept offered little more than to pay half the salaries of qualified baby health centre sisters; local councils were expected to fund all other expenses. The State didn't extend their interest until 1926 when they formed the Infant Welfare Section and appointed Dr Vera Scantlebury Brown as the first Director. In 1946 Dr W Barbara Meredith became Director of the Maternal and Child Hygiene Section of the Health Department. When she retired in 1960, Dr Alice E. (Betty) Wilmot remained in the position until 1976. That year the voluntary aspect of the service ceased and maternal and infant welfare combined with other local health service.

The early voluntary and municipal contributions, the tardy activity of the Health Department as well as its appointment of 3 women directors over a period of 50 years, all combined to influence the unique form of the early services in Victoria.

Purpose-built Baby Health Centres

The need to construct purpose-built baby health centre buildings was not an official priority in the early years of the movement. Most infant welfare organisations felt it more important to make municipal authorities aware of maternal and infant welfare concerns and to provide funding for nurses. More often known as depots, centres could be opened in any available accommodation which fitted their needs. Even in the 1960s some were still operating from R.S.L. quarters, and in municipal and church halls. The trend to having specific purpose-built centres began in 1926, in the wake of a report submitted to the Health Minister by Drs. Scantlebury and Main, although some centres existed before this date. Once it was evident that communities were intent on providing permanent accommodation for infant welfare activities, the VBHCA made some effort to ensure that suitable buildings were constructed (Crockett: 53). No subsidies were provided to councils by the government until 1948 (Crockett: 53), when 80,000 pounds were made available for grants towards the building of infant welfare and pre-school centres. However due to scarcity of materials and restrictions imposed by the Building Materials Control Acts which were not lifted until August 1952, very few buildings were erected immediately (Crockett: 59). Before the introduction of the government subsidy, only a few centres were council initiated or funded.

Many centres of this era (from the 1920s, to the baby boom period of the 1950s) no longer survive. The few that do, stand as memorials to the determination of local women, and collectively they are an enduring testimonial to the strength of the baby health centre movement in Victoria.

HISTORY OF PLACE:

The Echuca Movement

On 25 March 1925 following petitions from Mrs McBride, the Mayoress of Echuca and many other ladies anxious to start a local baby health centre, Sister Peck, propaganda officer for the voluntary group Victorian Baby Health Centres Association (VBHCA), addressed the Echuca Borough Council and subsequently a public meeting of Echuca women. This prompted the council to agree to share with the State the cost of an infant welfare sister's

salary and to place a room at her disposal. The Echuca Baby Health Centre Committee was formed on 14 May 1925 to organise and oversee its running. The committee ladies donated many of the items needed to set it up and purchased the rest with the 30 pounds offered by the VBHCA to equip all new centres. Ladies were organised to drive the sister on her visits and the local registrar was approached for lists of new births. The selection of a sister was made by Mrs C. White, Secretary of the VBHCA.

When Sister Rodda arrived to take up her duties on 15 October, an official opening for the centre was already arranged for 17 November. The committee had also approached the local school principal to allow the sister to undertake a series of lectures in mothercraft for the senior girls and had organised a roster of volunteers to help at the centre. Official invitations to the afternoon tea opening were sent to local dignitaries, doctors, nurses and to the volunteers. A notice placed in the Riverina Herald invited the public.

After seven months of preparation and organising, the new centre was up and running on four afternoons and one morning per week in a room at the town hall. Sister Rodda was quickly accepted into the community, and within her first two weeks in Echuca she was able to report that she was visited by twelve mothers and babies, and had paid calls on 46 new born babies and two expectant mothers. Mothers of both the town and district were showing great interest and enthusiasm for the service, 'and drive in a distance of eight to ten miles with their babies'. Babies attending the Centre were 'beautiful bouncy children and greatly delight their parents by their weekly gain shown on the weight card' (Crockett 1997: 7). In addition she had given her first weekly lecture to the voluntary helpers (on bathing), distributed patterns for toddler outfits, and had been visited by all the local medicos (all of whom were men).

Sister Rodda maintained a busy schedule advising mothers on breast feeding, and soon there was difficulty fitting in all the home visits. The solution was to provide advice by correspondence to district mothers. Mothers were educated in the 'care of milk' and the 'diet of older children'. No cases of diarrhoea were reported, in spite of the heat. By December she was able to report that attendances were still growing despite an outbreak of measles which precluded many visits.

The success of the Centre seemed to be firmly guaranteed. The Secretary of the Echuca VBHCA recorded:

It was anticipated that the Centre would have to feel its way carefully and perhaps be some months before it was appreciated. On the contrary from the very start Mothers have been only too thankful to avail themselves of Sister's professional knowledge and services (Crockett 1997: 6)

Each month Sister Rodda's report documented her increasing workload and the interest of many mothers in both her practical and scientific ideas on child raising. Great interest was evinced in a 'simple binder' which would support expectant mothers in the last months of pregnancy. Sister Peck visited and demonstrated the benefits of an insect-proof cot she had invented in which a child may stand with 'no danger of falling out'. A milk cooler made from a kerosene tin and towelling was also demonstrated to mothers unable to obtain ice or afford ice chests. Poverty was clearly evident in Echuca, which at first seemed to surprise Sister Rodda. Many mothers living in surrounding areas were reliant on the family menfolk for transport and could only come to town when farm duties weren't the first priority. As a result Sister Rodda began to learn that seasonal variations in country life affected attendance numbers. In March 1926 a total of 137 babies visited the centre and she had made 46 home visits. By April fewer mothers were visiting because of the road conditions.

Breast feeding was a constant issue. She observed that some mothers were actually overfeeding their babies, while others were weaning them too early against her advice:

The greatest difficulty of all in Echuca is in trying to convince the mother that breast feeding is the birthright of the child. At the slightest provocation the baby is weaned and started on all artificial food and the mother in lots of cases does not take the trouble to seek advice as to the choice of food or how to modify it to suit her infant. In visiting last month I found several babies had to attend the public hospital or have medical attention in one case because some neighbors [sic] had advised the mother to change the food despite the fact that she had been advised at the centre as to the choice of food etc. and in other cases the thoughtless weaning of the child, overfeeding, and many other mistakes which are always being made by the ignorant mother (Crockett 1997: 8).

Community enthusiasm for the service began to spread. After Sister Rodda addressed a meeting of 44 mothers in neighbouring Rochester there were moves by the women to establish their own centre. Kyabram women were also interested.

The first annual report of the Echuca Baby Health Centre was produced eight months after its opening, detailing successes as well as failures, with the need of education for young mothers being stressed as a singlemost priority. Only 49% of mothers were breast feeding their babies. The activities at the Echuca Baby Health Care Centre in its first year of operation were an indication of how far infant welfare had progressed since the first (voluntary) centre opened in 1917.

Sister Rodda left Echuca in 1927 on her marriage and was replaced by Sister Pickering who was newly graduated and eager to promote the scientific methods taught at the VBHCA training school. Soon the committee were petitioning council for an extra room to be used as a waiting room to cope with increasing visits. After her resignation in June 1928, the service was kept going by relieving sisters for almost a year until Sister Edith Dawson arrived in April 1929. Intending to stay for only three to six months she remained for sixteen years. In October 1930 she reported that 75 % of babies attending the centre were breast fed. In 1937 she was provided with a car to undertake duties which now extended to the neighbouring town of Rochester. In February 1939 a tax free car was purchased for her use by the committee from donations, with the council subsidising the running costs. Sister Dawson left Echuca to work with Dr Scantlebury Brown in December 1944. It was a somewhat emotional departure:

When I look back, Infant Welfare was a wonderful challenge, and a great achievement. ... One felt one had done wonders if she had shown the mother how to produce a cool safe from the old fashioned kerosene tin; given some gentle stimulation to assist breast supply, washed an odd napkin or two, plus the baby. In short, given complete moral and down to earth support to a weary mother. ... In my 16 years at Echuca there was a drought, the depression and second world war. The girls I addressed on mothercraft at the High School when I went there were attending the centre as mothers, and daughters of the mothers of 1929 were receiving lectures at the High School by the time I left. I was loathe to leave them. Dr Vera invited me to go, but it took 3 days to say goodbye before I was on the road to Melbourne. I had made many friends (Crockett: 31; Infant Welfare Section Newsletter, April 1973: 14-15).

By that year, 1944, there were well over 150 centres in Victoria, most operating with the assistance of councils, with some maintained by the Country Women's Association. In a serious effort to reach more women in remoter parts of the bush, one-nurse vans had been introduced from 1942. By 1944 four mobile units were visiting 84 country townships, covering 1700 miles per fortnight.

When Dr Scantlebury Brown visited Echuca in 1944 the baby health centre was still situated in two rooms at the Town Hall. She noted the large number of mothers on attendance and the pressing work of Sister Dawson and her volunteers. Despite the overcrowding, however, the centre was well equipped and up-to-date, its toddlers' scales representing the latest adjunct to infant welfare work (Crockett: 44; Vera Scantlebury Brown Papers, undated newspaper cuttings).

The need to construct purpose-built baby health centre buildings was not an official priority in the early years of the movement. Most infant welfare organisations felt it more important to make municipal authorities aware of maternal and infant welfare concerns and to provide funding for nurses. Centres were often known as depots that could be opened in any rooms which fitted their needs. Even in the 1960s some were still operating from R.S.L. quarters, and in municipal and church halls. The trend to having specific purpose-built centres began in 1926, in the wake of a report submitted to the Health Minister by Drs. Scantlebury and Main, although some centres existed before this date. Once it was evident that communities were intent on providing permanent accommodation for infant welfare activities, the VBHCA made some effort to ensure that suitable buildings were constructed (Crockett: 53).

Echuca's New Purpose-built Health Centre

After the Echuca Baby Health Centre became a full time service in 1947, it soon became evident that the two rooms at the Town Hall were insufficient for its needs. In October 1948, the Echuca committee wrote to the Mayor of Echuca requesting assistance with a Building Appeal:

That a modern, self-contained building is urgently needed in Echuca will surely be appreciated at a glance at the attendance figures of mothers and children at our local Centre; and an inspection of the two small rooms and few conveniences at the disposal of Sister and her small band of voluntary helpers would dispel any further doubt (Crockett: 44; Echuca Baby Health Centre Committee Minutes - Correspondence File 26.10.1948).

A campaign was started, but fund-raising proved to be difficult, as the local hospital was competing simultaneously for community donations. Violet Hartvigsen, Secretary of the committee, suggested enlisting the

support of the Echuca Rotary Club. In June 1949 she appealed to the organisation with the following letter:

The Committee of the Baby Health Centre - a band of frail women - are struggling to raise \$2000. ... We see that when it comes to raising large sums that we must look to our "strong silent brothers". ... Could you again help us with a similar carnival to last year. You will have twenty committee women right behind you and ever so grateful for your help. Being proud fathers - or if you are not, you should be - you realize that through the advice given by Health Centres, the old days of floor-walking baby for four or five hours ... are now gone. So up, fathers! and show your gratitude and assist us again. One of your humble sisters, VH (Crockett: 44-45).

Not only did Rotary agree to assist them with a second carnival, but also offered 'to short circuit the red tape of officialdom' by taking over the financing and organisation of the building (Crockett: 45; Riverina Herald 30.8.1949). However the site for the new premises, as well as the design for the new building became problematic. After months of negotiation in which some councillors prevaricated over the proposed encroachment of the new building on public land, or rejected the project altogether, Alton Reserve was eventually approved because 'mothers and babies went there, and the grounds were never crowded'. It was centrally situated at one end of the commercial centre of Echuca, bounded by a church on one side and a primary school on the other. While allowing Alton Reserve to be used for these purposes, the council provided no funding for the building.

Architectural drawings for the proposed new health centre building were displayed in the pages of the Riverina Herald on 15 August 1949 (Crockett: 47). The plan indicated that the structure was to be symmetrically arranged with double door entrances and porches on either side of a front projecting waiting room. The entrances were specifically designed to easily enable pram access. To one side of the waiting room was the consulting room leading to a cubicked 'test room'. To the other side of the waiting room was a spare utility room. At the rear were kitchen, toilet, wood and, tool rooms. In the elevation drawing, the new centre presented like any typical house built during the austere period following the Second World War. The hipped roof is tiled, the brick fabric is rendered, and the windows metal framed. There is a chimney rising from the centre of the projecting waiting room, and the porches on either side are curved and have flat roofs.

In the same month the Rotary club commenced their appeal, asking for funds, materials and labour, as well as for community enterprise to get the job done quickly. Local businesses responded with offers of free cartage, sand, screenings, and electrical fittings. When works actually commenced forty-three volunteers finished the foundations in one day. Youth organisations ran picture nights and balls, and local sports and other service clubs offered their assistance. The baby health centre committee supplied food and drink for the working bees and continued their fund-raising efforts. The local sawmilling company, Evans Brothers, provided their milling facilities as a donation, while workers gave their time free of cost. A photo in the Riverina Herald shows voluntary workers sawing timber for flooring and other construction purposes (Crockett: 46; 14.11.1949).

Funds for purchasing materials were slow to accrue, and materials were in short supply and expensive, in the aftermath of the war. An initial amount of \$500 had been raised in 1948, and Rotary had donated the previous year's carnival takings of \$136.15.0d. as well. On top of this there was the \$1000 maximum pledged by the State Government. Another carnival was organised for 5 November 1949 which attracted more than 2000 people and added almost \$300 to the building fund. Carols by candlelight and other fund raising efforts raised more money. Finally, it appeared completion of the building wasn't held up by lack of money but by problems with material and labour shortages. The new centre finally opened on 30 September 1950 when the keys were ceremoniously handed over to the Echuca Council. A fete held on the day of the opening raised further funds, and members of the community were called on to subscribe towards any item of furniture for the building. The event was of such significance to the community that the ceremony was broadcast by the Deniliquin Radio Station 2QN.

Sister Berryman tendered her first report from the new health centre in October 1950:

I would like to say how much I appreciate the pleasure of working in our fine new Health Centre, the mothers also are most appreciative of the new Centre, and the extra facilities available to them, the play room and toys for the toddlers and pre-school children are a great attraction to them (Crockett: 49; Echuca Baby Health Centre Committee Minutes, Correspondence and Sisters' Reports).

The Centre continued to operate for nearly 50 years.

Summary dates:

1909 Talbot Milk Institute (charitable funding from grants)

1916 Committee report advises on setting up centres

May 1917 3 women open volunteer centre in Richmond

1918 Victorian Baby Health Centres Assoc. (voluntary)

1926 Vic govt forms Infant Welfare Section - Dr Scantlebury Brown

1926 First purpose-built centres open

1946 Dr Barbara Meredith - Director of Maternal & Child Hygiene Section of Health Dept

1948 Government introduces subsidies to councils to establish centres

1960 Dr Betty Wilmot, Director until 1976

Extent of Registration

NOTICE OF REGISTRATION

As Executive Director for the purpose of the **Heritage Act 1995**, I give notice under section 46 that the Victorian Heritage Register is amended by including the Heritage Register Number 73 in the category described as a Heritage Place:

Former Baby Health Care Centre, Alton Reserve, Hare Street, Echuca, Campaspe Shire Council.

EXTENT

1. All of the building marked B1 on Diagram 73 held by the Executive Director.
2. All of the land marked L1 on Diagram 73 held by the Executive Director being Crown Reserve RS 9444, Crown Allotment 2B of 22, Parish of Echuca North reserved for the Infant Welfare Centre.

Dated 2 March 2006

RAY TONKIN
Executive Director

[Victoria Government Gazette G 9 2 March 2006 459]

This place/object may be included in the Victorian Heritage Register pursuant to the Heritage Act 2017. Check the Victorian Heritage Database, selecting 'Heritage Victoria' as the place source.

For further details about Heritage Overlay places, contact the relevant local council or go to Planning Schemes Online <http://planningschemes.dpcd.vic.gov.au/>