

Chapter Two

***Major-General Rupert Major Downes CMG VD MS
KStJ***

***Second Commissioner of St John Victoria District,
1920-1945***

On 5th March 1945, in a severe rainstorm, an RAAF Hudson crashed into the sea two miles north of Cairns airstrip, killing all on board. The pilot had advised against flying in the storm but his high-ranking military passengers were keen to travel. This was particularly so for Major-General George Vasey, who was on his way to the battlefield in the closing stages of the War in the Pacific. In all, eleven military passengers died, including Major-General Rupert Downes, the subject of this chapter.^{1,2} This tragedy cut short the life of one of the most remarkable men in St John history.

Rupert Major Downes, surgeon and soldier, was born on 10 February 1885 at Mitcham, Adelaide, youngest of fifteen children of Major General Major Francis Downes and his wife Helen Maria, née Chamberlin.¹ Reflecting the severe infant mortality of the day, only five of the fifteen children survived infancy.¹⁶

Major-General M F Downes (1834-1923) was a graduate of the Royal Military Academy at Woolwich in 1852, initially appointed to the Royal Artillery.³ He served in the Crimean War and later became an Instructor in gunnery. Whilst in command of a troop of horse artillery he was offered the post of Military Commandant in the colony of South Australia for which he was promoted to Lieutenant-Colonel. After four years, instead of returning to Britain, he agreed to continue in the role and retired from the British Army as an Honorary Major-General. He remained as Commandant in Adelaide until 1885, the year of Rupert's birth, when he took up an appointment as the inaugural Secretary of the Department of Defence of the Colony of Victoria. This



Figure 19 : Victoria Barracks, Melbourne, built c.1865.



Figure 20 : Statue of General Gordon who died at Khartoum in 1885.

appointment is an important event in Australia's Defence history because Victoria was the only colony ever to have maintained a Department of State concerned solely with matters of Defence. The present Commonwealth Department of Defence has its historical origins in this Department.

Downes senior initially had his office in the Treasury Place building occupied by the Minister for Defence, whence it had been moved from Victoria Barracks two years earlier in the midst of a conflict between the Minister and the Victorian Military Commandant who saw himself as answerable to the Governor rather than to politicians.

Downes not only had to deal with the residual sensitivities of this issue but also with the perceived threat of a Russian invasion requiring fortifications and artillery emplacements at Point Nepean and Point Lonsdale covering Port Phillip Heads. Circular gun emplacements can still be seen on the headland in Point Nepean National Park and on South Channel Fort. The Pope's Eye Marine National Park is another artificial island partially constructed as part of these fortifications before the project was abandoned when the threat diminished.

In 1885 he was also a prime mover in the successful campaign to erect a memorial in Melbourne to the death of General Gordon at Khartoum. The heroic statue stands in a small park between Parliament House and the Treasury Building, two of our finest Victorian buildings. Although people today are barely conscious of the north African "troubles" of the nineteenth century and may wonder why Melbourne has such a grand monument to a forgotten, distant war, the statue is a reminder of the strength of British Colonial ties. It is also a reminder of the great influence wielded by powerful people in the establishment, and of the "networking" of the day. What happened in one part of the Empire affected all the other parts, not only because it was the Empire but also because the players were often kin. Gordon and Downes had been friends at Woolwich College, had served together in the Crimean War and later at Sandhurst.

A year later, in November 1886, his office was moved back to Victoria Barracks. Downes managed these issues well, and his services were greatly valued, but he was unhappy with paper

work and he declined to renew his appointment at the end of his three year term. He was immediately offered his old post as Military Commandant in South Australia, which he accepted. He remained there from 1888 to 1893. He retired at the age of 59, to live near his son, Robin Downes, at Geelong. He and his wife moved to Brighton two years later on advice about his wife's health.³

In 1899 the Victorian Government sent a contingent to the Boer War at the same time as the Military Commandant retired and they were negotiating the transfer of the Victorian Army into the Australian Army at federation. As a transitional measure they prevailed upon Downes to serve temporarily as Military Commandant of the Victorian Army until permanent arrangements were made after federation. He remained in this post until final retirement in 1902. By this strange quirk of fate he thus became the last Commandant of the Victorian Army and the Commanding Officer of Surgeon-Major George Horne. Horne was in charge of the Militia medical service and became the first Commissioner for St John in Victoria.

It was in this quintessentially British military household where Rupert Downes spent his childhood, and from an early age it was clear that he would follow his father's footsteps. When the family moved to Brighton he was ten years old.³ Rupert was educated at Haileybury College, Melbourne¹

When still at school, he had joined the Victorian Voluntary Field Artillery (St.Kilda "B" Battery) as a trumpeter, and in that capacity at the age of 16, took part in the ceremony of the opening of the first Australian Federal Parliament by the late King George V (then Duke of Cornwall and York) in 1901⁴

He entered the University of Melbourne Medical School and was resident at Ormond College. He graduated MB.Ch.B. in 1907. Also in his class was Dr Arthur Sherwin, a resident of Trinity College, who became his close friend and Best Man at his wedding. Sherwin was later to become Victorian St John Commissioner after Downes's death. As a student Downes served in the Melbourne University Rifles, and in July 1908 he was commissioned as a captain in the Australian Army Medical Corps.¹

The first six years of his career were fruitful and happy ones. Army medical activities could occupy only a part of his time while he was in the volunteer forces, and so his remaining time was occupied in private practice, in teaching as a demonstrator in anatomy at the University of Melbourne, in tutoring at Ormond College, and working as a clinical surgical assistant at the Melbourne and Children's Hospitals.

In 1911 he obtained the MD higher degree in medicine. In 1912 he was successful in the examination for the Master of Surgery degree in the University of Melbourne. At the same time he threw himself into the work of the Australian Army Medical Corps, being promoted major in 1913.¹

On 20 November 1913 he married Doris Mary Robb, the daughter of Arthur and Ethel (nee Richardson) Robb. The wedding took place at St John's Church, Toorak. They subsequently had three children : Rosemary (Mrs Campbell), Valerie (Mrs Howse), and John.

It seemed likely that before very long he might look forward to an appointment on the honorary surgical staff of the Melbourne Hospital. This, however, was not to be, for with the outbreak of war in 1914 he joined the Australian Imperial Force and went abroad.⁵ When the Australian Imperial Force was raised in 1914, Downes was given command of the 2nd Light Horse Field Ambulance and promoted lieutenant-colonel, the youngest in the AIF. During training and preparations at Broadmeadows before sailing for Egypt it was re-designated the 3rd Light Horse. He led this unit on Gallipoli where he won a name as an outstanding commander.¹

On the formation of the Anzac Mounted Division in March 1916, Downes became its Assistant Director of Medical Services with the rank of colonel. General Harry Chauvel had a policy of placing proved Australians in key administrative positions affecting the wellbeing of the troops. Thus, when he formed the Desert Mounted Corps in 1917 he brought Downes with him to run his medical services.⁶ Downes was appointed Assistant



Figure 21 : Light Horse Field Ambulance in Palestine, 1917.



Figure 22 : Colonel Rupert Downes.

Director of Medical Services of the Desert Mounted Corps, and also Assistant Director of Medical Services of the Australian Empire Force (Middle East), based in Egypt, successfully combining the two roles for the remainder of the war.^{6,1}

Downes was remarkable as innovator and organizer.¹ He devised methods such as the use of camel cacolets and sledges for transport of casualties over the soft sands of the Sinai Desert. Cacolets were couples of stretchers counterbalanced on each side of the camel by a yoke across its back. They were very unpopular with patients because of motion sickness but they were effective where vehicles could not travel. By division of a light field ambulance into two sections, a mobile and a tented, he was able to overcome the lack of a casualty clearing station and provide immediate treatment for casualties at the scene of action before conveyance back over the long stretches of desert to the tented section. In the swift advances which resulted from Allenby's later victories in Palestine and Syria he surmounted great difficulties in transporting casualties over tremendous distances with the aid of motor ambulances.⁴

In the Jordan Valley in 1918, his anti-malarial measures kept sickness at acceptable levels; and he was greatly assisted by the Anzac Field Laboratory which he had raised in 1916.¹ He also organized a mobile surgical unit which was able to provide skilled surgical attention in the forward areas, thus foreshadowing the present-day mobile surgical team.

He took vital steps to reduce the danger of dysentery and cholera, while his anti-malarial campaign was so vigorous and successful that the Desert Mounted Corps was able to garrison the Jordan Valley during the summer of 1917 and advance to rout the Turks at Damascus in the winter of 1918.¹ During the battle for Es Salt in May, he requested pilot Ross Smith to drop medical supplies in tyre tubes from the aircraft, and reported in his diary that this had been a success.⁶

His most challenging difficulties occurred at Damascus. After a two hundred miles advance through country previously occupied by the Turks, the troops became heavily infected with malaria and an outbreak of influenza. The influenza epidemic

went on to kill 20 million people worldwide, and was unexpectedly more severe in young persons compared to the usual pattern of greater severity in the elderly. This, coupled with the capture of enemy sick and wounded who were without medical attention, presented an immense problem.^{4,1} There were also considerable difficulties with Colonel T.E.Lawrence, Lawrence of Arabia, advocating on behalf of Arabic political leaders. Stricken himself with malaria, Downes remained at his post and carried the medical service through one of the most difficult and trying periods of its history. In a letter to his wife General Chauvel said he, himself, kept going “by the Mercy of God and the loyalty of Rupert Downes”.⁶

Downes was mentioned in dispatches six times. In January 1918 he was awarded the C.M.G. At the same time his wife, Doris, was awarded the O.B.E. for her work among soldiers' families.

After the War he was invited to write the section on the Sinai and Palestine campaign in Volume I of the Official history of the Australian Army Medical Services Colonel A G Butler, the editor of the history wrote, “*When, in the early stages of the work, Colonel Downes was invited to write on the medical history of the Light Horse, he wished to tackle the job on the lines of a series of self-contained studies on various problems, which should be related to events and operations by a general narrative. My own plan for the history, as medical editor, envisaged a direct and immediate association of professional and technical problems with the actual course of military events. Though it went against his own opinion and preference, Downes accepted without demur, though with regret, my views on the writing of his section (which was, and I think still is, the most exact study yet made of Light Horse medical work)*”^{8,9}

While engaged in this work he was attempting to rebuild his surgical practice in Melbourne.¹ The Medical Journal obituary reports that he was an applicant for a vacancy on the staff of the Melbourne Hospital as an outpatient surgeon. “*Although he was still a young man, there were other applicants a little younger who were thought to be of the age more suitable for appointment, having in view the age at which they would become eligible for in-patient surgeon appointments, and Rupert Downes did not*

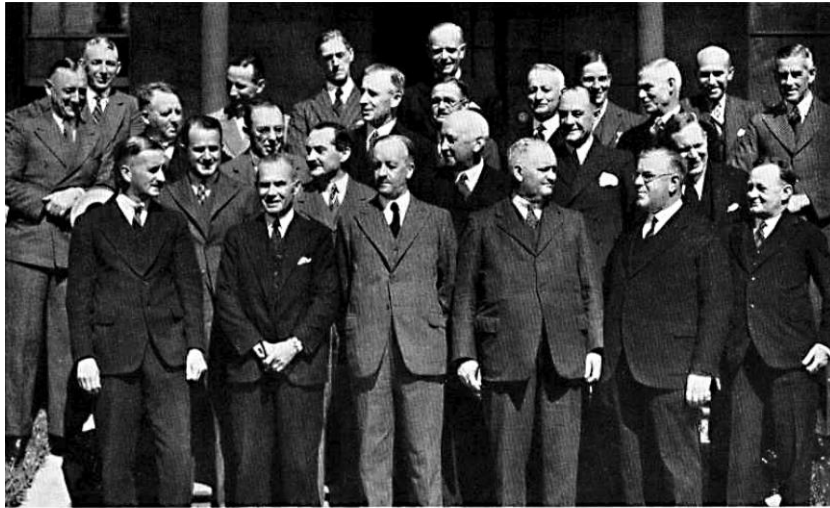
receive an appointment. He felt this very much, but it was characteristic of his nature and code of behaviour, that he remained friendly with his younger successful competitors and advanced their interests when it lay in his powers to do so.”⁵

Downes became an honorary consulting surgeon at the Children's and Victorian Eye and Ear hospitals, honorary surgeon at Prince Henry Hospital, and in 1927 a foundation fellow of the College of Surgeons of Australasia. ¹ As an honorary surgeon to the Children's Hospital he took an active part in setting up the orthopaedic hospital at Frankston. ⁵

With the retirement of Lt-Col. George Horne in 1921, Colonel Rupert Downes was appointed Commissioner of St John Ambulance Brigade, Victoria District. He remained in that role for a record 25 years. This record will never be broken because nowadays these appointments are triennial with a maximum of two re-appointments.

Downes passion for military medicine had taken him back to the post-war army in 1919 as an area medical officer. In 1921 he was a member of the committee planning reorganization of the Army Medical Service and the employment of the profession during an emergency. He was also appointed Deputy Director of Medical Services, 3rd Military District (Victoria)¹. His surgical connections with various hospitals enabled him to meet young doctors and stir them with something of his own enthusiasm, producing a continuous stream of applicants for commission. But he realized that war experience was often a valuable asset and so induced a certain number of older men to continue on the active list.⁴

Using his great experience of mobile warfare, he held tactical exercises which stimulated the keenness of the young medical officers. These were held approximately twice a year and actively involved medical officers of all grades. Carefully prepared in conjunction with the General Staff, these exercises were of considerable value in bringing the medical service into



Medical officers attending tactical exercise April 1936.

Front Row: Lieut-Colonel W. A. B. Steele, Major-General O. F. Phillips, Major-General R. M. Downes, Brigadier J. L. Hardie, Colonel F. A. Maguire, Lieut-Colonel W. Vickers.
Second Row: Major A. W. Morrow, Colonel A. L. Buchanan, Colonel N. L. Speirs, Major R. W. Walsh, Colonel G. W. Macartney.
Third Row: Major R. L. Bennett, Colonel H. N. Butler, Major E. L. Cooper, Colonel W. H. Donald, Colonel E. R. White, Colonel J. A. H. Sherwin, Colonel D. M. McWhae.
Back Row: Lieutenant A. Christie, Lieut-Colonel K. B. Fraser, Lieut-Colonel W. W. S. Johnston, Colonel S. R. Burston, Colonel C. G. Shaw, Lieut-Colonel J. Steigrad, Major K. A. McKenzie.

Figure 23 : Medical staff at Tactical Group exercise in 1936.

closer relationship with other branches. Quite a large proportion of the medical plans actually adopted to meet the threatened Japanese invasion was thus envisaged and tested on the ground in the years immediately preceding the outbreak of WW II.⁴ According to Major General Sir Samuel Burston, *'He was never a talker and more by example than by precept he indicated clearly what was expected of an officer of the Army Medical Corps. The officers trained by him during this period were to be amongst the most valued of the senior officers of the corps in World War II.'*¹

In 1928 Downes joined a committee appointed to examine the mobilization of Australian medical resources for war. He vigorously opposed the concept, already accepted by some, of

conscription of doctors and medical students under the direction of the minister of health.¹

In 1933 came the tragedy of the death of his only son, John, at the age of ten. John, who was a student at Geelong Grammar, contracted meningitis and (in this pre-antibiotic era) was nursed at home until his death six weeks later. The Medical Journal referred to John as *“a boy of bright and most engaging character, who was already making his mark at school with his keen brain and his skill in sport.”*⁴ Downes immersed himself in his work and shortly afterwards went to Britain and Europe to study army medical problems and developments in surgery of the brain and the central nervous system.¹

In 1934 Major-General G.W.Barber retired as Director-General of Medical Services. Downes was urged by his friends, who realized the importance of the position and his outstanding qualifications for it, to apply for the appointment.⁴ Downes was appointed in August 1934 and was promoted major general next year. In the words of Dr A.J.Hill, *“His earliest ambition of being a regular soldier was achieved, but at the cost of relinquishing his surgical practice. He began work under the shadow of the death of his only son and when the army was starved of men, money and equipment. All his training, experience and interests combined to fit him for his new post at a time when war seemed imminent. He was one of the leaders of his profession, widely read and of great physical energy. He was soon to show that he was also a man of vision”.*¹

In the five years to the outbreak of war in 1939, Downes selected and trained many leaders of the Australian Army Medical Corps, foresaw civil as well as military medical problems, planned their solution and pioneered major developments in the medical side of recruitment.

He was chairman of the board which in 1935 reorganized army medical equipment. On his initiative funds were provided in 1939 in time to import large quantities of drugs such as quinine, and equipment before war began. It also encouraged local manufacture of many other items of equipment.^{1,7} For example, he was responsible for arranging mass production and implementation of blood collection and transfusion sets of one

liter capacity instead of the traditional English pint, for which he endured significant criticism only to be ultimately proven correct in his judgment. His report foreshadowed the wartime control later effected through the Medical Equipment Control Committee.

His work in relation to the coordination of military and civil medical services was equally notable. Early estimates were that, on mobilization, 1160 medical officers would be required, with a 10% reinforcement rate. The civilian community would be allocated one doctor per 3000 instead of the ideal rate of one per 1500, which could be readily achieved because at the outbreak of war Australia had 5610 doctors providing a one in 1244 ratio.^{7,10} He had the help initially of only two regular staff officers and he co-operated with Dr J. H. L. Cumpston, Commonwealth director of health.¹ At the peak of the war the Australian Army Medical Corps had a total strength of 32,000 including 2500 doctors, 3500 nursing sisters and 900 non-medical officers.¹⁰

Downes interest in training was felt throughout the Medical Corps. In 1936 in the first major tactical exercise for medical officers, for five days the medical problems of a Japanese invasion were studied on the ground between Goulburn and Wollongong. He also looked into the future when, in 1937, he called for a report on the medical and hygienic aspects of the Territory of New Guinea.

Outside his heavy military commitments, Downes was also extraordinarily energetic. He was Commissioner of St John Ambulance Brigade in Victoria from 1921 until his death in 1945. In 1921 he also joined St John Ambulance Association for teaching first aid to the public, and was President for eight of the years between 1929 and 1942.¹¹ He also fostered the development of women's services such as the Voluntary Aid Detachments over a long period of time.^{1,12} For many years he was a member of the Board of Victorian Civil Ambulance Service, and was President

for the years 1937-1938.¹¹ He was chairman of the Masseurs' Registration Board, a councillor of the Victorian division of the Australian Red Cross, and chairman of the Red Cross National Council in 1939.¹

His outstanding services to the Order of St John were first recognized in 1929 by admission as Commander, and in 1937 by promotion to Knight of Grace.^{1,11} At this investiture by the Governor, Lord Huntingfield, other recipients included Dr John Newman-Morris (father of Sir Geoffrey Newman-Morris, a subsequent Commissioner), who became a Commander, Mr Frederick Raven (State Superintendent) who became an Officer Brother, Mrs Doris Mary Downes who became an Officer Sister, and Mr Bill Fyfe (Superintendent of Caulfield Division) who became a Serving Brother.

In the massive bushfires of January 1939, when much of the Eastern half of the State was ablaze, his role was noted in the newspaper reports in the following words, *“A relief convoy left Red Cross Headquarters in the city this morning to rush medical aid, clothing and food to Wood’s Point. The route taken was over the Black Spur and through to Jamieson. A Forest Commission gang went ahead in a truck to clear the road. As it might be necessary for doctors to push ahead on horseback to take medical aid to people injured and burned in the devastated hill country around Wood’s Point, pack saddles were taken with the convoy. Horses will be picked up along the road. Splendid work in giving first aid is being done by the St John Ambulance Brigade of volunteers. St John Ambulance motorcycle outfits and cars carrying medical supplies are operating in eleven country centers. The Commissioner of the St John Ambulance Brigade, Major-General Rupert Downes, who is also Director-General of the Australian Army Medical Services, has gone to the country to supervise the work of his helpers. He is accompanied by the Secretary of the organization (Mr F.F.Raven). The military authorities have offered the State Government all the army medical service resources available.”*

Downes served on the Victorian Branch Council of the British Medical Association for many years and was elected President in



Figure 24 : Commissioner-in-Chief, Colonel Sir James Sleeman, 1936

1935. He considered this as one of the greatest tributes paid to him by his fellow practitioners. He was proud of his selection by the Council as a suitable member for appointment at the Melbourne Medical School to give a short series of lectures on professional conduct and medical ethics.^{1,5}

He was the person most responsible during the late 1930s for setting in motion the train of events that eventually led to the formation of the Australian Priory of the Order¹³ These events are extensively described by Dr Howie-Willis in his book, “A Century for Australia” and a paper entitled “The federal movement in St John Ambulance Australia” published in the 2004 Proceedings of the St John Historical Society.^{14,15}

The idea of St John in Australia being a self-governing nationwide organization had been under discussion for almost two decades. The New South Wales Commissioner, Dr Thomas Storie Dixson had proposed a Central St John Council for Australia and convened a number of meetings between 1921 and 1923 at which Downes was a Victorian delegate. Although the eastern states were keen on the idea, Western Australia declined participation. They preferred to remain answerable to the Priory in England. The distance from England meant that they already had a fair degree of autonomy, whereas they feared that if they belonged to an Australian organization they would be poor cousins of the powerful eastern states. This was at a time when it took a couple of days to travel to the eastern states and the separatist sentiments in the west were quite strong.

This dissent caused some consternation in England and the Commissioner-in-Chief of the Brigade Overseas, Colonel Sir James Sleeman, made an exhaustive visit to all States to ascertain whether Australia was ready for self-government. The visit to Victoria was described in the 1936 Annual Report of SJAA in the following terms, “*Representing His Royal Highness, the Grand Prior, the Duke of Cornwall and Strathearn, the Chief Commissioner of St John Ambulance Brigade Overseas, Colonel Sir James Sleeman visited Victoria and inspected the Brigade and Association activities.*

During Colonel Sleeman’s stay in Victoria he was the guest of His Excellency, the Governor, Lord Huntingfield, at Government

House, St Kilda Road, Melbourne. The itinerary, which was carried out under very favourable weather conditions, embraced a civic reception by the Right Honorable, the Lord Mayor of Melbourne, a Public Reception at the Town Hall, Melbourne, at which approximately 2000 members of the community, including 500 St John personnel attended. At the latter gathering, Major-General R.M.Downes CMG, Commissioner of St John Ambulance Brigade, welcomed our distinguished guest and expressed the loyalty of all ranks to the Order of St John. Colonel Sleeman in his reply gave a most enlightening account of the history and work of the Order, which was broadcast through the courtesy of the Wireless Broadcasting Commission. Items of music, ably rendered by the Metropolitan Fire Brigade's Band, and a First Aid demonstration, were included in the program.

In order to gain first hand information on the advisability of the formation of a Commandery in Australia, representatives of the Association and Brigade met in conference at Headquarters. Colonel Sleeman was Chairman, and his knowledge of this subject was enlightening, and all present benefited considerably.”¹⁷

The Sleeman report paved the way for Commandery status but highlighted the need for collaboration between the States. After Sleeman's return to the UK, discussion between the state St John bodies continued. The main instigator of the negotiations appears to have been Rupert Downes who wrote a number of letters in support of federating. There is little doubt that Downes saw an important role for St John volunteers in wartime as had already been proven by the Voluntary Aid Detachments (VAD) in WW I. With himself as Commissioner, his District Surgeon Colonel Arthur Sherwin as State Comptroller of VAD, and the District Superintendent Frederick Raven as the State Deputy Comptroller and state Organizer of VAD, St John was in a powerful position to bring this vision to fruition.

Dr Howie-Willis noted: *“In March 1939, with war becoming more likely by the day, Downes travelled to the UK for discussions with his British counterparts about placing Australia's medical services on a war footing. As the St John Ambulance foundations, and more especially the Brigade, also had a military function, providing ancillary support for the*

medical services of the armed forces, they too figured in the planning. It was this function that finally made an Australian St John Commandery possible. In early July Downes wrote to the Australian St John bodies to tell them there was little hope of their playing their appointed wartime role unless they federated. He also visited St John's Gate and made the same point there, telling the secretary-general of the Order, Sir Percival Wilkinson, that 'it is impossible [for the Defence Department] to deal with six separate Brigades [in Australia]'. His message was plain: if the leadership of the Order wanted the Australian St John bodies to serve an effective national function in the coming conflict, they must agree to the immediate formation of an Australian Commandery. Coming from one of the most respected Australian St John figures, this was advice that no one could ignore. To add emphasis to his message Downes argued that the matter was so critical for St John that a Commandery consisting of only several states was preferable to no Commandery at all. Further, to continue negotiating with the reluctant states in hope of bringing them all into the Commandery 'would take so long that under the present conditions of urgency it might be too late'. In short, form a Commandery of several states immediately or forget about a prominent wartime role for St John Ambulance in Australia! It was this advice that finally galvanised both St John's Gate and the state St John bodies into the action they might otherwise not have taken for years.”¹⁵ St John's Gate authorized a Commandery for Australia (excluding Western Australia), which was finally proclaimed in 1941.

The 1941 Annual Report of the Association in Victoria reports :
“We have been advised by His Excellency the Governor-General, Lord Gowrie, through His Excellency the Governor of Victoria, that our petition has been successful and that all States of the Commonwealth, except Western Australia, are embraced. (Western Australia Centre did not participate for geographical reasons). The establishment of the Commandery has now brought the status of the Order in Australia into line with the dominions of Canada, New Zealand and South Africa.”¹⁸

General Downes became a foundation member and was a member of both the Council and Chapter.¹¹ Notwithstanding

that Australia had become a Commandery, Certificates continued to be issued under the name of Grand priory.

His 1939 overseas trip visited military and other medical centres in India, the Middle East and Britain, returning in October. He was convinced on his departure that war would come. By the time of his return it had already been declared. While in London, he took steps to obtain the services as consultants of two eminent Australians, the surgeon Sir Thomas Dunhill and (Sir) Neil Fairley, an expert in tropical diseases. Foreseeing the scale of the war, Downes began to press for the building of major military hospitals in the capital cities. He argued that after the war they should be handed over to the Repatriation Commission for the care of sick and disabled ex-service people. Despite strong opposition, especially on the grounds of cost, Downes persisted in his advocacy until in October 1940 he won his case. Time vindicated his judgment: the great hospitals such as Concord and Heidelberg are Rupert Downes's memorial.¹

He revolutionized the medical side of recruiting for the Australian Imperial Forces. Radiography of the chest was introduced, by means of fluorographic screens photographed on miniature film, despite controversy about the diagnostic accuracy of the new technique; and everyone was x-rayed. Every soldier's blood group was determined and recorded on his identity discs and all were inoculated against tetanus, smallpox, typhoid and paratyphoid fevers. Downes was also concerned that volunteers should be medically examined under proper conditions. He had to cope with 'the reluctance of some staff officers to regard the Director General of Medical Services as the responsible technical adviser on medical affairs' and there were difficulties with the adjutant general to whom he was responsible. It must have been a solace when Burston wrote from the Middle East: *'I think it is safe to say that there has probably never been a force sent overseas from any country better equipped on the medical side'*.¹

In November 1940 Downes was appointed Director of Medical Services, A.I.F. (Middle East), but General Sir Thomas Blamey had already appointed Brigadier Samuel Burston to that post, so Downes' appointment was withdrawn. There the matter rested until March 1941 when Downes was made Inspector-General of medical services by the minister of the army, (Sir)

Percy Spender, without reference to the Military Board. While the growth of the army in Australia and of the A.I.F. overseas may well have justified such an appointment, its manner appears to have been highly irregular. Nevertheless, Downes welcomed the opportunity, implicit in the appointment, to visit operational areas.¹ After inspecting major Australian centres, he went to the Dutch East Indies and Malaya, then on to Egypt, Palestine and Syria and home through India and Ceylon. Early in 1942 he inspected medical units at Port Moresby.

When Blamey reorganized the army in March 1942, he made Burston Director General of Medical Services. Downes went to the Second Army as Director of Medical Services so that he now found himself serving under his recent subordinate and friend of long standing. Though he was in a backwater of the war, his responsibilities extended from the Queensland border to Hobart and Adelaide.¹ As Downes was almost 60 he was soon to retire, but he was invited to write the medical history of Australia in the war. He accepted enthusiastically and began work on the general outline of the project and obtaining, wherever possible, first hand information on the work of the armed forces. He was actively engaged in this way when he decided to accompany Major General George Vasey to New Guinea to see for himself the front-line conditions in this special phase of warfare.^{1,4}

The Cairns Post reported,¹⁹ *“The remains of Major-General G.A.Vasey, Major-General R.M.Downes and Lt-Colonel G.A.Bertram, who were lost in an air crash off Cairns last Monday, were buried in the military section of Cairns Cemetery yesterday afternoon with full military honours. Troops who had served under General Vasey in many campaigns formed the funeral guard of honour. Just before the cortege arrived the troops reversed their arms, with the muzzles of their rifles on their*



Figure 25 General Sir Thomas Blamey

toes, hands across the rifle butts and heads bowed. Motionless, they stayed like that until the funeral service was over.

Opposite the graves stood 100 Officers of the Australian Army and Air Force, many wearing decorations and service ribbons of two wars. The military band with drums draped in black, played a slow, soft funeral march. After the coffins were placed on the wooden supports across the grave tops, General Sir Thomas

Blamey, Commander-in-Chief of the Australian Military Forces, and Lieut-General Sir Leslie Morshead stepped in front of the rows of Officers. General Blamey had interrupted his tour of the South-west Pacific area to fly down to Cairns for the funeral service.

General Blamey paid a full tribute to the memory of the soldiers who had died while serving their country. Major-General George Vasey was an original member of my staff through the Middle East, through the desert, Bardia, Tobruk and Cyrenaica. (He served in Greece (and was) called upon to take over the Australian troops crossing the Kokoda Trail of the Owen Stanley Range in New Guinea. He... was one of our great soldiers, and we loved his special personality.

Major-General Downes, continued General Blamey, was one of those who worked hard for Australia during the time when many forgot that a war could occur. He worked hard to establish and maintain a high standard of efficiency in the Australian Medical Forces. He gathered round him a group of men who, by their research and by their attention to the troops have won the complete confidence of the Army. We are ready to pay service honour to soldiers – I pay tribute to our fallen comrades.”

Downes was survived by his wife and two daughters.¹ Mrs Doris Downes OBE, OStJ remained an active member of St John Council for Victoria for many years. She died in 1980.

In his dedicated career, Downes won the admiration of the medical profession in peace and war. Whatever his role, whether surgeon, medical historian or commander, he impressed men by his intelligence, his selflessness and his drive. The Royal Australasian College of Surgeons established the triennial Rupert Downes Memorial Lecture in his honour,²⁰ on “*subjects related to some aspects of military surgery, medical equipment (military and civil), the surgery of children, neurosurgery, general surgery, medical ethics or medical history : these being subjects in which Major-General Downes was particularly interested.*”

Early orators included Sir Samuel Burston, Sir Frank Kingsley Norris (both eminent St John members) and Sir Albert Coates.



Figure 26 : Maj-Gen Rupert Downes

To the amazement and dismay of his colleagues, his services from 1919 until his death were accepted by both the army and successive governments without any mark of distinction being bestowed upon him since he received the CMG in WW I.^{1,4} The following quote of Colonel Butler hints at the possible reason : *“Both by tradition and by temperament Downes was “a soldier to his finger tips”, with, I shall add in friendship and deep respect, the strength and the weakness of the outlook on life engendered thereby. From the professional standpoint, and that also of the medical service, this attitude may at times have had its drawbacks. This is not the place to discuss the far-reaching issues involved. But it is necessary to bear in mind this attitude when assessing General Downes’s place in Australian history”*.⁸

This final quote is from the citation of the council of the British Medical Association in Victoria recognizing his quality and his contribution to the well-being of Australian soldiers and thus to their success in war: *'His directness, his robustness, his disdain of intrigue in any form, were his inspirational qualities to a rare degree and the success of the Medical Service in this war must be credited to Rupert Downes'*.¹