

## Medical History

# Two centuries of medical benevolence: the Norfolk and Norwich Benevolent Medical Society 1786-1986

ANTHONY BATTY SHAW

Despite the provisions of the welfare state and the availability of private life assurance and sickness and pension schemes there is still a considerable need for charitable medical benevolence. In 1986 two charitable medical organisations in the United Kingdom celebrate anniversaries that remind us of the importance of this need. The Royal Medical Benevolent Fund has planned several events to mark the 150th anniversary of its foundation in 1836 as the Benevolent Society of the Provincial Medical and Surgical Association, which in 1856 became the British Medical Association; in 1870 the Royal Medical Benevolent Fund separated from the BMA to become a society in its own right. The Norfolk and Norwich Benevolent Medical Society, which was founded 50 years earlier and claims to be the oldest surviving benevolent medical society in the United Kingdom, marks its 200th anniversary with a birthday party and publication of its history.<sup>1</sup>

### The evolution of benevolent medical societies

The first medical benevolent societies were formed in the eighteenth century and reflected two social changes. Firstly, from the seventeenth century onwards various professions and trades had voluntarily formed friendly societies as mutual aid organisations to protect their members against debts incurred through illness, death, or old age. Secondly, many advances had been made in medicine. These included the organisation of medical practitioners, the formation of many medical societies to aid scientific advancement of the profession, the encouragement of social exchange between members of such societies, and the provision of medical libraries. Several early medical scientific societies made provision, as some still do, for the benevolent needs of their members, and some benevolent medical societies held scientific meetings. Generally, however, scientific and benevolent medical societies tended to be separate organisations, and this has been so in Norwich, where the benevolent society (founded in 1786) has always been separate from the scientific Norwich Medico-Chirurgical Society (1867), which evolved from the amalgamation of a book society (1824) and a pathological society (1848).

The first medical benevolent society in England—and possibly the United Kingdom—was the Essex and Hertfordshire Benevolent Society founded at Colchester in 1786. Colchester played a large part in the history of medical societies, as its separate scientific medical society (1774) is the oldest such society in the English provinces. The benevolent society was dissolved in 1951, and the Norfolk and Norwich Benevolent Medical Society which was formed later in 1786, thereby claims to be the oldest surviving benevolent medical society in the United Kingdom. The constitutions of both societies were used in drawing up the constitution of

the next oldest surviving benevolent society, the Society for the Relief of Widows and Orphans of Medical Men, formed two years later in 1788. Originally formed to help the destitute widows and orphans of medical men living within a seven mile radius of the city of London, this society has progressively enlarged its area of eligibility, which since 1973 has extended to any British or Irish medical graduate born in the United Kingdom or Republic of Ireland with one or both parents of British nationality. Many other benevolent societies, like that for Essex and Hertfordshire, were formed but did not survive—for example, Suffolk (1787), Kent (1787), Lincoln (1807), and Sussex (1857). It is interesting, however, and a reflection of need that at least 12 local medical benevolent societies, trusts, or funds have been established in the twentieth century, of which nine have been formed since the start of the National Health Service. These local organisations complement the activities of the guilds of the Royal Medical Benevolent Fund in the same areas and generally work closely with them.

The most comprehensive list of local and national sources of charitable medical benevolence is contained in a booklet, *Charities of the Medical Profession*, issued by the BMA. The table shows what seem to be the oldest benevolent medical societies in the United Kingdom. In addition to these, two other organisations formed in the nineteenth century should be mentioned—namely, the Royal Medical Benevolent Fund Society of Ireland (1842), which covers the needs of Northern Ireland and the Republic of Ireland, and the independent medical charity of the Royal Medical Foundation of Epsom College (1855).

### Oldest medical benevolent societies in the United Kingdom

| Year of formation | Society   |
|-------------------|---|
| 1786              | Norfolk and Norwich Benevolent Medical Society  |
| 1788              | Society for Relief of Widows and Orphans of Medical Men   |
| 1812              | Surrey Benevolent Medical Society   |
| 1821              | Medical Benevolent Society (Birmingham)   |
| 1828              | Medical Charitable Society for the West Riding of the County of York  |
| 1836              | Royal Medical Benevolent Fund   |
| 1908              | Medical Benevolent Society for the former East and North Ridings of the County of York including the City of York |

### The Norfolk and Norwich Benevolent Medical Society

The founder of the Norfolk and Norwich Benevolent Medical Society was Edward Rigby (1747-1821) of Norwich, an outstanding medical man of his day who earned a place in the *Dictionary of National Biography*. At the age of 24 he was elected assistant surgeon to the Norfolk and Norwich Hospital after its foundation in 1771 and thereafter served it as a surgeon and physician. It was, however, as an obstetrician that he earned his greatest fame through his *Essay on Uterine Haemorrhage* (1776). As well as being one of a distinguished line of lithotomists from Norwich he also introduced vaccination to Norwich. A man of many parts, he was interested in

Norfolk and Norwich Hospital, Norwich NR1 3SR  
ANTHONY BATTY SHAW, DM, FRCP, consultant physician

agriculture and the arts and was prominent in civic affairs, serving as sheriff and mayor of Norwich, where he did much for the welfare of the poor. In addition to founding the Norfolk and Norwich Benevolent Medical Society he served as its secretary, treasurer, and president and missed only two of the first 36 general meetings before his death. Under his leadership the society made a vigorous start, and within a few years 80% of the medical profession in Norfolk were members.



White wax profile bust of Edward Rigby (1747-1821) in the Sir Thomas Browne Library, Norfolk and Norwich Hospital. By permission of Norwich Health Authority.

The assiduously kept minutes of the general meetings of the society over the past 200 years survive, together with its committee minutes, save for one period of 30 years. They provide a detailed record of the activities of the society and reveal much of local medical interest, though I will mention here mainly the issues of more general interest.

The main message of the minutes is the poignancy of medical misfortunes over two centuries. The harshness of life when a medical man died or became too ill to practise, often leaving his family "utterly unprovided for" before the era of state and private insurance, is vividly brought to light. Yet despite all the social and other changes that have taken place in the past two centuries tragedies and misfortunes still assail the medical profession, and in recent years the society has on several occasions made grants that have helped stave off financial disaster for medical families. Currently the society makes two or three grants a year. Some are emergency grants that a local benevolent society is well placed to provide to meet an immediate need. Most have been to widows over 70 to help pay for nursing or residential care. A few have been to people under 30 to help with the education of children and with other needs of young families deprived of the income of their breadwinner. Unfortunately, in some recent cases brought to the society's attention the doctor had not been a member of the society, which, as it is a friendly society, had to refuse the request for help.

For the modest annual subscription of £3 any Norfolk doctor can ensure that the resources of the society will be available to him and his family in time of need.

The varying fortunes of the society are also recorded in the minutes. After a vigorous start support slowly dwindled so that during the agricultural depression in Norfolk that followed the Napoleonic wars the society's fortunes were at a low ebb. In one year there were only three members, but the society survived its fallow periods and in recent years has enjoyed its highest membership of over 200, though this figure represents only about a third of those who are eligible. The enthusiasm and energy of early members in attending meetings must be admired. In Norfolk this might have entailed a journey of 20 miles each way on horseback over the tracks or few turnpikes of the day, often during inclement weather. When fortunes have been at their lowest stalwarts in the local medical community have kept the society alive and restored its health.

Another feature of the society's history is the way in which diligent officers sacrificed their time and energy on behalf of the society and their colleagues. The officers have been relatively few for, though the office of president changed annually until 1966, there have been only 12 treasurers and seven secretaries in 200 years. In a study that I made some 20 years ago of the scientific medical societies of the United Kingdom it seemed that the health of these societies depended largely on a regular and frequent change of officers. Indeed, many societies seemed to succumb solely because some men held on to office too long. The success of the Norfolk and Norwich Benevolent Medical Society and other medical benevolent societies, however, suggests that such change is not necessary for benevolent societies.

The society's minutes also describe the importance of sound financial advice on investments and, as is seen in many other medical societies, its propensity for changing its rules. For example, four major changes were made between 1787 and 1801, two more in 1821 and 1832, and an understandable further revision in 1845, when the society registered as a friendly society and had to adjust its constitution to meet the requirements of the Friendly Society Act of 1843. Much committee and working party time was occupied in changing the rules.

### Philosophy of happiness

"Those who do not need . . . contribute towards the need of those who do." These were the words used by the secretary of the Norfolk and Norwich Benevolent Medical Society in 1832 when appealing for increased membership and describe the basic philosophy of the friendly society movement. It is the principle that motivates medical men when supporting medical benevolent organisations; it is also a description of the conduct of those medical men, their wives, and lay helpers who have done, and continue to do, so much in the cause of charitable medical benevolence. The annual reports of the Royal Medical Benevolent Fund, with their officers' reports and lists of area visitors and of officials of the fund's 250 guilds, provide cogent reminders of this contribution.

On the cover of its annual reports the first benevolent medical society in the United Kingdom, for Essex and Hertfordshire, carried the following quotation from the writings of the Reverend William Paley, the eighteenth century divine and philosopher: "The final view of all rational politics is to produce the greatest quantity of happiness in a given tract of country." This is a motto that would serve all medical benevolent societies and certainly epitomises the record of the Norfolk and Norwich Benevolent Medical Society in its 200 years of medical benevolence.

### Reference

- 1 Shaw AB. *The Norfolk and Norwich Benevolent Medical Society 1786-1986*. Norwich: Norfolk and Norwich Benevolent Medical Society, 1986.

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