

TRIBUTES TO AND REMEMBRANCES OF
PROFESSOR ROBERT ARTHUR JOHN BIDDULPH, OBE, MB BS,
DTM&H, DCH, MRCP (Edin), FRCP (Edin), FRACP
15 JANUARY 1935 TO 6 JANUARY 1998

Robert Arthur John Biddulph

The Paediatric Society of Papua New Guinea in conjunction with the Medical Society of Papua New Guinea is pleased to publish this special edition of the Papua New Guinea Medical Journal in memory of the late John Biddulph, who died on 6 January 1998 after a long illness.

Robert Arthur John Biddulph was born in 1935. After he had completed his primary and secondary schooling in England, his family moved to Australia, where he enrolled at the University of Sydney to do medicine.

In 1954, at the end of the third year of his medical course, John was awarded a studentship by Sydney University to work in Papua New Guinea during the long vacation. His experiences at Ela Beach Hospital in Port Moresby and at Samarai in Milne Bay Province were to be a turning point in his career. At the time the only doctors in the area were either on long service leave or ill and he quickly found that the medical orderlies were knowledgeable and capable of dealing with common medical problems. He would later make good use of national capabilities in planning medical services. The very high infant mortality rate from pneumonia, malaria, diarrhoea and other infections, most being untreated, made a deep impression on the young student. On returning to Sydney he decided that he would apply for a position in the Papua New Guinea Health Department on completion of his medical training.

The major influence in his clinical and resident years was the late Sir Lorimer Dods, a charismatic teacher. In an interview John remarked that "He was so different from all my other teachers. It was his humanity, his love of children, the deep concern he had for their parents and the broad concept of health and disease in the community that so impressed me."

In 1961 John set off for Papua New Guinea for what would eventually prove to be his life's work. He was first posted to the children's ward in the Lae Hospital. In 1962 came the chance of a lifetime, with an invitation to be the paediatrician in the newly established medical college in Port Moresby.

In 1965 with the support of the Australian College and a travelling fellowship he set off for postgraduate training, first in Edinburgh to obtain the necessary qualifications for recognition as an accredited paediatrician and secondly for the more important task to gain experience in paediatrics in developing countries. From the late Professor Derrick Jelliffe in Kampala he learnt the practice and teaching of both preventive and curative paediatrics in rural and hospital settings and the key role of nurses and medical assistants in service delivery. This was what he would develop in Papua New Guinea.

In 1965 he was again in Papua New Guinea. He quickly found that dehydration from diarrhoea was one of the major causes of death in children and that with limited medical officers the only solution to this common problem was to train all nurses and medical orderlies, in both hospital and rural centres, to recognize and promptly treat dehydration. He instituted a standard method of training and practice in dehydration in the children's wards of Port Moresby General Hospital with the result that the case fatality rate was reduced to 1% within six years. The standardized approach was adopted widely with improvement in fatality rates even in hospitals with a paediatrician.

In 1966 the Health Department published a pocket book for medical officers and John wrote a section on paediatrics. Standardized methods of treatment were printed on posters

and put up on the walls of all paediatric wards and given to all medical students, medical assistants (as they were known then) and nurses.

In 1974 the first edition of a pocket book for paediatric conditions was published. This manual is now in its 7th edition. These standard treatment manuals have been a major factor in bringing effective health care in all common childhood diseases to both towns and rural areas.

By 1973 the international milk companies were promoting artificial feeding in Papua New Guinea. How were the powerful milk companies to be confronted with their pernicious practices of undermining breastfeeding? Such was the respect John had within the Health Department that the Government was persuaded to pass 'The Baby Feeds Supply (Control) Act' in 1977. This act made feeding bottles available only on medical prescription. It was not until 1981 that the World Health Assembly endorsed the World Health Organization Code on Infant Feeding.

After 30 years John could look back with pride on the integrated medical and nursing services in curative and preventive health staffed mainly by nationals, in the foundation and development of which he had played a major role.

Papua New Guinea now has about 2300 aid posts staffed by community health workers who provide basic health care at village level. There are 450 health centres or subcentres which deliver maternal and child health services including treatment of all common diseases, immunization, health education and family planning.

Approximately 95% of the population are within 2 hours' walking distance from a health facility and at least 65% of the total health budget is spent on primary health care. There is a thriving Paediatric Society which holds regular meetings and is linked with the International Paediatric Association (IPA) and the Association of Paediatric Societies of the Southeast Asian Region (APSSEAR). Since 1975 a 1-year postgraduate Diploma in Child Health and a 4-year course for Master of

Medicine have been established; 43 candidates have obtained the former and 28 the latter.

John was also instrumental in establishing the Post-Basic Paediatric Nurses Training Program in the early 1970s with an output of at least 300 nurses over the years. These nurses are now able to treat common severe childhood diseases in health facilities where there are no doctors.

Administratively, John was a member of very important committees in the Health Department, the Medical Faculty of the University of Papua New Guinea (UPNG), Port Moresby General Hospital and other relevant community organizations. His input and advice in these meetings were highly valued by all those who knew him. He was awarded an OBE for his services to child health by the Queen in 1985.

Many of these developments in the provision of child health services in Papua New Guinea would not have occurred without the foresight, leadership, patience and tireless energy of John Biddulph. Some of these changes have led the world and have been adopted by the World Health Organization and by other developing countries. Sometimes these changes have been opposed but it has been John's long-term commitment, dedication and sensitivity in dealing with people of a different culture which have triumphed.

In all his work John has relied on the support and encouragement of his wife Mary, a nursing educationist, who has had an equal commitment to Papua New Guinean children.

In 1991, after almost 30 years service in Papua New Guinea, John retired and returned to Australia. He was appointed as part-time Lecturer in Child Health at the University of Queensland. Even in his retirement John was still involved in many other activities in the region and elsewhere because of his experience and was often called upon as guest speaker or advisor in conferences and workshops in Southeast Asia, the Pacific and Africa.

We had thought that we would never see him again in Papua New Guinea; however, he made every attempt to attend our Annual

Medical Symposium unless he had commitments elsewhere. He also used this opportunity to assist the Diploma and Masters in Community Health program in the Community Medicine Department at UPNG. One could never even stop him working and seeing patients during these visits. Whenever John had a chance he would cheerfully assist the paediatricians in the busy weekly paediatric consulting clinics where his experience and guidance were highly valued.

In 1993 John was diagnosed as having unfavourable leukaemia but even as his health faded he continued to make every use of his time and experience for the benefit of budding paediatricians both in Australia and the developing world, particularly Papua New Guinea. Because of John's outstanding services and immense contribution to child health services in Papua New Guinea the acute children's ward of the new wing of the Port Moresby General Hospital was named in his honour in 1994. In 1997 John was bestowed an Outstanding Paediatrician of Southeast Asia Award by the APSSEAR for his distinguished career in child health in the region. He was one of the founding members of APSSEAR and had seen it grown over the years to what it is now.

Those who had known John would remember his approach to people of various cultures both professionally and socially. He was a living example and displayed his outstanding qualities as a leader through his humility, understanding and guidance.

Parents who had met him because of their sick child would recall his caring approach to children and his concern for their parents. Professionally those who had trained under his supervision as undergraduates and postgraduates would have fond memories about the times spent with him as a teacher who had a practical approach to the basics of the medicine which he taught.

In one of his many publications, John wrote, "Child Health in the Third World is stimulating

and challenging work. It demands an ability to see opportunities where others see only problems and requires a doctor's scientific and technical knowledge combined with social understanding, managerial competence and political persuasiveness." John was the epitome of these qualities.

With his influence he made firm links with hospitals in Australia for continuing medical education for paediatricians in Papua New Guinea and Australia. Many Papua New Guinean nationals have been to Australia for both short and long-term hospital experience and have achieved valuable training over the years.

Papua New Guinea owes a great deal to the late John Biddulph, who has laid a firm foundation for child health services. Today the nation should feel so fortunate to have had such a distinguished colleague in John, who made difficult tasks easy at both policy making and implementation levels. Even though he has physically gone from us, his name and what he has done for Papua New Guinean child health services are part of history and will be remembered for years to come.

To his wife, Mary, and the children, all members of the PNG Paediatric Society and the Medical Society convey the deepest sympathy and condolences for the untimely loss of a wonderful and understanding husband and father. He was in deed a man of his times and we salute the late John Biddulph as one of our greatest inspirations and examples, a pioneer paediatrician and a distinguished citizen of the world.

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