largely because they feared it would interfere with the autonomy of the education system. A delegate at a Wellington Branch meeting in 1926 pointed out that 'Interference with the schools by various sectarian bodies in England had caused a good deal of trouble and unrest, and it was felt that the only way to avoid similar trouble in our own schools was to exclude religion altogether'.⁵ Perhaps the only major consensus in the twenties and thirties came from the recognition of the importance and power of education. The focus on education and children in this period reveals that the 'rising generation' became a matter of national as well as of international concern. The attitude to children personified by the Declaration of Geneva infused government policy.

Close and continuing links with Britain shaped the New Zealand education system and inspired government efforts to improve the health of New Zealand children. When New Zealand began to make substantial provisions for the education and care of children in the nineteenth century, the government looked overseas for ideas. Naturally, the 'mother' country provided the most accessible models. New Zealand schools, orphanages and industrial homes were based on English institutions. By the interwar years American as well as British ideas began to influence these institutions. International developments in the care of children heavily influenced New Zealand ones, but some distinctively New Zealand features emerged.

The education system and the nation's children acquired a central role in the development of New Zealand's identity. Colin McGeorge argues in 'Schools and Socialisation in New Zealand' that education contributed to a sense of developing nationhood by promoting a positive self-image as well as the development of a national speech.⁶ Colonialism and a close identification with Britain shaped that nationhood. The government used a national system of education as a tool to promote loyalty and devotion to Empire and country. In 1916 the Minister of Education affirmed the importance of education to New Zealand:

Education, being one of the most important inspiring principles, and at the same time the direct reflection of national life, finds itself in a special measure assessed by the great national test [World War One]. Whatever defects have been revealed, we find our type of manhood and womanhood vindicated and our position as a people justified by the extraordinary response of a free people to the call for national service. Our educational system in New Zealand may justly claim a great shape in the honour of sending forth thousands of our former scholars as volunteers in the great cause.⁷

The indoctrination of successive generations of school children helped to ensure that New

⁵ Bible Reading in Schools', NE, May 1 1926, p.143.

⁶ C.McGeorge, 'Schools and Socialisation in New Zealand 1890-1914', PhD Thesis in Education, University of Canterbury, 1985, p.750, quoted in Goodyear, 'Black Books and Pinafores', p.344.

⁷ Appendices to the Journal of the House of Representatives, (AJHR), 1916, E.-1A, p.1.

Zealanders volunteered to fight for King, Empire and Country.⁸ Schooling had become the civilian battlefield for the 'hearts and minds' of the population.

Despite the close links with Britain, increasingly the education system became a source of national pride and part of New Zealand's definition as a 'progressive' country. The nineteenth century sociologist, Andre Siegfreid, described New Zealand as a social laboratory. Although this statement has been quoted many times it is worth repeating because it became an integral part of the New Zealand mythology. An international comparison was a vital component of this mythology, and New Zealand preferred to compare itself with Britain. Even a cursory examination of interwar newspapers discloses an article about the superiority of New Zealand children. For example, a National Education article in 1927 had the title 'A Superior Race. Measuring Up Our Younger Generation'. It reported the contents of a medical paper that had found that 'New Zealand children show superiority in height and weight when compared with the available statistics relating to those of Australia, Great Britain, America, and Toronto'.⁹ One develops the impression that New Zealand had an admiring but ambivalent relationship with Britain. Constant comparisons with Britain seemed to prove the parent society inferior to the child. Children had become a part of the quest for nationhood, and childhood became a political issue in the interwar period. Social and moral idealism about childhood combined with the less liberal ideology of eugenics to focus attention upon children. Government polices towards children were shaped by the desire to prove New Zealand a superior country.¹⁰ Interest in childhood occurred in other Western nations, but for New Zealanders children's welfare formed an integral part of the achievement of an ideal society.

New Zealanders did not merely replicate British institutions but wished to improve them. Olssen notes, in his study of Caversham, that men and women hoped to leave behind 'the social hierarchies of England, not to mention the caste system of Ireland'. Images from the old world provided a patent for change in the New World.¹¹ The dreaded Victorian institution of the workhouse did not emerge here, wages were generally higher and some government assistance for the 'deserving poor' existed from the 1890s onwards.¹²

Despite good intentions and egalitarian notions New Zealand did not establish an ideal system of education or child welfare in the nineteenth century. John A.Lee, novelist and

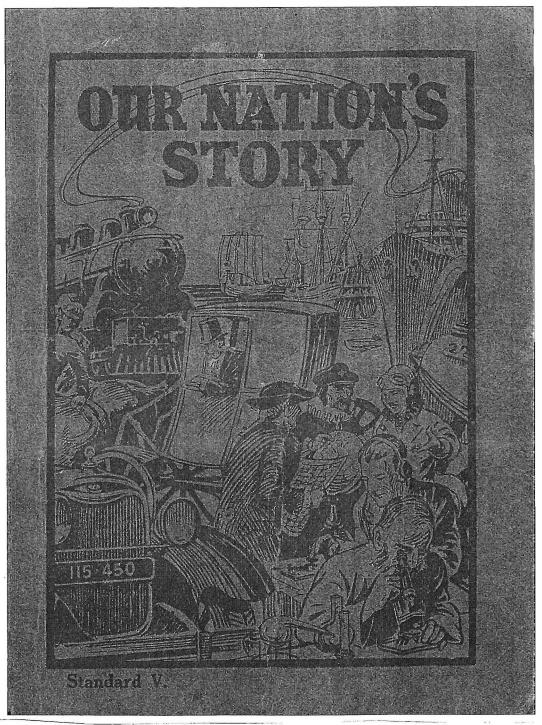
⁸See Openshaw, et al, *Challenging the Myths*, p.120, E.P.Malone, 'The New Zealand School Journal and the Imperial Ideology,' *NZJH*, Vol.7, 1973, p.14. Also Goodyear, 'Black Boots and Pinafores', chapter six for an examination of how children were encouraged to take an active part in fund-raising for the war effort, and shared with women the task of sending comforts to the troops. Schools promoted militaristic organisations such as the Navy League, and the League of Empire. Goodyear, p.285.

⁹ Report by Ada Patterson to Australasian Medical Conference, NE, May 2 1927, p.153.

¹⁰Hugh Cunningham, Children of the Poor: Representations of Childhood since the Seventeenth Century, Basil Blackwell, Oxford, pp.190-191.

¹¹Eric Olssen, 'Building New World', work, politics and society in Caversham 1880s to 1920s, Auckland University Press, Auckland, p.230.

¹² In 1898 the Liberal government introduced the Old Age Pensions Act, which granted a small means-tested pension. Len Richardson, 'Parties and Political Change', Oxford History of New Zealand, p.207.



Nationalism and New Zealand's education.

The school journal began to promote New Zealand themes, albeit with a close link to the Empire, and *Our Nation's Story* included some New Zealand history in the syllabus. Maori featured, although always in a subsidiary role, and the books emphasised the 'glorious' nature of New Zealand's race relations. 'Questions on the Maori wars included 'Both the Maori and the white settlers thought they were right in the quarrels over land. Try to explain to your class how this could be so'. Source: *Our Nation's Story*, p.51, for Std V. It ignored the reality of war, dispossession and poverty. P.J. Gibbons, 'The Climate of Opinion', *The Oxford History of New Zealand*, p.319.

Labour politician, exposed to a shocked New Zealand in the 1930s the suffering of children in poverty, and the brutality of the industrial school system.¹³ In the early twentieth century international developments in the field of child study and child care transformed schools and orphanages.¹⁴ Isolation meant that New Zealand at first remained unaware of these developments and lagged behind the 'mother country' in some respects. As a result some educationalists became frustrated with New Zealand's 'backwardness'.

Educational theorists in the interwar years deliberately derided the mythology of New Zealand as a progressive country, hoping to provoke support for change. For example, A.E.Campbell, writing in the 1930s, criticised New Zealand's education as being 'wedded to the old', arguing that the New Zealand citizen chose to surround 'himself with the education and ideas that formed the background of existence in the homeland'.¹⁵ He claimed that the 'Education system of New Zealand as it stands today is incomprehensible unless one bears in mind that it originated and developed in a British colony in the nineteenth century'.¹⁶ His suggestion that New Zealand lagged behind other Western countries must have disturbed New Zealand complacency and helped to promote support for change.

Theoretically, at least, schools became more child-centred in the early twentieth century. During the interwar years the government developed a reasonably comprehensive health programme in schools and also set up a separate child welfare system for abandoned, maltreated, or delinquent children.¹⁷ Two New Zealand historians, Margaret Tennant and Bronwyn Dalley, have studied the development of child welfare services in New Zealand.¹⁸ Nevertheless, theories about child care and education took rather longer to implement than optimistic reports would suggest. Indeed, an examination of educational developments gives the impression that authorities promoted the child as an individual without allowing for individuality of background and experience. This apparent contradiction developed because

¹³ See John A.Lee, *Children of the Poor, The Hunted*, and *Delinquent Days*, also E.Olssen, *John A.Lee*, University of Otago Press, Dunedin, 1977, and Mary Isabella Lee, *The Not So Poor: An Autobiography*, ed A.Cooper, Auckland, 1992.

¹⁴ See Cunningham, *Children of the Poor*, pp.198-200 for a discussion of the child study movement. This movement (the society of child study was established in 1907) stressed the differentiation of the nature of children and adults and developed education as a science.

 ¹⁵ A.E.Campbell, *Educating New Zealand*, Department of Internal Affairs, Wellington, 1941, p.2.
 ¹⁶ ibid, p.1.

¹⁷The government set up a separate child welfare department in 1920 with responsibility for 'the maintenance, education and training of any destitute, dependent, or homeless children committed to the care of the department', also children orphaned by the 1918-19 influenza epidemic, the care of infants (children under 6) separated from their parents, delinquent children, and the maintenance and education of 'deaf, the blind, and the feeble-minded [children]'. *AHJR*, 1920, E-4, p.1. In 1925 a Child Welfare Act set up a separate system of courts, and appointed Child Welfare Officers. These developments involved a recognition of childhood as a separate state from adulthood, and were hailed by many contemporaries as being a great advance.

¹⁸See M.Tennant, 'Indigence and Charitable Aid in New Zealand 1885-1920', PhD Thesis, Massey University, 1981, *Children's Health, the Nation's Wealth. A History of Children's Health Camps*, Wellington: Bridget Williams Books & Historical Branch, Department of Internal Affairs, 1994, *Paupers and Providers Charitable Aid in New Zealand*, Allen & Unwin & Historical Branch Department of Internal Affairs, Wellington, 1989. See also Bronwyn Dalley's history of the Child Welfare Department (to be published).

authorities had very strict ideas about what constituted the right kind of child, and the right type of childhood. The government wanted healthy, moral and obedient citizens, and used educational and welfare institutions as a medium to inculcate these ideas in the general population. The following sections explore the development within the education system of health initiatives directed at children. These developments reveal the complex interrelationship between ideology and practice, and the extent to which children became central to the state.

Ideology and Education, the promotion of the child's physical and emotional well-being through the educational system

Provided the money is wisely spent, no department can give the State such a profitable return as can the Education Department. Its work is the foundation of the success of every trade, industry, and department in the country. As one great educationalist in England said recently, "Whatever else is retrenched as a result of war, education must not be touched." To do so would be to cripple our main resource for national recuperation.

Expenditure on education should be estimated in terms of child-life, child health, child efficiency, and citizen training.¹⁹

In 1877 the Education Act made primary schooling in New Zealand compulsory, secular and free.²⁰ One exception existed, since Maori children did not have to attend school, and the government established native schools with a separate system of administration.²¹ At first local areas provided schooling, making educational provision fragmented and uneven in quality, but gradually the Education Department established control. Some private schooling continued, particularly under church jurisdiction, but the state educated most New Zealand children in the nineteenth and twentieth centuries. Sir Edward Gibbes, in the preface to *Education in New Zealand*, celebrated 'the State's intervention and assumption of its rightful authority to determine as it found best, in the public interest, the management of a great public service'.²²

New Zealand developed a comprehensive national system of education before England and Wales. The Scots had established a network of parish schools in the eighteenth

1975, Pitman Publishing NZ Ltd., New Zealand, 1978.

¹⁹ AJHR, 1916, E.-1A, p.11. The coalition government forgot these words in the 1930s when they cut education expenditure, closed schools to five year olds and closed two training colleges.

²⁰ Openshaw notes that in 1877 education was neither entirely secular, compulsory, or free. Openshaw, Greg Lee, Howard Lee, *Challenging the Myths*, pp.82-87. For general histories of New Zealand education see: J.C.Dakin, *Education in New Zealand*, Auckland 1973, A.G.Butchers, *Education in New Zealand*, Coulls, Somerville Wilkie Ltd., Dunedin 1930, I. & A. Cumming, *History of State Education in New Zealand 1840*-

²¹Openshaw, Greg Lee, Howard Lee, Challenging the Myths, p.38.

²² E.Gibbes, 'Foreword', A.G.Butchers, *Education in New Zealand*, Coulls Somerville Wilkie Ltd., Dunedin 1930, p.iii.

century and an efficient and thorough schooling system existed there by the second half of the nineteenth century. Their system undoubtedly influenced New Zealand, but successive New Zealand governments focused on the education system of England and Wales. Compulsory education developed more gradually in England. The British government passed a series of laws in the late nineteenth century that extended the scope of the education system until 1902.²³ A later Education Act passed in 1918 consolidated these provisions. The government officially established a national system of education for England and Wales, and made education compulsory from the ages of five to fourteen.²⁴

Compulsory schooling ensured the hegemony of new ideologies of childhood, but schools were not necessarily child-centred places. The institutions that developed in nineteenth century Britain and New Zealand were often harsh and uninviting places.²⁵ Inadequate training kept standards of teaching low. During the nineteenth century poor pay compounded the problem because teaching failed to attract applicants of high quality. This situation largely affected the ability of the education department to recruit good male teachers, until pay and conditions improved in the twentieth century. Women faced lower pay than men in any job and had fewer opportunities for employment, so many regarded teaching as a suitable career. Unfortunately, women had little chance to become principals and men dominated the higher echelons of the primary school system. Class sizes were large, which made regimentation essential and individual attention impossible. An intensive system of examinations hindered innovation, especially since teachers faced pressure to produce results.

In the early twentieth century educationalists attempted to improve New Zealand education, by concentrating on children's needs. Class sizes gradually reduced although in some schools they remained very large until well into the 1920s.²⁶ Educationalists placed an increasing emphasis on the individual in education. The chief inspector of schools, and Secretary of Education from 1899-1915, George Hogben, introduced the idea that schools

²³ T.L.Jarman, Landmarks in the History of Education English Education as part of the European Tradition, John Murray, London, 1963, p.256. Before legislation churches and dame schools provided education for the masses. In 1861 schools received grants on a payment by results system that depended on attendance and passing examinations. The 1870 education act provided for schools to fill gaps left by the voluntary system, but parents still had to pay school fees. School boards could pass legislation making schooling compulsory for children between the ages of 5 and 13. Acts in 1876 and 1880 made education compulsory, in 1891 parents could demand free education and by 1899 the school-leaving age was raised to twelve. After World War One elementary school fees were officially abolished. Wales had better provisions than England for secondary education. In 1902 the Education Department became the central authority, and control over schools passed from school boards to local authorities. Both elementary and secondary education became reorganised. Children who passed an eleven-plus examination gained the right to a free secondary education. Jarman, Landmarks in the History of Education, pp.262-275.

²⁴ Jarman, Landmarks in the History of Education, pp.289-296.

²⁵ Campbell, *Educating New Zealand*, pp.81-82.

²⁶ Interviews from an earlier period revealed that in some city schools between 1905 and 1918 class sizes were as large as 60 to 70 children. One man recalled having forty-two boys and twenty-one girls in his standard 6 class, in a school in Dunedin. Goodyear, 'Black Boots and Pinafores', p.356.

hitcombe's

liny lots' Primer

WHITCOMBE AND TOMBS LIMITED. CHRISTCHURCH, AUCKLAND, WELLINGTON, DUWEDIN, INVERCARGILL, N.Z.

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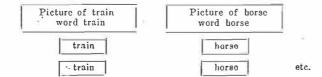
School

NOTE FOR THE TEACHER—continued

When the child is able to retain the image of the word, so that he can easily identify it, a start may be made on the Tiny Tots' Primer. The presentation of the words occurring in the Primer as "Look and Say" words, depends on the ingenuity and resource of the teacher.

At this stage the child's love of collecting and sorting can be made use of—two or three words being repeated several times on separate cards. The child sorts the cards, putting the cards of one name under a labelled picture, e.g.,

32



The same plan may be adopted when the teaching of the sounds is in progress. All the cards containing words beginning with "s" may be placed under a picture of a snake, and all those beginning with "f" under a picture of a fish, etc.

While the Tiny Tots' Primer is being mastered the children should be taught the sound values of practically all the letters (``x') and (`q') may come later), special attention being paid to the vowel sounds. (The short vowel sound only should be given at this stage.)

Running parallel with the reading of the Tiny Tots' Primer, cards making use of the same words in different contexts may be given to the children. They may also be given loose words, which may be built up to form sentences on accompanying story cards.

Before the First Progressive Primer is placed in the child's hands he should know the thirty-two words employed in the Tiny Tots' Primer, and the sounds of the letters (excluding "q" and "x").

If this foundation has been laid, the child will have confidence, and the desire to undertake the next book-Primer I.

SUGGESTIONS FOR THE USE OF THE TINY TOTS' PRIMER

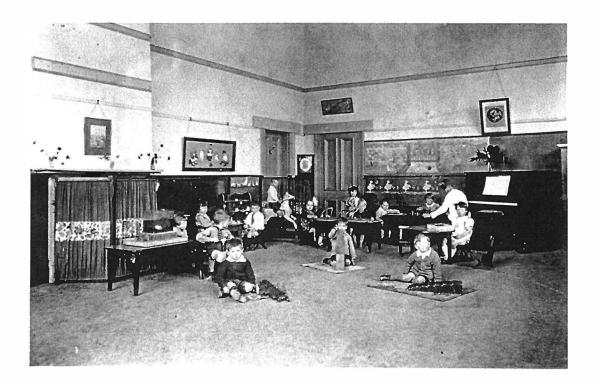
The idea of this preparatory reader is to give as much scope as possible for the activity of the child, and to provide the child with as many clues as possible. First point out that everything has a name. Begin with children's names; write the name of each child 's name on a card and let him pick out his own; or write each child 's name on a card and let him wear it. The following are suggestions for the use of this primer:---

PAGE 2.—Is simply the teaching of the word "the". The child reads "the horse", "the train", etc., and thereby gains confidence, for he does not begin with the idea that reading is something very difficult.

(ii)

[Continued at back of book

Source: Whitcombe's Progressive Readers, 'Tiny Tots' Primer (1920s) This book reveals the new more child-friendly style of teaching. The instructions for use show that teaching styles had changed from the pure drill of the early 1900s to a more child-centred method, that acted to engage the child's interest in learning. A first primer from c.1900 included such sentences as 'Yes, he has a pan and a fan. 7. The pan is not on the bag. It is by the fan'.. *First Primer*, p.15.



Neil Johnson, (bottom right?) Possibly the George Street Kindergarten in Dunedin, but it could also be the Sunshine kindergarten in Christchurch. This photograph shows what appears to be a middle-class kindergarten scene. The children play with toys and a piano in the background shows the importance of music in the kindergarten of the early 1920s. John could not recall many details but thought that kindergarten was probably run by some of his mother's graduate friends. Courtesy of John Johnson.

should educate the 'whole child'. Hogben had a wide knowledge of international developments in education. He increased centralisation in the education system,²⁷ and attempted to dispel the strict academic bias in education by reducing the emphasis on examinations. His philosophy included conservative as well as liberal aspects, and the education department under Hogben developed a greater concern with social control.²⁸

Secondary schooling expanded rapidly in the early twentieth century, because of public demand, and greater accessibility as a result of a change in government policy. During Hogben's tenure the government introduced the concept of free places in 1902. Children who had passed a proficiency examination could receive free secondary education.²⁹ As New Zealanders grasped the importance of education for occupational advancement, the popularity of secondary education increased. Demand exceeded expectations. By 1916 eighty-five per cent of secondary pupils attended under the free place system, and the government paid almost the entire cost of secondary education.³⁰ During the interwar years secondary education grew rapidly. In 1920 roughly 13 per cent of twelve to eighteen year olds obtained some form of secondary education while by 1939 this rose sharply to 69 per cent.³¹ Theorists demanded that education should become more heterogeneous in order to accommodate the needs of this new type of secondary student.³² Secondary schools were academically orientated but Hogben hoped that technical schools would give children a more practical training.

A biographer noted that Hogben based his educational philosophy on the concept that 'a teacher's task was not to pump information into children but to help them in developing their own talents for learning, thinking and doing'.³³ Such policies gradually changed children's experience of education from a rigidly controlled and automated system, although change occurred slowly and to some extent unevenly.³⁴

Financial constraints hindered the implementation of new educational policies in the 1920s and 1930s. Educationalists expressed frustration at governmental delays. Teachers and other groups such as the National Council of Women, who were committed to education, lobbied the government in protest. In 1922 the New Zealand Educational Institute (NZEI) raised concern about cost cutting in education. They were supported by the National Council

²⁷Openshaw et al, *Challenging the Myths*, p.99.

²⁸ibid, pp.100-101.

²⁹ Britain established a similar system in 1902. Jarman, Landmarks in the History of Education, p.275.

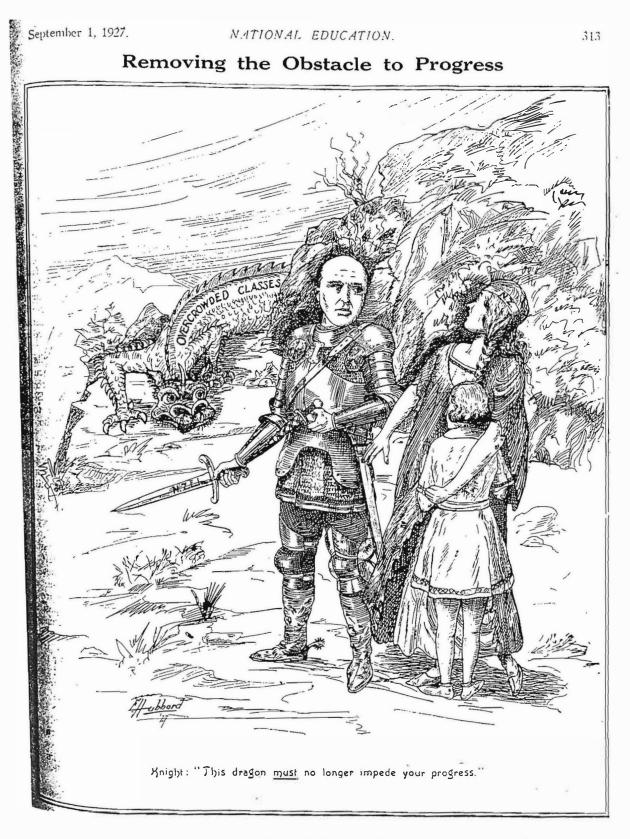
³⁰ AJHR, 1916, E-1A, p.3.

³¹ E.Olssen, 'Towards a New Society,' in W.H.Oliver & B.R.Williams (eds.), Oxford History of New Zealand, Clarendon Press, Oxford University Press, Oxford, 1981, p.269.

³²Openshaw, *Challenging the Myths*, p.157.

³³H.Roth, 'Hogben, George', *The Dictionary of New Zealand Biography, Volume Two 1870-1900*, Bridget Williams Books, Department of Internal Affairs, Wellington, 1993, p.226.

³⁴ In my previous study interviewees who attended school between 1900 and 1918 indicated that a strict atmosphere prevailed, maintained by extensive use of corporal punishment. Goodyear, 'Has the Bell Rung Yet': Children and Schooling in Otago 1900-1920', *History of Education Review*, 1995, & 'Black Boots and Pinafores', pp.343-384.



Removing the Obstacle to Progress' shows the NZEI as a valiant knight defending New Zealand (a woman) and children from the scourge of overcrowded classrooms. They imply that the country will not progress unless school conditions became healthier. Source: *National Education*, September 1 1927, p.313.

and address were strated as were as

The Late Mrs. Ord Marshall

AN APPRECIATION.

(By a. New Zealand teacher on exchange in London.)

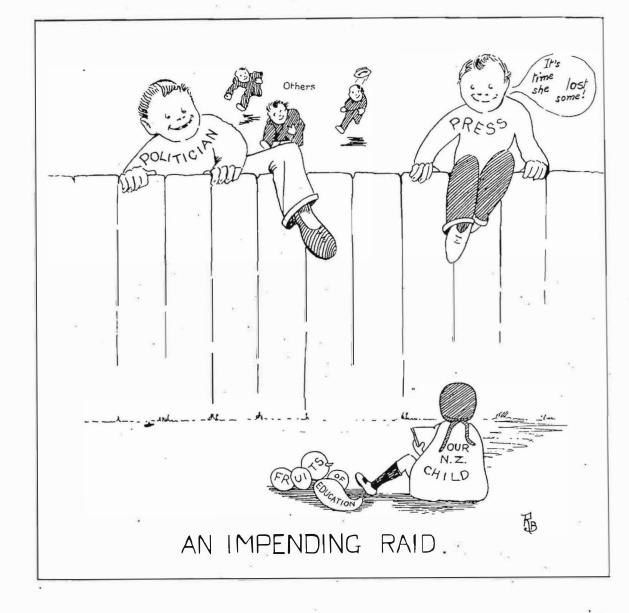
Only those who were so privileged as to meet her will realise the almost irreparable loss sustained by The League of Empire in the death, on March 27th, 1931, of their beloved chief, Mrs. E. M. Ord Marshall.

In spite of her great age, she yet contrived to do more than most people do when in the prime of life, and she died in harness.

But it is an an overseas teacher that I wish to pay my tribute to her memory. From the moment we set foot on English soil our happiness and comfort were her greatest care. No kindness was too small for her to show us, no favour too great. Her influence was unbounded, and a never-failing source of wonder to us. She exerted it so willingly for us. She could, and did, move mountains on our behalf. The mention of her name unlocked any door, and ensured for us the greatest courtesy and attention.

Her death is a great loss to those who will in future journey overseas. She was so wonderfully courageous, and so splendidly capable of dealing with any emergency. With her, one felt in the presence of a great and noble lady.

Now we have lost, and we deeply miss, that wise and loving hand which guided us among the beauties of this new life. Among my happiest recollections of my years in England on exchange is the memory of my associations with the late Mrs. Ord Marshall.



'An impending raid', shows the NZEI's concern over the governments cuts to education spending during the depression. Source: *National Education*, September 1, 1931, p.404.

of Women (NCW).³⁵ Mrs Newton, a member of the Auckland Branch, described herself as an instrument to voice 'the cry of children', declaring that:

During the war years and the post-war years the much needed reform and extension of our education system has been much postponed - first because of the stress of war, afterwards for reasons of finance . . . 'Develop the resources of the country' is a saying very frequently heard. The most valuable of all the country's resources is its young life - the boys and girls who will soon be men and women. Without adequate education they can never enjoy the full and complete lives to which, as men and women, they will be entitled. They can never play the part they should play as citizens of a free democracy; they can never give their best service in industry or in commerce.

She feared that New Zealanders, unlike the 'people of the Old Country', did not sufficiently value education.³⁶ In 1927 the NZEI discovered with dismay that New Zealand spent less per head of population on education than England and Wales 'with all the latter's poverty and unemployment, and in spite of the greater purchasing power of their money'.³⁷ Again circumstances challenged the unconscious assumption that New Zealand was an ideal country for children.

New Zealanders were aware of overseas developments in education in the interwar period. Intellectuals, women's groups, and progressive teachers followed new developments eagerly. Ideas were exchanged between New Zealand and Britain and increasingly between New Zealand and America.³⁸ Despite cost-cutting, teachers occasionally obtained funding to study developments abroad. The *National Education Review* is full of reports from overseas and the views of teachers who visited other countries. For example, Dr.McIllwraith, Senior Inspector for Schools for Hawkes Bay, went to England in 1925. In an address to the Manawatu Branch of the Teachers' Institute, he commented, 'I found much that was admirable in the English system of education'. Some of the important developments he observed there included the reorganisation of education in 1918, which had increased salaries, and the introduction of a more flexible syllabus. This reorganised syllabus trained children beyond the three R's. McIllwraith concluded that in New Zealand 'we educate along the lines of training to earn a living; in England they educate along the lines of training the child to live

³⁵For a discussion of the NCW see Dorothy Page, *The National Council of Women A Centennial History*, Auckland University Press/ Bridget Williams Books with the National Council of Women, Auckland, 1996, and Roberta Nicholls, *The Women's Parliament The National Council of Women of New Zealand 1896-1920*, Victoria University Press, 1996.

³⁶ 'The Economy Axe and the Children', NE, May 1, 1922, p.131.

³⁷ 'How we lag behind', NE ,September 1, 1927, p.309.

³⁸ The Carnegie Foundation seems to have been fairly influential here. For example, two well-known New Zealand teachers, Gwen and Crawford Somerset, received a joint Carnegie Fellowship in 1936. Gwen wrote in her autobiography that this 'break in routine meant a fundamental change to our outlook on education'. G.Somerset, Sunshine and Shadow, New Zealand Playcentre Federation, Auckland, 1988, p.176. John and Dorothy Johnson, the parents of a man interviewed for this study, also received a Carnegie Fellowship and visited America in 1937.

its life'.³⁹ The NZEI wanted to introduce these ideas into New Zealand education. They thought that teachers should educate the 'whole child' and hoped that by reducing class sizes, teachers would be able to give children individual attention. An NZEI submission to the Minister of Education in 1926 stated that 'From every standpoint it will be found that education has reached the stage when it ought to put the individual first and foremost'.⁴⁰

During the 1920s the education system changed significantly and educational theories provided a further blueprint for change. The following sections examine some of the developments: the expansion of the School Medical Service, and the development of the School Dental Service. In the 1920s the establishment of a school transport system affected rural schools, many of which were closed and others enlarged. But the government's reaction to the Great Depression stymied any further developments. The early years of the thirties were marked by a stagnation of the education system. The government closed two teachers colleges, and suspended the enrolment of five year olds, in an attempt to save money. The NZEI greeted these economies with dismay, lobbying fiercely against the government's cost cutting. One *National Education* editorial stated that 'The advantages to the child of an early start on his school career, at an age when the mind is plastic and habits easily formed, are so obvious that the comparative apathy of the general body of public opinion is really difficult to understand'.⁴¹ All public servants received a pay cut of ten per cent, followed by another equivalent cut in salary. Teachers were also forced to cope with increased poverty and suffering despite official statements that the depression had not led to an increase in malnutrition. The government continued to blame individual failings rather than structural deficiencies for poverty, child-neglect and malnutrition.

The interwar period saw a further development in educational philosophy when Canterbury University College appointed James Shelley as Professor of Education. Shelley assisted the flow of ideas from overseas, promoted change and inspired a new generation of educationalists. He became closely involved in the Labour party and his ideas, and those of other theorists, influenced Labour's policy. The election of a Labour government in 1935 ensured that many of his ideas became official policy. Peter Fraser, who had been a student of Shelley's in W.E.A. classes, became Minister of Education. He became patron to Shelley, and Shelley's ex-pupil, C.E.Beeby.⁴² Fraser radically changed the system of promotions when he supported Beeby's appointment as Assistant Director of Education in 1938 and Director in 1940.⁴³ Beeby hastened the implementation of new educational ideas in schools.

³⁹ 'Education Systems Compared New Zealand and England', *NE*, 1 December 1925, p.413.

⁴⁰ 'Executive meets the New Minister', *NE.*, 2 August 1926, p.247.

⁴¹ 'Editorial', *NE*, July 1 1932, p.287.

⁴² I.Carter, *Gadfly, The Life and Times of James Shelley,* Auckland University Press in association with the Broadcasting History Trust, 1993, p.111.

⁴³ Fraser went over the heads of Department regulars 'among whom promotion by seniority was the hoary rule and appointed Beeby Assistant Director of Education with the right of succession to the directorate'. Melbourne *Herald*, 24 January 1946, quoted in Goodyear, 'The Individual Child', p.7.

He wrote that: 'Shelley's plea for more care for the individual child moved his students profoundly and gave us a new vision of the craft we had chosen. And this superb oratory spread the idea of the individual child into the community'.⁴⁴

The Labour party invested the idea of the individual with an emphasis on social equality. They believed that schooling should develop the child's personality and attributes and give equal opportunity to all children. Success should be based upon talent rather than social class. Labour did not radically change educational policy when they became government in 1935, but they did fuse these ideas into a coherent policy.⁴⁵ They resurrected the myth of New Zealand as a 'social laboratory' to ensure that fears of state socialism did not destroy support for the new educational policy. Peter Fraser summed up the essence of advanced educational thought in the interwar years with his statement in the Education Report for 1939. 'The Government's objective, broadly expressed, is that every person, whatever his level of academic ability, whether he live in town or country, has a right as a citizen to a free education of the kind for which he is best fitted, and to the fullest extent of his powers'.⁴⁶ This policy fitted in with New Zealand's egalitarian myth, and probably owes as much to that as to any socialist ideology.

The government's idealistic statements did not immediately affect schooling in the community. They did, however, reverse the setbacks of the depression years and begin a review of education. The Government supported speakers from the National Education Fellowship Conference in Australia to visit New Zealand, and encouraged teachers to attend the New Zealand conference. In 1938 they abolished the proficiency examination.⁴⁷ But educational change involved considerable cost, and the advent of war affected the government's ability to implement change. Inertia also effectively stymied significant educational change in the interwar years despite good intentions, and teachers were slow to adopt child-centred methods.⁴⁸ Inevitably, these aspirations to promote true social equality in education proved impossible to achieve, as Beeby acknowledged in an article in the 1980s.⁴⁹ The continuing difficulties experienced by the majority of Maori children in New Zealand schools also shows that the educational establishment aimed to fulfil the aspirations of the dominant culture.⁵⁰

⁴⁴ C.E.Beeby, 'The place of myth in educational change', *New Zealand Listener*, 8-14 November 1986, p.54. See Goodyear, 'The Individual Child'.

 ⁴⁵ For discussion of the Labour government and educational policy see: R.W.Heath, 'Labour Politics and education in New Zealand 1904-1935', M.A. (Education), Victoria University of Wellington, 1965.
 ⁴⁶ AHJR, E-1, 1939, pp.2-3.

⁴⁷Goodyear, 'The Individual Child', p.9.

 ⁴⁸ Olssen, 'Towards a New Society', in Oliver & Williams (eds.) *The Oxford History of New Zealand*, p.270.
 ⁴⁹ C.E.Beeby, 'The place of myth in educational change', *New Zealand Listener*, Nov, 8-14, 1986, p.54. See Goodyear, 'The Individual Child'.

⁵⁰ A small percentage of Maori thrived at private diocesan schools, and participated in university. For example Apirana Ngata was for many years New Zealand's most educated politician. He attended Te Aute College, obtained a Te Makarini scholarship, and studied at Canterbury College. He completed a BA in political science in 1893 (later gained an MA), and completed an LLB at Auckland in 1896. He was the first Maori to graduate

Although successive Ministers and Directors of Education may have had good intentions, the implementation of new attitudes to children did not merely stem from benevolence. The notion of the modern child expressed western aspirations of individuality. Authorities used education explicitly as a means of social control. Through education children learnt economically useful skills and could be trained as good citizens. Schooling removed larrikins from the streets, promoted discipline and order, and helped the State to influence parents. Olssen argues that schools rendered 'the disadvantaged loyal to the social order by inculcating patriotism, fostering ambition, and socialising such children into hierarchically structured and time-dominated organisations.'⁵¹ The creation of educated and flexible citizens is essential in a modern economy which necessitates mobility. Malone dubbed Hogben a 'liberal imperialist' who promoted the values of Empire in schools.⁵²

Developments in the education system may have promoted equality for some children, but schooling also became an effective means of social control. During the interwar years the education system became a medium to classify children and separate the 'tainted' from the 'normal'. This aspect of education developed out of a genuine concern for the individual but quickly became a means of discrimination. Hendrick had noted that compulsory schooling provided authorities with the means to study the children of the general population. Educationalists intended the intelligence quotient or 'I.Q.' test as a tool to promote the child's individuality. They saw the test as an infallible measure of assessment. Popular psychology also promoted the Binet test. Dr. Sloan Carter, in a New Zealand Woman's Weekly article in the 1930s, advocated tests as the best way to assess children's abilities.⁵³ Authorities used tests enthusiastically in both Britain and New Zealand in this period, with little recognition of their limitations, or of the dangers inherent in labelling children so definitively. In 1926 the Taranaki Education Board introduced intelligence tests for children in order to classify them. Mr McKenzie, the senior inspector in the area, expressed a deep faith in the ability of the tests to assess intelligence. Modern tests were 'framed on scientific principles and were based on facts ascertained through experiments. The answers to the questions were so definite that there could be no difference of opinion as to their value'. The Board hoped to be able to teach children and bring them up to required levels, or establish special programs suited to their limitations. McKenzie stated that 20 to 25 per cent of children 'were below normal and wanted a special education suited to their individual needs. The present proposal was to provide for the latter type [retardates] hand-work, at which they frequently excelled'. Although he stressed that backward children were not 'inferior' the impression lingers that the new concentration on the individual in education had a darker side. Children were to be

from a New Zealand university. 'Ngata, Apirana Turupa, 1870-1950', *The Dictionary of New Zealand Biography Volume Three 1901-1920*, Auckland University Press, Department of Internal Affairs, Auckland, 1996, p.359

⁵¹Olssen, 'Towards a New Society,' in Oliver & Williams, (eds.) Oxford History of New Zealand, p.270.

⁵² Malone, 'The New Zealand School Journal and the Imperial Ideology', p.18.

⁵³ Dr. E. Sloan Carter, 'Are your children wicked? Then you are to blame', *NZWW*, 27 December 1934, p.11.

classified and labelled for life by tests that have since been proved to be culturally biased and limited in their ability to determine intelligence.⁵⁴

The Geneva Declaration stated that all children had the right to an education, and this concept, combined with the new emphasis on the individual, forced the government to extend services to children previously ignored by the education system, mentally or physically disabled children. From 1910 onwards the Education Act made the education of physically and mentally defective children compulsory,⁵⁵ but at first the Department made little provision for their education. In 1922, partly in response to need, and partly as the result of eugenic concerns, the Department introduced special classes for educationally subnormal or 'backward' children.⁵⁶ New Zealand largely followed the British system which by the 1920s had more than 500 institutions caring for children with physical defects.⁵⁷ Children were assessed and classified by mental or physical defects. The Education Department separated the more severely 'feeble-minded' from other children and sent them to be educated in special schools. Young boys went to a school at Nelson, older boys who were 'mentally subnormal and unfit to be at large in the community' were sent to Otekeike. A special school at Richmond educated girls and taught them housework and laundry work. Physically handicapped children had their own special schools.⁵⁸ Bob Walton, a Child Welfare Officer with the Education Department in the 1940s, thought the department over-emphasised intelligence testing. 'The department's responsibility with schools for deaf and retarded children, [meant that] I.Q.'s were fairly important. An I.Q. below fifty was considered they may need to go to a special school and because these schools were run by the Education Department we got involved.' Child Welfare Officers might arrange for a child to be tested and recommend that a child go to an institution. They were responsible for assigning and often accompanying children to special schools.

It was crazy, mainly Maori kids from the North Island were taken to Otekeike. That was very strict control school wise and when got older they did industrial work like mending boots and working on a

⁵⁴ 'Tackling the Problem of "Retardates" Taranaki Board's Example', NE, 2 August 1926, p.254. Such tests were also used extensively to assess the intelligence of different races, and became a dangerous tool in the hands of Social Darwinists. For example, in Australia some ethnographers and officials used I.Q. testing to prove the basic inferiority of the aborigines. See S.D.Porteous, 'Mentality of Australian Aborigines', Oceania, Vol.4, no.1, 1933. A.P.Elkin, 'The Social Life and Intelligence of the Australian Aborigine, 'Oceania, Vol.2, no.3, 1932.
⁵⁵ 'The Education of Defective Children in New Zealand', The Australasian Medical Gazette, 9 November,

^{1912,} p.486.

⁵⁶ Goodyear, 'The Individual Child', p.84. It is interesting to note how World War Two changed official attitudes to the 'feebleminded', as they were called then. The Inquiry into Mental defectives in the 1920s talked about the threat they posed to society, but in 1941 the government accepted responsibility for special education and drew a firm distance between New Zealand and facist countries. The Minister of Education, H.G.R Mason, wrote: 'In strong distinction to the dictatorships, a democratic state with its respect for the individual must provide special facilities for the handicapped'. Quoted in Goodyear, 'The Individual Child', p.87.

⁵⁷ Steve Humphries & Pamela Gordon, *Out of Sight: The Experience of Disability 1900-1950*, Northcote House Publishers Ltd., Plymouth, 1992, p.66.

⁵⁸ 'Education: State Care of Children, Special Schools, and Infant-life Protection', E-4, AJHR, 1920, pp.3-4.

farm . . . The other problem with that particular policy at the time was of course it divided the child from its family and they only went home if it was considered suitable for them to at Christmas time and they were escorted backwards and forwards.⁵⁹

The state undoubtedly became more intrusive when dealing with children who did not fit comfortably definitions of normality. Through the education system, government developed some control over family life. Although educationalists viewed such policies as 'enlightened' at the time, it is arguable that intensive state control over 'subnormal children' represented a desire to control such children and prevent them from tainting the general population. Mental and physical health reforms in education reflected eugenic ideology to some extent.

Between 1900-1940 the Education Department transformed schooling, and the school curriculum, but educational reforms in this period also focused on children's physical, mental and emotional well-being. These latter reforms aimed both to assist and control children. The government hoped to improve national efficiency by promoting good health. They introduced a School Medical Service in 1912, and a School Dental Service in 1921.⁶⁰ The Labour government supported the development of vocational guidance in the 1930s and in 1944 appointed two part-time psychologists.⁶¹ By providing vocational guidance the government subverted traditional parental control over children's occupations but ensured the development of an orderly and educated workforce. From 1920 the newly established Child Welfare Department, under the directorship of Dr. Truby King, took responsibility for school medical services. The Minister of Education, C.J. Parr, announced that 'the Department of Public Health, in conjunction with the Education Department, will watch the health of the child from birth to adolescence under a properly co-ordinated system'.⁶² An institutional system of child welfare developed under the aegis of the education system. This system owed its origins to the redefinition of childhood that had occurred over the previous century and received support because of the concern for national efficiency.

The government focused on children's health because they hoped to promote the development of a healthy and industrious population. Moral concerns prompted the obsession with health. The author of a study on the development of medicine in Britain noted that traditionally people believed in a strong association between health and morality. *'Mens sana in corpore sano*, a healthy mind in a healthy body, with the implication that they were related, was an ancient maxim that, for the eighteenth century, entailed a moral responsibility.'⁶³ The

⁵⁹ Bob Walton, 25.3.97.

⁶⁰ P. Davis, 'Jurisdictional Disputes in New Zealand Dentistry: Controlling Access to the Mouth and Entry to the Market', L. Bryder (ed.), *A Healthy Country Essays on the Social History of Medicine in New Zealand*, Bridget Williams Books, Wellington 1991, pp.25-26.

⁶¹ Goodyear, 'The Individual Child', p.88.

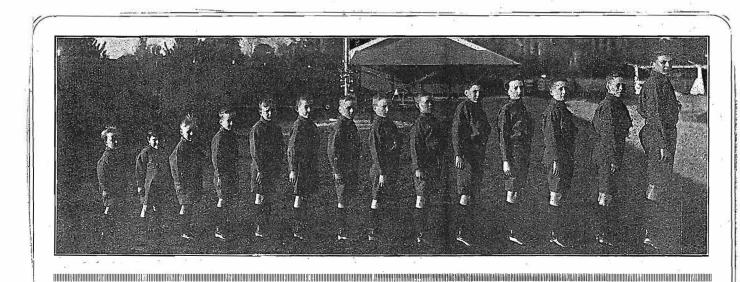
⁶² 'Child Welfare', The Press, 20 July 1929, p.6.

⁶³ C. Lawrence, *Medicine in the Making of Modern Britain, 1700-1920*. Routledge, London and New York, 1994, p.62



CITIZENS IN THE MAKING.

'Citizens in the Making'. The Masterton Methodist Children's Home. The two photographs reveal that the children at the home were subject to a great deal of regulation. They are shown lining up, and wear a uniform which must have distinguished them from their peers at school.



medical profession used this moral reasoning in the nineteenth and twentieth centuries to justify their intervention in matters relating to women, children and the family.⁶⁴ The historian Foucault argued that the increasing power of the medical profession in the nineteenth and early twentieth centuries enabled them to control the development of a 'somatic culture'.⁶⁵ In Britain and New Zealand concern about infant mortality led to a concentration on individual mothers.⁶⁶ The focus on infants and children logically extended the power of the medical profession and the state. Authorities believed that good health ensured the power and prosperity of the nation.⁶⁷ An address by a doctor to teachers at the Batley Education Authority in England expresses these themes. He argued that the nature and nurture of child life was 'being vitiated in all sorts of ways by the influence of alcohol, and that which often accompanied it - venereal disease - and that which was so often the product of both - feeblemindedness'.⁶⁸ In Britain the chief medical officer of health with the London City Council, Sir George Neuman, explained in Health and Social Evolution that medicine and social progress were partners. Universal education, a healthy environment, and 'a new moral order' were the 'principles of modern collective humanism'.⁶⁹ He hoped that medical ideals of physical and moral health could be instilled in the population through the medium of The school medical service linked educational and medical the education system. surveillance.⁷⁰

The School Medical Service, and the School Dental Service

Helen May observes in her study *The Discovery of Early Childhood*, that during the twentieth century 'the welfare of children gradually shifted from the private concern of families, and the occasional concern of philanthropy, into the public domain.'⁷¹ Children's health became part of that public domain relatively early on. Authorities could enact systems to improve children's health because of the development of compulsory schooling. Teachers concurred with this expansion of school's jurisdiction because they realised that children's physical condition determined their ability to learn effectively. The implementation of school medical services for children reveals the growing importance that authorities placed on the children of

⁶⁴ ibid, p.70. For example, by the end of the nineteenth century doctors used medical definitions of the nervous system to explain matters as diverse as 'race, criminality, madness, alcoholism, hereditary syphilis, imbecility and straightforward poverty'. p.71.

⁶⁵ Roger Cooter, 'Introduction', in Roger Cooter (ed.), *In the Name of the Child, Health and Welfare, 1880-1940*, Routledge, London & New York, 1992, p.12.

⁶⁶ Lawrence, Medicine in the Making of Modern Britain, p.74.

⁶⁷ ibid, p.62.

⁶⁸ 'Notes of the Month', *NE*, Vol.V, 1 August 1923, p.264.

⁶⁹ Lawrence, *Medicine in the Making of Modern Britain*, p.82.

⁷⁰ H.Hendrick, 'Child Labour and the School Medical Service', in Roger Cooter (ed.), *In the Name of the Child*, p.63.

⁷¹Helen May, The Discovery of Early Childhood, The development of services for the care and education of very young children mid eighteenth century Europe to mid twentieth century New Zealand, Auckland University Press/Bridget Williams Books with NZCER, Auckland, 1997, p.131.

the nation. The service represented a direct means by which middle class ideas of hygiene, health and the proper conditions of childhood could be imposed on the general population.

The New Zealand government set up a system of medical inspection of children in 1912. They acted five years after the introduction of a school medical service in England. Authorities there firmly believed that education and school medical inspection had improved the physical health of the British population. In 1925 the London City Council Medical Officer stated in a report that since the Education Act had been passed 'infantile mortality has steadily and continuously declined'. He attributed this partly to enlightenment of mothers but also to school being a healthy and safe environment for children. 'Education by removing negligence and ignorance has materially influenced mortality at the ages of comparative helplessness–childhood and old age'.⁷²

Compulsory schooling meant that for the first time authorities could examine large numbers of the population. Victorian scientists had excelled at the collecting and classifying of species, but scientists in the Edwardian and Georgian eras chose to study and classify their own populations. Margaret Tennant writes in her history of the School Medical Service in New Zealand that 'children had the advantage of being available, convenient and, it was hoped, malleable targets for health reformers'.⁷³ Studies expressed and fuelled eugenic concerns. Doctors who studied slum children in Glasgow discovered that these children were lighter on average than the children of agricultural labourers and rural miners. They disregarded nutritional factors and decided that parental factors such as heredity and the 'efficiency' of the mother, caused this difference.⁷⁴

The government had originally invested control over the school medical service with the Education Department, but in 1921 they transferred control to the Health Department, who established the School Hygiene Division. Despite this transference a close association between schools and school doctors remained. Schools remained a centre for government control, and the department introduced a health syllabus which reinforced the message of the school doctors. In the twenties there were regular health weeks in schools which focused on hygiene and good habits. The *Press* noted approvingly that 'Our Education Department does something now, and each year is doing more, to detect physical weaknesses after they have become established'.⁷⁵ Teachers and doctors aimed health propaganda at children of all ages. For example, health prevention included teaching children in the infant school about the value of drinking milk:

⁷² 'Education and Health', NE, 1 September 1926, p.281.

⁷³ "Missionaries of Health': The School Medical Service During the Interwar Period', in Linda Bryder (ed.), *A Healthy Country Essays on the Social History of Medicine in New Zealand*, Bridget Williams Books, Wellington, 1991, p.130. See also Hendrick, 'Child Labour and School Medical Services', in Cooter (ed.), *In the Name of the Child*, p.47, and Cunningham, *Children of the Poor*, p.194.

⁷⁴ 'Child Life study', NE, 1 December 1926, p.420.

⁷⁵ 'Health Week in School', The Press, 24 September 1925, p.8.

HEALTH RHYME

Drinking milk will make us happy Drinking milk will make us strong We shall all grow tall and healthy With red cheeks and laughter too, So we drink our milk each day For we know what milk will do.⁷⁶

School health work included diagnosis of defects of illness but a large part of the work of the service was also preventative. *National Education* in 1930 argued that school inspection should be extended to pre-school children since the 'child has become the starting-point of the new Preventative Medicine, but by delaying the start until the age of five years "we do not really prevent at all"⁷⁷.

The School Medical Service developed as a centralised and bureaucratic service, but individual officers seem to have been allowed a fair degree of autonomy. From a staff of four in 1912 the Service increased to a total of 13 officers and 27 school nurses.⁷⁸ Several of the school doctors made study trips overseas and were aware of international developments in child welfare and school medical services.⁷⁹ Doctors inspected primary schools, then secondary schools were added in the 1930s. Inspection of private schools tended to be sporadic, and occurred on request.⁸⁰ Doctors visited city schools first, and then attempted to visit country areas as the service expanded. Native schools received inspection later in the 1930s.⁸¹ Teachers in native schools themselves inspected and indoctrinated children about good health and (European) good manners.⁸² The government placed increasing importance on health, although their opinions were seldom matched by sufficient grants. The Minister of Education wrote in 1922 that 'the development and maintenance of health and physical wellbeing is one of the most important and fundamental aims of education'.⁸³

⁷⁶NE, Vol. XVIII, No. 189, 1 April 1936, p.127. This rhyme probably went along with the free milk in schools service introduced by the Labour Government in 1935. See W.B.Sutch, 'Milk in Schools The Government's Scheme Explained', NE, Vol XVII, No.185, 1 December 1935, p.502.

⁷⁷ Notes of the Month', National Education, March 1, 1930, Vol XII, No.122, p.58.

⁷⁸ Undated memo, H 35/9900 35/3.

⁷⁹ M. Tennant, *Children's Health The Nation's Wealth A History of Children's Health Camps*, Bridget Williams Books and Historical Branch Department of Internal Affairs, Wellington, 1994, pp.44, 63.

⁸⁰ The principal of Archerfield School in Dunedin requested school medical inspection in 1926 because she wanted 'girls to have the same advantages as children attending government schools'. T.F. Cleghorn, to Director of Education, Archerfield, Lese St., March 8 1926. H 35 18792 35/1/4.

⁸¹ The head teacher of Tokata native school discussed this position in 1928. P.R. Kennedy to Director Maori Hygiene, 16.2.28. Elizabeth Gunn felt that Maori children received inadequate health care. E. Gunn, May 10 1928 to Ada Paterson, Director of the Division of School Hygiene. See also letter from Minister of Health to Minister of Education on this subject 10 October 1925. 'School Medical Inspection', Secondary Schools H35/8797 35/1/4. Also Tennant, 'Missionaries of Health', in Bryder (ed.), *A Healthy Country*, p.129.

⁸² Tennant, 'Missionaries of Health', in Bryder (ed.), *A Healthy Country*, p.129.

⁸³ 'Instructions to school teachers re health teaching in schools', 3 October 1922, Minister of Education, School

Women dominated the service from the beginning. Many women doctors faced difficulties in establishing general practice, but were encouraged to join the school service, because it sat more comfortably with the ideal of nurturing womanhood. Some women doctors joined the service because of the assured income despite its low status and poor pay relative to other forms of medical work.⁸⁴ Margaret Tennant's description of Elizabeth Gunn shows how a determined woman could create her own miniature empire. This larger-than-life character has been credited with helping establish the distinctive New Zealand Health Camp system.⁸⁵

The success of the school medical service depended on the support of teachers, as well as on the quality of its doctors. During the interwar period teachers became aware of health issues, and *National Education* made this link explicit with their motto 'School Efficiency Civic Efficiency National Efficiency'. Teachers were the first line of contact with pupils and their referrals were a vital part of the maintenance of the service. Their co-operation proved especially valuable in the most successful campaign of the School Medical Service, the campaign to eradicate goitre enlargement through iodine supplements. In 1927, Dr Rosa Collier, School Medical Officer for Southland, wrote:

The co-operation of teachers has been of considerable value to me in this past year. It is the practice of certain headmasters to ask me for the list of notifications at the close of my annual inspection, and I know that some of them question the children at times through the year as whether such and such a defect has been attended to. Others in country districts get in touch with the parents where the nurse or I have been unable to do so, and urge them to carry out the suggestions made to them on the notification form.⁸⁶

School medical officers needed teachers' co-operation because their jurisdiction extended beyond mere inspections. They inspected the children's school environment with regard to cleanliness, lighting and ventilation, as well as making routine examinations of children. During these examinations they selected children in need of remedial exercise. They were propagandists since the department required officers to educate the public about proper health.⁸⁷

Tennant argues that the Service fought a war against old ideologies of health and childhood. Often eugenic ideas shaped their attitudes to health. School doctors attempted to educate and indoctrinate parents, as well as children. Through radio broadcasts, pamphlets

Medical Inspection, Health Pamphlets, H1 8875 35/24/3.

⁸⁴M.Tennant, Elizabeth Gunn, in C. Macdonald, M. Penföld, B. Williams (eds.), *The Book of New Zealand Women, Ko Kui Ma Te Kaupapa*, Bridget Williams Books, Wellington, 1991, p.267.

⁸⁵Tennant, Children's Health The Nation's Wealth, p.61.

⁸⁶ School Medical Inspections', NE, 1 April 1927, p.110.

⁸⁷ General outline of Duties of School Medical officers, E.H. Wilkins, Chief Medical Officer, Education Department, Wellington 14 May 1920, School Medical Inspection Reports, H1 8798 35/1/6.

two



i



A lunch of white bread and jam is lib-balanced and un-hygienic. Biscuits, chocolates, and sweets should not be taken, especially at the end of a meal. They are prolific causes of dental decay. Acid fruit, on the other hand, causes an abundant flow of cleansing saiiva, and, when taken at the end of a meal, is a natural preventative of dental decay. Let me append only this observation: that the feeding in institutions of all kinds in this country is hopelessly unsuit-able and out of date in the light of the new discoveries which we in this country

Wheatmeal bread is much preferable to white, being more nutritious and less likely to cause dental decay. It is much liked by children when toasted or oven-

A lunch of white bread and jam is ill-

'Food Principles', by Dr C.W. Saleeby. One of a series of articles from the Division of School Hygiene, attempting to convert the population to good health, through education. Despite their discussion about the importance of brown bread most people I interviewed ate white bread.

Source: The Daily News, September 5, 1923, p.2.

and school health weeks they 'amassed a varied ideological weaponry with which to wage war against the "frying pan, white-bread - and - jam brigade" (as unenlightened parents - or, more accurately, mothers - were termed'.⁸⁸ These pamphlets promoted tooth care, deprecated the 'pernicious habit' of the 'play lunch' and suggested the proper composition of the school lunch (see illustration).⁸⁹ New Zealand's concern with indoctrination, or 'neo-hygenism', as one British historian dubbed it, fitted in closely with the aims of the English school medical service.⁹⁰ One New Zealand school doctor managed to preach her message of health while visiting a Catholic school. She proudly stated that 'I was fortunate in that there was a church service held whilst I was there and, by the courtesy of the padre, I caught the whole congregation before they were able to escape and gave them my views on the the [sic] general principles of raising human stock'.⁹¹ This statement reveals the depth of eugenic ideologies in shaping the school medical service.

School doctors stood at the apex of the establishment's efforts to regulate children's health but school nurses played an increasingly important role in enforcing doctors' requirements. Nurses compiled registers of children with defects detected by doctors and had to ensure that parents took action.⁹² They must have also had to adopt a less abrasive attitude since their actions relied on parental co-operation. For example a letter by a District Health Nurse regarding the poor conditions of Maori families living on a pa, reveals a mix of understanding and paternalism. Despite the condescension, her comments were less judgmental than those made by school doctors toward Maori or non-Maori families⁹³:

The provision of suitable school lunch for school children is a real problem to many Maori mothers. After the morning meal is consumed, there is seldom anything left for lunches for 3 or more children. The Maori-child is ashamed to take to school his mother's home-made fried scone, or the baked potato or Kumara which may be left over from breakfast. Sometimes he refuses to go at all, unless provided with pence, to buy from the shop such things as broken biscuits - or stale cakes, or buns - or in the towns a meat pie, or potato chips - sometimes the pence goes in ice cream or sweets.

⁸⁸ Tennant, 'Missionaries of Health', in Bryder (ed.), *A Healthy Country*, p.133. In *Children's Health The Nation's Wealth*, Tennant notes that dietary campaigns had a significant effect on the population. The School Hygiene Division publicised the link between goitre and iodine deficiency and this led to an increase in consumption of iodised salt in the interwar period, pp.66-7.

⁸⁹School Medical Inspection, Health Pamphlets, H1 8875 35/24/3.

⁹⁰ H.Hendrick, in Cooter (ed.), In the Name of the Child, p.48.

⁹¹ Senior Inspector of Schools, Napier, 7/5/22, H 35/8800 35/3.

⁹² School Nurses General Statement of Duties etc. Ada Patterson, Director, Division of School Hygiene, H1 8798 35/1/6. Among the duties listed were: '9) To visit subsequently the homes of such children as had not received the necessary treatment, 10) Visiting homes at the request of the School Medical Officer to investigate such conditions as mal-nutrition, habitual uncleanliness, mental defect, etc., 11) Giving assistance and advice to parents with regard to minor ailments, dressings, clothing, diet of children, etc'.

⁹³H35 20674 35/14. Reports of malnourished children included very pejorative comments against mothers especially who transgressed against the concept of true womanhood. Comments include 'mother slattern', drinks, etc.

The mentality of these mothers is not very high, they have a real regard for their children but to adequately clean, feed and clothe them, under their present living conditions means a greater effort than they are able to maintain.⁹⁴

By 1939 the department had appointed ninety-eight nurses. School nurses had a social work component and were expected to enter family homes and monitor children's health as well as the general moral and religious atmosphere of their homes. Dr Rosa Collier, doctor for the Southland Board of Education wrote that the school nurse 'does a very important part of the work in following up the notifications, issued by a school medical officer, to parents of children who have any defects, such as enlarged tonsils, defective eyesight, and so on'. Nurses referred children to doctors.⁹⁵ Although the government realised the futility of diagnosis without treatment in remote areas where the population did not have access to a doctor, cost prevented the introduction of a more comprehensive service.⁹⁶ Mass inspection of children provided the government with statistics, but may have been of limited use to children.⁹⁷ Many families could not afford doctors and only used them in emergencies.⁹⁸

Nurses and doctors could also refer children to health camps. Health camps were one of the distinctive interventionist measures that were introduced in this period.⁹⁹ Private groups started health camps but by the late 1930s government helped fund the service. Since the camps involved some parental input they do not seem to have developed the stigma attached to other charity concerns.¹⁰⁰

The School Medical Service became an important part of the government's campaign to develop the nation's social capital - its children. Originally a small service, it expanded gradually in the 1920s, and the Labour government reordered the service in 1940. One doctor complained that the large number of examinations made any diagnosis superficial, and thought the service placed too much emphasis on the routine examination of large numbers of children.

The average number of complete examinations ranges from 51,582 in 1934 to 67,709 in 1929. The total number of primary pupils is approximately 240,000. Catherine O'Brien, in a recent article on the

⁹⁴Memorandum for the Medical Officer of Health, Auckland, from N. Jamieson, Dis**x**ict Health Nurses, 18.6.41. 'Malnutrition', H35 20674 35/14.

⁹⁵ 'School Medical Inspections', NE, April 1 1927, p.110.

⁹⁶ E-1A, *AHJR*, 1916, p.8.

⁹⁷Dr E.H.B. Macdonald reported that in one school of 45 notified cases in three months, 21 parents visited a doctor of the hospital, 8 had a reasonable excuse for deferring treatment, 2 had partial treatment and 13 took no notice of the report. Medical Inspection of Schools and School Children, Appendix F. (for E2) nd. (1920s), H 35/8800 35/3.

⁹⁸ See Goodyear, 'Black Boots and Pinafores', pp.163-165. Interviews for the period 1900-1920 showed that middle class people were far more likely to use doctors, which seems to have continued in the interwar period.
⁹⁹Tennant, 'Missionaries of Health', in Bryder (ed.), *A Healthy Country*, pp.137-8.

¹⁰⁰ See Tennant, Children's Health, The Nation's Wealth.

School Medical Service (Irish Medical Journal) states "The main object of the School Medical Service is not to find defects and treat them, but to keep all children fit and well and ensure that they leave school with a sound knowledge of healthy living".¹⁰¹

Poor school attendance records in 1938 prompted growing concern about the health of the nation's children. The service expanded and its focus shifted by placing equal emphasis on preventative measures as well as detection of defects. A departmental memorandum of 1940 announced that 'At the actual medical examination; parents are not only given verbal advice, but wherever possible pamphlets or booklets on the subject at issue are handed to the parent'.¹⁰² Doctors were to inspect primary school children and kindergarten children annually. The government introduced an element of compulsion, by giving nurses the right to gain the support of the Child Welfare Department if parents refused treatment.¹⁰³

The strong element of social control evident in the School Medical Service extended to the Dental Service established by the government in 1921. Both services were prompted by a concern for national efficiency and were very closely linked in intent, although very different in form. War prompted the government to action. N. Mitchell, the President of the New Zealand Dental Association stated that 'It is to the children of the present day and of the future generation that we look to repair the wastage of this terrible war, and it behoves us to see that they are given a fair chance to develop clean and wholesome bodies, without which any nation must go to the war'.¹⁰⁴ Revelations from inspection of troops had shown that New Zealanders had a very poor state of dental health. A study on children's teeth confirmed this finding. In 1921 inspection of children revealed that only 2 or 3 per cent. had perfect sets of teeth.¹⁰⁵ The President of the New Zealand Dental Association had outlined the need for a school dental service in 1913. He suggested that a state-run service was the only way to improve the nation's dental health. In 1917 the NZDA won the support of the NZEI and both organisations lobbied the government for money to start a service for school children. The war had quelled any fears of state socialism since 'State intervention during the war had shown that the State could increase national efficiency, provided it intervened in a sensible way'.¹⁰⁶

Thomas Hunter, a close friend of Truby King's, became head of the government's dental division in 1919, and he developed the school dental system. Brooking notes that Hunter 'was almost fanatically convinced of the link between sound teeth and individual and

¹⁰¹Dr MacLean to Director General of Health, H.35, 15 December 1937, quoted in Goodyear, 'The Individual Child, p.22.

¹⁰²Goodyear, 'The Individual Child', p.23.

¹⁰³ibid, p.24.

¹⁰⁴Quoted in T.Brooking, A History of Dentistry in New Zealand, New Zealand Dental Association, 1980. p.97.
¹⁰⁵Undated memo, H 35/9900 35/3.

¹⁰⁶Brooking, A History of Dentistry in New Zealand, p.87.

racial vigour'.¹⁰⁷ Instead of providing fully trained dentists to inspect children's teeth Hunter instituted a system of dental nurses. He believed that women were cheaper, less competition for male dentists and were naturally suited to working with children.¹⁰⁸ Brooking notes that this solution to the nation's 'teething troubles' was truly unusual.¹⁰⁹ Again authorities viewed women, whether in the form of Plunket nurses, women doctors or dental nurses, as the answer to the problems of the nation's children. A delegate at a 1916 NZDA conference, Richard Dunn from Wanganui, had first promulgated this fast and cheap solution. He suggested that Plunket nurses were serving the best interests of the race and that dental nurses could be trained as dental auxiliaries, just as Plunket nurses were medical auxiliaries. Dentists would be relieved of 'a good deal of the child work that many of us find so trying to the nerves'. In conclusion he stated that the solution would be eminently suitable since New Zealand prided itself on being a social laboratory.¹¹⁰

The government established the school dental scheme in 1921. It was not without controversy but eventually the NZDA and the public enthusiastically supported the idea. School dental nurses were trained for a period of two years at a separate training institution. The school selected thirty probationers for training and they were paid a generous bursary of £75 as well as a £50 boarding allowance.¹¹¹ The government planned that dental clinics would be set up in the nation's schools, and all children would be inspected annually.¹¹² Local communities raised part of the funding for clinics, so this initiative had a firm community focus. The Christchurch Press often featured articles about fund-raising for dental clinics. For example, The Press reported the opening of the Sumner Dental clinic. Colonel Hunter opened the clinic, and congratulated the residents on the quality of the buildings. He particularly stressed the necessity for parents to do their utmost to use the simple treatment recommended to prevent dental disease, and urged that they should encourage the children to protect the work done by the officers, by simple acts of cleanliness.¹¹³ Brooking notes that part of the popularity of the scheme depended on an egalitarian distrust of scientifically trained professionals as well as the 'almost hysterical concern' with national efficiency after the war.¹¹⁴

Teachers appear to have supported the movement and the NZEI lobbied for an extension of the service. Their secretary, H.A.Parkison, wrote to the Minister of Education in 1926, stating:

- ¹⁰⁸ibid, p.102.
- ¹⁰⁹ibid, p.95.

¹¹¹ibid, p.105.

¹⁰⁷ibid, p.101.

¹¹⁰ibid, pp.86-87.

¹¹²ibid, p.103.

¹¹³ Sumner Dental Clinic', The Press, 5.12.27, p.11.

¹¹⁴Brooking, A History of Dentistry in New Zealand, p.106.

The Executive is impressed with the evidence of the importance of the condition of children's teeth as affecting the health, and by consequence, the efficiency of the future men and women of the nation. I am therefore directed to enlarge on you the necessity of increasing the number of good dental nurses in training . . . The benefits that have attended the operation of the system afford the best possible argument for its extension to those parts of the Dominion that have not yet been reached.¹¹⁵

The NZEI's dissatisfaction with government provision of dental services developed because for much of the interwar period dental clinics covered a limited number of schools. Larger urban areas benefited most from the service. In New Plymouth the dental clinic examined 2000 children in 1925. The nurse claimed that children's dental health and appearance had improved in the three years that the service had been running.¹¹⁶ Rural areas, in contrast, were poorly serviced by both medical and dental inspection.

Authorities during this period believed firmly that good teeth were necessary for a healthy and efficient population. They viewed dental health as an inextricable part of the total health of the child, but this concern for children did not stem so much for concern for the rights of the individual child, but for the benefit of the country as a whole. Brooking has also shown that Hunter and Truby King maintained a fanatical regard for dental hygiene because they linked physical health with morality. Many doctors thought an infected mouth affected the child's physical and mental well-being. Elizabeth Gunn firmly believed in the efficacy of toothbrush drill in schools. She equated moral laxity in one school with poor dental hygiene. 'Again I make claim for toothbrush drill, clean mouths, clean breaths, clean throats do make children cleaner and healthier. I do not wonder when I see some of the septic foetid mouths of these children and realise the amount of pus they swallow daily that they are listless, inattentive and perverted'.¹¹⁷

The School Medical Service and the School Dental Service focused at first on the detection and treatment of physical defects but increasingly they emphasised the importance of preventative work. The Health Department, school doctors and the Education Department held campaigns and published pamphlets that popularised good nutritional habits.¹¹⁸ Individual doctors, such as Elizabeth Gunn, carried these campaigns further and made them part of their inspection routine. Doctors as well as dentists and dental nurses worked to improve the nation's dental health as well as physical health. A consensus seems to have emerged between teaching and health professionals about the importance of the future citizens

¹¹⁵ 'School Dental Clinics,' H.A.Parkison Secretary NZEI to Hon Minister of Education, *NE*, 1 December 1926, p.415.

¹¹⁶ 'Care of the Teeth', *New Plymouth Daily News*, nd (approximately 1926), School Medical Inspection, Reports, H 35/8800 35/3.

¹¹⁷Elizabeth Gunn, Memorandum from the office of the Taranaki Education Board, New Plymouth, 11th November, 1921, H 35/8800 35/3, p.2.

¹¹⁸See 'Health Pamphlets', H 1 8875 35/24/3. Pamphlets included 'Care of Children's Teeth', 'The Health of Children With Special Reference to Food and Feeding', 'Play Lunch', and 'School Lunch'.

of the nation. This focus on preventive health helped to popularise support for another preventive measure, the open air classroom. Educationalists, doctors and teachers joined forces to improve the physical environment of the classroom. They believed that stuffy, dark unhygienic and crowded school conditions affected children's mental, physical and spiritual health. The most popular solution to this problem was the development of the open air classroom. Doctors, teachers and concerned citizens spent a huge amount of time and energy in an attempt to reform the school room. The open air schools movement proved controversial, popular and ultimately influential in the interwar period.

Open air schools were an international phenomena that developed from a desire to prevent the dreaded scourge of tuberculosis. Until the development of penicillin, sunshine and fresh air were the only known treatments. In 1924 the disease killed 736 people, and statistics revealed that it was the sixth leading cause of death in New Zealand.¹¹⁹ The idea for open air schools originated overseas.¹²⁰ A British socialist, Margaret McMillan, developed the idea of the fresh air school to improve the health of the poor in London. She was influenced by the ideas of an educational philosopher, Eduard Seguin, who argued that 'deformed' and 'defective' human beings could be reclaimed. McMillan thought that focusing on children, and especially on younger children, would be the most effective way of reclaiming human beings. 'Dirt and disease germs,' she wrote, are 'our greatest enemies and kill many children'. She believed the only solution was fresh air and cleanliness. By caring for the body she would be able to develop the minds of the children of the poor.¹²¹ McMillan's efforts met with some resistance but her books helped to popularise her ideas.¹²² In 1907 the London County Council opened a fresh air school, and a similar school opened in America a year later.¹²³

In interwar New Zealand many authorities promoted ideas of fresh air in the classroom. Fresh air was a vital part of the Plunket programme, and King devoted considerable space in *Feeding and Care of Baby* to the best situation for baby to receive the greatest amount of fresh air. Professor Shelley promoted open air schools energetically. Although Truby King designed some fresh air classrooms for a private girls school in Dunedin, Shelley's contribution is the best known. Open air schools were closely related to the new way of conceptualising children as unique beings with special needs that were separate from adults. The concept of a better environment for school children sat comfortably

¹¹⁹ NZOYB, 1926, p.156.

¹²⁰ National Education reported open air schooling in December 1 1925, under the title 'Methods with More "Sole" New Ideas of teaching: The Open-air Scheme', NE, 1 December 1925, p.409.

¹²¹May, The Discovery of Early Childhood, pp.134-135.

¹²² 'The Nursery School, 1919, What the Open Air Nursery School Is', a Labour party pamphlet, 1929, May, *The Discovery of Early Childhood*, p.136.

¹²³ These institutions aimed to educate tubercular children and to assist other children in ill-health. Carter, Gadfly, p.105.

with notions of child rights. Shelley's biographer, Ian Carter, thought that 'arguments for child-centred education', rather than medical ideas, 'drove the urgent need to construct open air schools'.¹²⁴ While he may have understated the importance of health, it is clear that Shelley believed that open air schools had educational as well medical benefits.

Professor Shelley promoted the distinctive quality of childhood. He believed that children were entitled to a healthy and natural environment. This provided the child with the means, in the words of the Declaration of Geneva, to develop 'materially and spiritually'. In an address to the NZEI Shelley 'condemned the idea that the child was a little adult'. He thought part of the problem with education lay in the design of the schoolroom since the child was 'cooped in a space, shutting out the world' where it was only possible 'to get what the teacher spooned out to him'. Shelley argued that the answer lay in active education: making the classroom open to the world and promoting the child's interaction with the environment. He believed that the ideal environment lay in the country. 'The village and country child got his education around the village, and by watching the seasons he realised his responsibility and that he must live and serve . . . The human was a simple organ based upon rural community and the country, not the town, was the proper place for the child'.¹²⁵ Shelley believed the open air classroom would bring the child in touch with the natural world, and prevent the separation from outward stimuli. His ideas seem very similar to McMillan's, though McMillan wanted to improve the conditions of poor children, while Shelley wanted to transform the environment of all children. This interwar concern with the natural world stemmed from the publication in the eighteenth century of *Emile* by John Jacques Rousseau. Rousseau believed that children could only be properly educated by being brought up in the natural world, running wild and experiencing the joys of fresh air and freedom.¹²⁶

Shelley fuelled the campaign for open air classrooms, but since his advanced ideas were unpopular in Canterbury he used a group of doctors as his spokesmen. The conservative Christchurch *Press* supported the campaign and the Christchurch Schools Medical Officer, Dr.R.B. Phillips, wrote a series of articles on fresh air schools for The *Press* in 1924.¹²⁷ The Education Board gave Phillips permission to build an experimental open air classroom at Fendalton.¹²⁸ The classroom had one side that opened to the elements. In Shelley's ideal model hinged glazed doors opened the side completely 'dissolving the distinction between indoors and outdoors, between schoolroom and playground', but the model that predominated in later school buildings had a wall of pivoting windows.¹²⁹

Authorities celebrated the new type of school. The Governor General, Sir Charles

¹²⁴ ibid, p.106.

¹²⁵ 'To Make the World Safe for Democracy. Education the Only Way', NE, 1 September 1922, p.269.

¹²⁶ John Jacques Rousseau, Emile, Dent, London & Melbourne, 1974, (first published 1762).

¹²⁷ Carter, Gadfly, p.106.

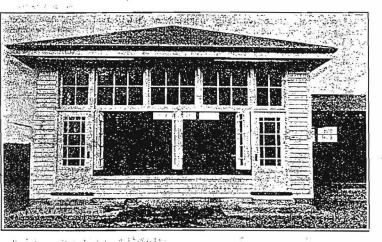
¹²⁸ ibid, p.107.

¹²⁹ ibid, p.105.

February 1, 1931



Exterior View of Tinwald Open-Air School, Canterbury





Children at Work in Sunlight and Fresh Air

Pholo sent by Miss E. Hurries of Tinuald School

The open air classroom Source: National Education, February 1 1931, p.44.

" Open for Business "

Fergusson, opened the Cashmere Open Air School in Christchurch. He heartily endorsed the fresh air philosophy, saying that :

in the Old Country or in any other country of the world, children could not be found to excel New Zealanders. "Why is that?" asked His Excellency? "You see extraordinary physical development . . . It is mainly from environment. It is from the healthy, open air, the free life which our forefathers had lived, and the general conditions under which people live in this country.¹³⁰

The Governor General concluded by stating that New Zealand's education system was unsurpassed by any other in the world.

The open air school reveals the close association that had developed in this period between health and education. Doctors influenced teaching, and the style of school buildings, while in turn being influenced by the work of educational philosophers. Most shared the concern with the health of the new generation, and of course doctors were parents too.

The work of Gwen Somerset, a pupil of Shelley's, shows an interesting intersection between the concern for health, open air schooling and new philosophies of teaching. In her autobiography *Sunshine and Shadow* she described how the local doctor at Oxford, a small rural settlement in Canterbury, suggested that they build an open air school.

One day, he came into my old classroom to see if it would be a suitable environment for his five year old son. He observed the crumbling plaster, the high windows, the overhead cobwebs and the crowded desks. He felt the glands in the neck of a six year old and suspected T.B. of which disease he had had a long experience. And he shook his head. "What we need", he stammered, as he always did, "is an open air school."¹³¹

Somerset heartily concurred and in May 1925 the new infant classroom opened. The open air school gave extra freedom for innovative teaching methods. The room faced on to an orchard that provided 'a delightful corner for stories, acting of plays and games of imagination . . . [we] enjoyed the delight of working with no walls at all; no limit to our freedom to move, or see, hear or feel the open world around us'.¹³²

The campaigns to educate the whole child and treat him or her as an individual had implications beyond schooling. Official concern shifted from education to children's health and welfare. The government argued that these factors impinged on children's education and therefore justified government intervention. Children's health and welfare became a yardstick by which New Zealand could be measured internationally. Consequently education authorities introduced the school medical and dental services, and transformed the school

¹³⁰ NE, December 1, 1925, p.403.

¹³¹ G.Somerset, Sunshine and Shadow, New Zealand Playcentre Federation, Auckland, 1988, p.154.
¹³² ibid. p.156.

environment. Teaching methods were modified. Along with the concentration on improving children's health came an increasing determination to classify and separate children so that 'subnormal' children would not affect the lives of 'normal' children.

The development of government services for children, starting in the 1900s and continuing in the 1920s and 1930s, extended control over children. Schools and organisations introduced new ideas of I.Q. testing, vocational guidance, and health care. Parents' control over their children's education, leisure, and occupations, diminished. The Education Department published pamphlets on choosing a career and private organisations attempted to provide vocational guidance. The state reached out inexorably to parents and families. Authorities emphasised parental responsibility, particularly that of the mother, but ironically, their attitudes and actions undermined parental control. Children and parents did not meekly acquiesce in these developments and a strong vein of resentment emerged throughout the period. Many parents resisted the department's desire to widen the curriculum and abolish examinations.¹³³ One women wrote a 'nursery rhyme of the future' that expressed a general anxiety at the time, that the state would take 'slow' children away from parents.

The Sad Story of Richard

"Oh Mother, save me from 'Dr Gray' 'Cause teacher says he's coming to-day And if I'm stupid he'll take me away. Oh, Mummie, save me from 'Dr Gray'!

"I cannot save you, my little child" His mummie said and her eyes were wild. "You belong to the State, you're no more my child! But Oh, my darling, don't stupid be Or he'll say we've tainted heredity, And must be eradicated - you and me!"¹³⁴

Fear of the overwhelming control of a socialist state emerged under the Labour government in the thirties. For example in 1944 the Labour government introduced B.20 cards which listed children's educational progress and abilities. The population regarded them as an example of the 'fascist' power of the state, and feared that teachers would label children.¹³⁵

Whatever the effectiveness of government policy the measures discussed here reveal the important shift that took place in attitudes to children, and their education, that occurred during World War One and the interwar years. Children became firmly part of the public

¹³³See Openshaw, Challenging the Myths, pp.156.

¹³⁴Bulkley, Mental Health Defectives Bill, CW 40/5/5, cited in Robertson, p.123.

¹³⁵ Goodyear, 'The Individual Child', pp.48-9.

arena, and their needs became a matter of national concern. Parental autonomy became less important than children's right to experience a proper childhood. In the words of the declaration of Geneva 'the child that is hungry should be fed; the child that is sick should be nursed; the child that is backward should be helped; the erring child should be reclaimed; and the orphan and waif should be sheltered and succoured'. This chapter has highlighted official attitudes to children but the following chapters will examine the lives of parents and children as they struggled to achieve a secure family life.

	- 1				
Part Two					
Experience of childhood					
	- 1				
9					
	6				



Another advertisement depicts interwar domestic bliss. The father is the centre of his family's attention as he lies back after a hard day at work, smoking a cigar. Advertisment in the Christchurch *Press*, 1925.

1

Chapter III 'Home is Home, Business is Business': Urban family structures and Husband/Wife relationships in the Interwar Years

Woman was the salt of society. She was needed everywhere. Man and woman were made to go through life together, sharing each other's sorrows, and doubling each others joys . . . A man does not want a duplicate for a wife, but a complement. He wants tenderness and grace, sweetness and love incarnated, his own rough, hard nature seeking the very opposite in his partner. The chances of a happy marriage for the modern girl disappear with all attempts to imitate the weaknesses and follies of her brothers.¹

Much to the consternation of observers, such as this Baptist minister, (see above quotation) urban families began to embrace the values of modernism in the interwar years. Family values shifted. Men and women adopted the suburban ideal, comprising a small family home without servants and based on the mother's labour. The urban or suburban family typified the 'modern family', and represents a sharp differentiation with the past, in both Britain and New Zealand. Stephen Humphries noted, in a study of parenting in Britain, that the 'modern ideal of parenting broke with some fundamental principles which had underpinned family life in the past'.² Society no longer placed such importance on patriarchal rule, strong kinship ties, and This change created anxiety, and society the household's economic independence. emphasised strict notions of gender in an attempt to provide security. New ideologies of parenthood and childhood both created change and reinforced the vision of the family created by the Victorian middle classes in Britain. In New Zealand government policy enforced the family wage in order to make this dream a reality. The ideology of separate spheres had emerged triumphant. New Zealand, with its higher incomes and egalitarian ideals, perhaps came closer than Britain to establishing a universal expression of this ideology.

Society believed that women and children were dependent on men but reality did not alway correspond with ideology. This strict moral and physical demarcation by gender worked best among the urban middle classes, less well among the working classes (especially the unskilled), and in rural areas. Poorer families struggled to survive, and took much longer to incorporate these new ideologies into their lives.³ The existence of a large number of

¹The Modern Girl. A Baptist Minister's View, The *Press*, 16 June 1925, p.10.

²Stephen Humphries & Pamela Gordon, *A Labour of Love: The experience of parenthood in Britain 1900-1950*, Sidgwick & Jackson, London, 1993, p.83.

³Philippa Mein Smith discusses this question in *Mothers and King Baby*, and concludes that a distinct class difference emerged in motherhood practices, with middle-class mothers much more likely to adopt modern methods of child-rearing. Philippa Mein Smith, *Mothers and King Baby Infant Survival and Welfare in an Imperial World: Australia 1880-1950*, Macmillan Press, Houndmills, Basingstoke, Hampshire and London, 1997, pp. 171-175.

Chapter III: 'Home is home, business is business'

widows and single mothers subverted the universality of the male breadwinner. Separate spheres never produced an ideal society. At first glance New Zealand society seemed smoothly to reflect gender ideology, but the mirror was a murky one, and contradictions and occasional ugliness existed beneath.

The chapter argues that modern ideologies of family life emerged first in urban areas, and spread rapidly from the middle classes to working class families. In the interwar period masculinist ideologies largely triumphed. But oral history allows us to understand the complexity of the changes that occurred. Men and women negotiated relationships within the framework of separate spheres and accommodated this ideology to serve their needs. No uniform family structure emerged, instead families developed their own power structures in response to individual desires and family pressures. Complex dynamics in family relationships emerged as new ideas influenced marital relationships and attitudes to children. Change occurred on a limited basis since class and income defined the experience of urban families in this period. The chapter introduces twenty-three urban families in New Zealand, exarnining their social background, and attitudes to marriage and family relationships.

Ι

The Urban Family: the social and economic background of 23 urban families

Urban New Zealand society in the interwar years had little in common with the highly industrial cities of Northern Europe, but remained distinct from its rural hinterland. New Zealand cities were fairly small in population, though often sprawling in design. In 1921 the largest city, Auckland, had 180,790 people scattered among 15 boroughs; Wellington, the next largest had 118,490 people; Christchurch 118,270; and Dunedin a population of 77,480.⁴ Historical factors such as wealth, religion, and to some extent ethnic origin, shaped the cities.⁵ Dunedin celebrated its Scottish heritage, Christchurch prided itself on being very English, while Wellington reflected the liveliness of the capital city. The other major city, Invercargill, remained fiercely independent and proud of Protestant origins, and Southland heritage. Small towns, as well as the larger towns of Rotorua, Timaru, Gisborne, Greymouth and Ashburton, were as close to the countryside in character as they were to urban centres. Even in the cities large areas of open space existed on the periphery with few areas approaching the density of population of an English city.⁶ Cities, even in the North Island, were predominantly European, because most Maori lived in rural areas during this period.

⁴*NZOYB*, 1926, p.98.

⁵ New Zealand's nineteenth century colonisers were overwhelmingly of British origin, a trend that was maintained in this period. Migration statistics for the twenties show that the majority of immigrants were from the British Isles: 8,703 from a total of 11,327 immigrants in 1927 alone. People from British countries made up 95.1 % of migrants, while the 'majority of immigrants from *foreign* [my italics] countries came from Jugo-Slavia, the United States of America and Italy'. *NZOYB*, 1929, p.87.

⁶ There were some exceptions; the largely working class area of South Dunedin had a high population density, but still cannot compare with the terrace housing in cities in Britain.

Chapter III: 'Home is home, business is business'

The urban families in this study were scattered throughout New Zealand, with the majority being South Islanders. Sixteen families lived in three of the four main urban centres; five in Wellington, eight in Christchurch and three in Dunedin. Joan Maudsley's family had a house in the expensive Wellington suburb of Karori, but Edward Twort, Elliott Atkinson, and Steve Harris lived in rented houses in working class areas around Wellington. Ivy Anderson and Basil Grether lived in poorer parts of Christchurch, Pauline Forest and Margaret Anderson lived in central Christchurch, while Jocelyn Gale, Jocelyn Vale, John Allison and John Johnson lived in prosperous suburbia. Mada Bastings and Vera Marett lived in South Dunedin, while George Goodyear grew up in Port Chalmers, Dunedin's port, where his grandfather had been the harbour master.⁷ Joan Wicks lived in suburban Invercargill. Joyce Musgrave and Dennis Kemp lived in the thermal town of Rotorua, and David Moore moved between Gisborne and Timaru. Mary Sherry lived with her grandparents in Timaru. Two families, the Williams and the Bensons moved from place to place frequently, alternating between rural and urban areas in the South Island.

These families came from a varied mix of social backgrounds which reflect the structure of New Zealand society at the time. The New Zealand mythology of equality denied the existence of social distinction, but a distinct upper class survived, and remained powerful in New Zealand. They were a substantial and powerful grouping: in 1926, 1 per cent of the population owned 30 per cent of private wealth.⁸ Two groups held this wealth: land-holding elites and mercantile elites.⁹ This upper stratum controlled such a high proportion of wealth that they had a great deal of influence socially, politically and economically, without being a gentry in the English sense. Jim McAloon, a New Zealand historian, writes that in 'in terms of values and mores, too, the colonial rich were effectively a British bourgeoisie'.¹⁰ Only two of the families in this study, the Buchanans (rural) and the Maudsleys (urban) could be counted in this highest social stratification. In 1926 blue collar workers made up approximately 60 percent of the male work force, with just over a third being unskilled workers. The remaining 39 percent of New Zealanders belonged to business, white collar and professional occupations. These percentages were not static and changed over time.¹¹

Defining the social status of the interviewees in this study proved challenging since, as Olssen and Hickey note in their working paper 'Towards an occupational classification for

⁷ By the 1920s the North Island contained well over half the country's population, and was more urbanised. The South Island contained proportionally a greater rural population.

⁸ R.J. Ford, 'Some changes in occupational and geographical distribution of population in New Zealand (1896-

^{1926)&#}x27;, Thesis presented for MA and Honours in Economics, University of New Zealand, November 1933, p.84. ⁹ Town and country held an almost even balance. Variation existed between regions; in Otago mercantile wealth predominated over agricultural and pastoral wealth while in Canterbury farmers were the wealthiest group. J.McAloon, 'The Colonial Wealthy in Canterbury and Otago: No Idle Rich', *NZJH*, vol. 30, no. 1, April 1996, p.46.

¹⁰ McAloon, 'No Idle Rich', p. 60.

¹¹ E.Olssen & M.Hickey, 'Towards an occupational classification for New Zealand', unpublished working paper, p.11.

Chapter III: 'Home is home, business is business'

New Zealand', New Zealand poses special problems for the historian. They argue that New Zealand differed from other countries in the developed world in two respects: even in 1930s the economy relied on primary production rather than industry, and the small family farm was a major form of property ownership in rural areas. Skilled workers owned their tools, and helped control the labour process, and many owned homes and section as well. New Zealand had a much more diverse distribution of property than most models of capitalist society allow.¹² Olssen rejected a simple Marxian two-class structure, developing a more elaborate and inclusive classification that traces the nuances of stratification in New Zealand.¹³ His system has been followed here, with the addition of a retired/benefits category

Туре	Names	% Interviewees	NZ Average
1) Larger Employers	Maudsley, Vale, (Wicks)	13.1%	
2) Professional & higher managerial	Allison, Anderson, (Goodyear), Johnson, Gale	17.4%	
3) Semi-professionals & small-medium employers (3-6 staff)	Musgrave, (Bastings) (Benson)	4.3%	
 4) Officials 5) Self-employed, or employers of less than two workers 	Williams, Marett, Kemp Forest	8.7% 4.3%	
6) White collar	Atkinson, Rylance, (Wicks), (Sherry)	4.3%	
Total 'middle class'	(*******), (******))	52.1%	39%
7) Skilled manual	Kemp, Bastings, Anderson, I., Harris	17.4%	
8) Semi-skilled manual 9) Unskilled manual	Moore, Grether, Twort Sherry, Robinson, Rylance	8.7% 8.7%	
10) Benefits	Rylance, Harris, Goodyear		
Total working class occupations		47.9%	60%

Table 2: Social class, 23 urban families in New Zealand

Note: Class/ status defined by father's occupation unless otherwise stated.

Note: Names in brackets mean that a man's occupations may have changed, so numbers add to more than 23 families.

¹² ibid, p.4.

¹³ Olssen's structure consists of: 1) Larger employers, 2) Professional and higher managerial, 3) Semiprofessionals, 4) Officials (caretakers & foremen) 5) Self-employed, 6) White collar, 7) Skilled manual 8) Semiskilled manual 9) Unskilled manual. Olssen, *Building a New World, work, society and politics in Caversham 1880 to 1920s*, Auckland University Press, Auckland, 1995, p.16. See pages 9-15 for a discussion of the problems of class analysis in New Zealand. Olssen acknowledges that while these classifications work fairly well for urban areas, rural occupations present a greater difficulty.