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A QUESTION OF RESPONSIBILITY -
THE PALMERSTON NORTH HOSPITAL BOARD AND
CHARITABLE RELIEF, 1925 - 1938

A research essay presented in
partial fulfilment of the requirements
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ABBREVIATIONS

<u>AJHR</u>	<u>Appendices to the Journals of the House of Representatives</u>
<u>Appendices</u>	<u>Department of Health - Appendices to the Annual Report of the Director-General of Health</u>
PNHB	Minutes of the Palmerston North Hospital Board

INTRODUCTION

This research essay is an examination of the distribution and administration of outdoor charitable relief by the Palmerston North Hospital Board over the period 1925 to 1938. The intention of this is to test certain comments made by historians concerning the administration of outdoor relief in the pre-Welfare State era in New Zealand. By examining relief administration in Palmerston North this study will add to our understanding of social welfare in a period that has not been investigated extensively.

The historiography of charitable relief in the period before 1938 is not substantial. Most of the historical theses and journal articles on this topic focus on the period to 1920, and commentary on relief after this period is limited. Studies that comment on charitable relief after 1920 do so in passing, in the context of wider discussions of social welfare or general history. There are, however, several features of this limited historical debate which are interesting.

Histories of the inter-war period concentrate on national events primarily, or upon the experience of the four main centres. The studies by A. Ashton-Peach, R. Noonan and R. Robertson exemplify this.¹ These works mention charitable relief only in passing when discussing the Depression period.

1. A. Ashton-Peach, "The Social Effects of the Depression in Auckland, 1930 - 35", M.A. Thesis, Auckland University, 1971; R.J. Noonan, "The Riots of 1932: A Study of Social Unrest in Auckland, Wellington and Dunedin", M.A. Thesis, Auckland University, 1969; R.T. Robertson, "The Tyranny of Circumstances: Response to Unemployment in New Zealand, 1929-35, with particular reference to Dunedin", Ph.D. Thesis, Otago University, 1978.

Furthermore, there are very few studies which focus on secondary centres during this period.² There have been two studies of Palmerston North in this period, for example, one of which had an economic perspective.³ While this study is not concerned in particular with Palmerston North's experience of the Depression, it will give an insight into some aspects of the experience of a secondary town during these years.

The historical studies of charitable relief in New Zealand primarily discuss the establishment and early years of the administration.⁴ The Hospitals and Charitable Institutions Act of 1885 assigned hospital boards the responsibility of providing relief to the sick, the aged and the indigent. This was essentially the colony's version of the 1832 English Poor Law which had been modified in New Zealand to include hospital boards in the distribution of relief. Public hospitals were established initially as medical centres for the poor and others who could not afford private treatment. Hospitals pre-dated charitable aid in New Zealand, and the duty of relief distribution marked an extension of medical responsibilities.

Most of the changes in the administration of charitable relief had occurred by 1920.⁵ The only major change to occur

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2. D.N.H. Lenting, "Organised Relief in Nelson City during the Depression", M.A. Thesis, Canterbury University, 1978.
 3. J. McGill, "An Examination of the Effects of the 1930s Depression on the Employment of Labour in Palmerston North", B.A. (Hons) Research Essay, Massey University, 1975; J. McGill, "An Examination of the Effects of Unemployment on Palmerston North during the Depression of the 1930s", Research Essay, Massey University, 1975.
 4. M.A. Tennant, "Indigence and Charitable Aid in New Zealand, 1885 - 1920", Ph.D. Thesis, Massey University, 1981.
 5. *ibid.*, pp. 19 - 52.

during the 1920s and the 1930s was the clarification of the matter of provision of unemployment relief by hospital boards. The fact that the administrative system had remained basically unchanged since 1920 may be one reason why historians have not studied this period closely. As a result our understanding of relief in this period is based on assumptions and statements made as to the nature of charitable aid in an earlier period. The possibility that such claims may not be applicable to relief administration in the 1920s and the 1930s has not been examined hitherto.

One area of assumption which will be investigated here concerns the role of the "front-line official" of charitable aid, the relieving officer. In her study of relief between 1885 and 1920, M. Tennant comments on some problems facing relieving officers. Such officials were often torn between the demands of relief recipients and the need to be responsible to the hospital board in financial terms, since the charitable relief budget was paid out of board funds. Many officers had no special qualifications for such a job. There were, moreover, no official guidelines set down to assist the relieving officer in his or her duty of administering relief. As pointed out by Tennant, the 1885 Act did not give any guidance on the day to day administration of relief. Most officers distributed relief according to their own standards, or on precedents as to what constituted a needy case. In this they were often assisted by the secretary of the hospital board or a specific Charitable Aid

Committee.⁶

It has been suggested that relief applicants were often seen as one of two types - the deserving and the undeserving poor.⁷ Tennant notes that one of the main attributes of the deserving poor was a disdain for charitable relief. Those seeking assistance were undeserving almost by definition.⁸ There were, however, some exceptions to this, for widows, deserted wives and families were often considered deserving. Nevertheless such a distinction did influence the treatment of an applicant.

This study will show that in Palmerston North during the 1920s and the 1930s the power and role of the relieving officer largely remained the same as they had been in New Zealand generally at the end of the previous century. The administration of relief was, furthermore, marred by similar problems such as the lack of official guidelines and the distinction between the deserving and the undeserving poor.

The studies of charitable aid in the period to 1920 have also suggested that the importance of relief in the wider functions of hospital boards was declining. Tennant has commented on the contraction of charitable relief as a result of the expansion of medical facilities offered by hospital boards.⁹

6. *ibid.*, pp. 144 - 171.

7. W.H. Oliver, "The Origins and Growth of the Welfare State", in A.D. Trlin (ed.), Social Welfare and New Zealand Society, Wellington: Methuen, 1977, p. 8; E. Olssen, "Towards a New Society", in W.H. Oliver (ed.) with B.R. Williams, The Oxford History of New Zealand, Wellington: Oxford University Press, 1981, p. 263; Tennant, p. 172.

8. Tennant, p. 173.

9. *ibid.*, p. 3.

This trend was not always obvious in Palmerston North during the period under discussion. It will be shown that there was an increase in charitable relief cases and expenditure during the 1920s and up until the mid-1930s in response to the conditions of the Depression. At the same time there was an expansion of medical facilities offered by the board but this did not have a major effect in financial terms on charitable relief.

There was, however, a contraction of the importance of charitable relief which was not necessarily reflected in financial terms. The administration of relief occupied an increasingly smaller portion of the board's time in the 1930s. Despite the fact that a specific sub-committee was established to supervise the administration of relief, it will be shown that this function was but a minor part of the committee's tasks. This was in marked contrast to the importance of relief in the 1920s.

Other claims made concerning the inter-war period will also be investigated. For example, a contemporary of the period has commented on the lack of trained personnel involved in administering relief and identifies this as a problem. An overlapping in the distribution of relief by a variety of charitable agencies which seldom cooperated was also seen as a problem in the 1920s.¹⁰ Both of these claims will be challenged. While it was true that the Palmerston North Hospital Board relieving officer was untrained, his considerable experience in relief work

10. E.M. Higgins, "The Hospital and Charitable Aid System of New Zealand", M.A. Thesis, Canterbury University, 1931, pp. 94 - 99.

compensated for this to a degree. Again, over-lapping did occur in Palmerston North because of the number of relief agencies but there was increasing cooperation between these from the late 1920s.

Another aspect of the historiography of the period is that charitable relief during these years has primarily been mentioned in the context of the Depression. Robertson and Noonan, for example, have highlighted the difficulties experienced by hospital boards as a result of an increased demand on their charitable services.¹¹ These authors suggest that the provision of unemployment relief was the dominant issue for boards at this time. Robertson outlines the details of the struggle between the government and hospital boards over the responsibility for this. He suggests that many boards were severely taxed by having to provide this relief, and as a result frequently petitioned the government to assume a greater role. The government's reluctance to do this forced the boards into an uncompromising stance on the issue. In June 1932 the boards announced that they would no longer assist the able-bodied unemployed after the end of the month. This forced the government to act, and in July 1932 an agreement was reached which clarified the responsibilities of hospital boards with regard to unemployment relief.¹²

This study will show that the Palmerston North Hospital Board was similarly troubled on this issue. Unemployment relief had never been considered as part of the traditional functions of

11. Noonan, p. 36; Robertson, "The Tyranny of Circumstances", p. 182.

12. Robertson, "The Tyranny of Circumstances", pp. 182 - 185.

the board, and the board remained reluctant to see it as any part of its duty. The expense incurred through providing such relief made the board particularly open to schemes and agreements which reduced its role in this. Moreover, the issue was of importance to the board throughout the whole period under discussion and was not confined to the worst years of the Depression.

This examination of the Palmerston North Hospital Board has been undertaken with these questions in mind. A provincial centre such as Palmerston North gives scope for the specific testing of some of the above claims which are perceived more often than not in a larger urban, or national context.

The period from 1925 to 1938 was an important time for the board. The unemployment situation in the district had been worsening from the mid-1920s, putting more pressure on the board's relief resources. Both the number of cases investigated by the board and relief expenditure increased after 1925. The relieving officer also began making detailed reports to the board in that year. Following the introduction of Social Security in 1938, many of the board's charitable functions were assumed by the state. That year marks a fitting end-point for a discussion of the board's administration of charitable relief.

This paper has been divided into several sections to facilitate discussion of the board's charitable services. As the provision of unemployment relief emerged as the major issue for the board during these years, the discussion has been framed around this.

The first period covering the years from 1925 to 1929 is primarily a discussion of the role of the relieving officer. The officer made his first detailed reports of charitable relief cases to the board in 1925. These reports provide a valuable source of information on the officer's role, power and attitudes to relief recipients. These reports ceased in 1929. In that year, too, the board made its first protest concerning its role in providing unemployment relief. The period from 1925 to 1929 gives an insight into these events.

The second of the three periods examined, covering the years from 1929 to 1933, was perhaps the most important for the board. Its relief expenditure increased markedly over this time in response to the rising number of relief applicants, many of whom were unemployed. During this period the board made determined efforts to reduce and define its responsibilities towards the unemployed. At the same time, various changes were made in the board's administration of relief, which served to reduce the relative importance of charitable relief in its wider functions.

The final period discussed, 1933 to 1938, shows the board's continued concern with the issue of unemployment relief despite the fact that the government had assumed much of this responsibility. The nature of relief also changed in this period to a degree. By 1938, the notion of charitable relief as it was in the 1920s had disappeared from the board's records.

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