

## Illustrations from the Wellcome Institute Library

### The Archive of the Health Visitors' Association in the Contemporary Medical Archives Centre

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#### The Association's Development

The Association began life in 1896 when a small group of women, employed as sanitary inspectors in London public health departments, decided to meet informally to discuss common problems and issues of current interest. This small discussion group, then known as "The Women Sanitary Inspectors' Association", has gone on during the course of the twentieth century to extend its membership widely in the public health field, particularly among women health workers, and to develop into an established and important health service union, having recently amalgamated with the Manufacturing, Science and Finance Union (MSF).

At the outset, sanitary inspectors and health visitors were the two main types of women public health workers which the Association sought to represent. The origins, development and relations between these two professions provide a necessary framework for the understanding of the Association's early records. They can, however, be somewhat difficult to unravel.

Although the early origins of health visiting lay in the philanthropic visiting movement of the mid-nineteenth century which employed the services of bible- or mission-women (the very first "health visitors" were appointed in 1863 by the Ladies' Sanitary Reform Association of Manchester and Salford), it was the infant welfare movement of the late nineteenth and early twentieth centuries which really established this new profession, as a growing number of health visitors became attached to both voluntary health societies and local authority health departments which provided services in this field. Their duties concerned the health of pregnant women, nursing mothers and children under school age, and their role was to extend the work of infant welfare centres and other educative and mothercraft training measures into the home.

The first two professionally employed women sanitary inspectors in England were appointed in the London Borough of Kensington in 1893. Their major duties concerned the enforcement of the recent factory and public health legislation as it affected women's employment and they undertook the inspection of the premises of dressmakers, milliners,

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laundries and other workshops where women were employed and also monitored the working conditions of outworkers. By 1904 twenty-one other London boroughs and the authorities of several large cities had followed suit, establishing this as a new profession for women.<sup>1</sup> Women sanitary inspectors were expected to hold the same qualification as their male colleagues, the certificate of the Sanitary Institute. However, by the early twentieth century, they had come to have some responsibilities distinct from male inspectors which were generated by involvement in efforts to reduce infant mortality rates. This is where the activities of women sanitary inspectors came to overlap significantly with those of health visitors. Indeed, women were often appointed in the dual role of sanitary inspector and health visitor as, at the outset, there was no statutory authority to appoint health visitors in their own right.

In the early years of the twentieth century, as the idea of maternal education as the main weapon in the fight against infant mortality gained ground, there was an increasing demand for the services of health visitors in local authority and voluntary sectors alike. This led to the Notification of Births Act in 1907, and its prescriptive successor in 1915, which facilitated the arrangement of visits to all homes in which a new birth had taken place. This gave a real impetus to the development of health visiting as a separate and established service, leading to the wider appointment of health visitors by local authorities (the health visitor was designated as a new class of official under the London County Council (General Powers) Act in 1908). Gradually a formal training system for health visitors developed and the Royal Sanitary Institute began to set examinations in health visiting in 1908. Finally, in 1918, the Maternity and Child Welfare Act enabled local authorities to set up a range of services, including salaried health visitors.

It was these women, both sanitary inspectors and health visitors, who came to form the early membership of the Association. Its main aim was spelt out when, in April 1904, after it had been in existence for over seven years, the Association was formally constituted "for the promotion and intercourse among its members and others of such knowledge of sanitary science as falls within the department of a Woman Sanitary Inspector or Health Visitor". Early meetings consisted of a lecture, often by an outside speaker, followed by a discussion. Written accounts of these meetings were initiated in 1902, marking the beginning of the Association's record keeping with a series of "Sessional" or "General" minute books. Early subjects tackled included the causes of infant mortality, outworkers, the homes of the poor, the registration of tenement houses, dyeworks, public conveniences for women (or, rather, the lack of them), domestic precautions against the spread of consumption, administration of the Food and Drugs Act and the Dairies and Milkshops Orders.

### **Changes within the Association**

From the beginning the Association also interested itself in the career status and working conditions of its members, and this was adopted as a formal policy in 1909. From this date consideration was given to the advisability of affiliation to the trade union

<sup>1</sup> T Orme Dudfield, *Women's place in sanitary administration*, Women Sanitary Inspectors' Association, 1904.

movement, and, in 1918, after strenuous debate and a ballot of members, the Association registered as a trade union and went on to affiliate to the National Union of Women Workers and to the Trades Union Congress, becoming the first health service union so to do.

The membership base also underwent change. Although the Association invited members from outside the capital in 1906, and numbers had risen to sixty-three, it still accepted as full members only health visitors who were also qualified sanitary inspectors, and continued to hold an ambivalent attitude to this “new profession”. Indeed, health visiting was often perceived as a threat to the status of the woman public health officer in relation to her male counterpart, since, as yet, it lacked a standard qualification and had no statutory power. Health visitors also commanded a lower salary than that paid to woman sanitary inspectors which became a cause of concern to the latter, particularly when the services provided by each came to overlap significantly. For a long time the Association continued to campaign for the dual appointment of sanitary inspector and health visitor. With the rapid growth of health visiting as a profession and the development of a formal training system, however, this position became increasingly difficult to maintain and the minutes chronicle the events and sometimes acrimonious debates of the period 1914–1917 during which matters came to a head.<sup>2</sup>

In 1915 the Association changed its name to the “The Women Sanitary Inspectors’ and Health Visitors’ Association” but a situation in which the name of the Association reflected the importance and numerical strength of health visitors whilst denying many of them full membership rights still caused a certain amount of friction and the initiative was felt to be slipping from the Association.<sup>3</sup> In May 1917 a vote was taken to enlarge membership to include all health visitors, tuberculosis visitors and superintendents of maternity and child welfare centres. In 1921, membership was also extended to further categories of health worker, including school nurses, clinic nurses, municipal midwives, infant life protection visitors and superintendents of infant welfare centres. By this date, therefore, the women sanitary inspectors who had formed the original core of the Association were just one group among the many which it aimed to represent, health visitors probably being the largest of these. This extension of membership had repercussions on the Association’s title and in 1930 it became “The Women Public Health Officers’ Association” changing again in 1962 when it adopted its present title. It was felt that this reflected better the actual composition of the membership, although other categories of public health worker were still eligible to join.

The emphasis of the work of health visitors themselves has also shifted during the century. Following the National Health Service Acts they were charged with a role in preventive health for the whole family, rather than just mothers and babies, and the Association published a summary of *The duties of the health visitor in the National Health Service*.<sup>4</sup> This emphasized that knowledge of the social conditions affecting the welfare of the family had become crucial to the work of the health visitor who was now expected to act as liaison between the social services and the family. Motions put forward at the Annual General Meetings of the 1950s, for example, included such subjects as juvenile

<sup>2</sup> CMAC:SA/HVA/B.1.3–7.

<sup>3</sup> By 1917, for example, many of the staff of Manchester Public Health Department had founded a union of their own in consequence of their non-

inclusion in the Association, and many Health Visitors felt bitterness on account of its membership policy (CMAC:SA/HVA/B.1/6 2 May 1917).

<sup>4</sup> CMAC:SA/HVA/D.2/5.

delinquency, prescription charges for pensioners, security of tenure of council tenants, dental treatment of children, investigation of persistent refusal to work and school absenteeism.

### **The Association's Archive**

In 1993 the Association decided to deposit the extensive archive which it had accumulated with the Contemporary Medical Archives Centre. The records date from the very first volume, begun in 1902, and consist of minute books of the Executive Committee and various sub-committees, annual reports, publications produced and collected by the Association, photographs, and a small number of files and general administrative material. Having been sorted, arranged and weeded of duplicates and certain ephemeral items, these now amount to ninety-four boxes of material. A very simple arrangement has been adopted for the collection, although as the Association is still a very active body, future accruals of material on a five-yearly basis were catered for when the catalogue was structured. Runs of minute books, annual reports, publications and photographs were sorted into their natural sequences, the remaining odd administrative files, volumes and papers being placed in a single chronological sequence. Books collected by the Association on subjects of professional interest were transferred to the Historical and Modern Medicine Departments of the Wellcome Institute Library.

#### *Minute Books*

Of the core records of the Association, there is in the collection a complete set of the minutes of General Meetings from 1902 to 1971 (CMAC:SA/HVA/B.1/1–10). The minutes of the Executive Committee also present a complete run from its establishment in 1905 to 1982 (CMAC:SA/HVA/B.2/1–30). Throughout this period it was the only committee required by the Association's rules, and, in effect, the governing body of the Association. However, in 1939 the terms of reference of the pre-existing Finance and Staff Sub-committee were enlarged, enabling it to transact all the business of the Association between meetings of the Executive Committee, which were consequently reduced in frequency. This new committee and its successors thus created a third major series of minutes, which, again, form a complete sequence, from 1941 to 1985 (CMAC:SA/HVA/B.3/1–20).

The survival of the records of the rest of the sub-committees, working parties and joint consultative committees, has been more haphazard, as is often the case when officers of an organization are mostly part-time volunteers. However, the collection includes material from around forty special interest committees ranging from long-standing and well established committees to *ad hoc* working parties, although the coverage is variable and only a few later volumes may survive for a committee which ran for many years (CMAC:SA/HVA/B.4–28).

The work of some of these committees reflects the way in which the Association co-operated with related organizations to achieve its aims. The Co-operation Committee, for example, was formed in 1926 to deal with correspondence from other organizations, to appoint representatives to attend their meetings and to receive the representatives' reports.

The first minute book of this committee which remains is that for 1945–6 and it lists the organizations to which the Association was affiliated at that date including the NALGO Standing Joint Committee, the Women's Advisory Council of the League of Nations Union, the Children's Nutrition Council, the Committee on Illegitimate Children of the National Council for the Unmarried Mother and her Child, the British Federation of Social Workers, and the National Association of Maternity and Child Welfare Centres. The International Sub-committee, set up in 1947, dealt with matters concerning overseas members, exchanges, tours, visitors from abroad, etc. Joint action with other organizations is also represented by the minutes of several joint consultative committees such as the Public Health Nursing and Midwifery Liaison Committee which discussed matters of common interest to the three professions in the 1960s and 1970s.

The minutes of the Conditions of Service Sub-committee, the Whitley Steering Committee and others bear witness to the constant efforts of the Association to ameliorate the working conditions and defend the interests of women in the public health service while the Consultative Committee of Matters Relating to the Rushcliffe Committee, 1942, and the Prices and Incomes Board Sub-committee, 1968, also monitored any trends which might affect the terms of employment and salaries of members.

The minute books of such bodies are therefore invaluable in documenting the day-to-day concerns of the Association, especially since the central administrative and correspondence files are a rather disappointing, sparse and random collection. There is only one significant series of files: that relating to the central training council of the profession from 1965 to 1983 (CMAC:SA/HVA/C.21–35).

#### *Publications and other Projects*

Conversely, the collection of publications is an extremely rich one, reflecting the varied interests of the Association. It gradually developed new methods of achieving its original aim, that of promoting the interchange of professional knowledge, such as the annual conference, summer and winter schools, the establishment of a journal, programmes of educational tours and international exchanges, and as a result of these activities new categories of record were generated. Although the first conference of the Association was in 1910, it was not until 1931 that a regular series of annual conferences began, as represented by published reports, programmes and papers (CMAC:SA/HVA/D.1/1–20). The conference papers record interesting contributions to contemporary debates, including in 1931, for example, one by M Wilson on 'The position of women public health officers who are required to undertake duties which are contrary to their convictions e.g. to assist at Birth Control Clinics'.<sup>5</sup> The first Association-run winter school was held in 1921–2 and the first summer school was in 1942. The collection includes course programmes and outlines for some of these as well as booklets published by the Association containing series of lectures given under titles such as *The family and the nation*, 1936, *War-time measures and post-war planning*, 1942, and the glorious

<sup>5</sup> CMAC:SA/HVA/D.1/1: *Report of the first conference of women public health officers*, London,

Women Public Health Officers' Association, 1931, pp. 36–8.

### *The Archive of the Health Visitors' Association*

*Health triumphant*, 1948 (CMAC:SA/HVA/D.3/1; D.4/1–14). In 1929 the visit of German public health and social workers to London organized by the Association marked the beginning of a regular series of international exchanges and educational tours. Handbooks and reports exist for around eighteen of these tours, including ones to Germany in 1930, Canada and the USA in 1939, Sweden in 1949 and Israel in 1955 (CMAC:SA/HVA/D.5/1–25). The Association also published a set of booklets of model talks for the use of health visitors at infant welfare centres in the 1930s and 1940s on a variety of topics relating to childcare and home management which give an interesting insight into what was considered good practice in child rearing at that date (CMAC:SA/HVA/D.6/1–4).

Other publications produced by the Association reflect a different strand of activity, that of promoting its members' interests, and include published responses to government policy such as *Memorandum on matters connected with the administration of the Maternity and Child Welfare and other Acts directly concerning the work of health visitors*, 1926, *Memorandum of evidence on the proper field of work, recruitment and training of health visitors and the NHS school health service*, 1954, and *Health visiting in the seventies and the staffing of the health visiting and school nursing service*, 1975 (CMAC:SA/HVA/D.7).

The first issue of the Association's journal appeared under the title of *The woman health officer* in 1927, this was changed to *Health visitor* in 1964. An almost complete run is held from January 1947 to July 1994 (CMAC:SA/HVA/H.1–416). Some examples of the articles published give an idea of the range of subjects tackled: E Baguley 'On being evacuated' (November 1939), 'The tracing and follow-up of tuberculosis contacts' by Charles Stewart (February 1955), 'Incommunicado: a review of childhood autism' by D J Bentley (January 1974) and 'What will we find at the market?' by Sylvia Prentice, a discussion of the 1990 NHS and Community Care Act (January 1991).

The collection includes publications on a variety of topics of professional interest produced by other organizations and collected by the Association (see Figure 1), ranging from Evelyn Fuller, *On the management of a birth control centre*, published in 1922 by the Society for the Provision of Birth Control Clinics, to Ruth Sharman, *Child abuse: a discussion paper*, published by the Council for the Education and Training of Health Visitors in 1983 (CMAC:SA/HVA/D.7). Health care leaflets collected include such items as M B Douie's *How girls can help towards social hygiene*, published by the British Social Hygiene Council c. 1925, and *Recipes for food and conduct* published by the Chelsea Babies' Club in 1943 (CMAC:SA/HVA/D.8).

### *Photographs and other Records*

The photographs in the collection are particularly strong in documenting official Association events such as dinners, conferences, presentations and special events from the period 1930 to 1985 (see Plate 1a). Those depicting the work and interests of health visitors are a more meagre collection, mainly from the 1950s and 1960s. They include small groups of photographs illustrating a variety of duties of the health



Figure 1: Health care leaflets (CMAC:SA/HVA/D.8).

visitor, such as ante-natal and relaxation classes and visiting mothers and new babies at home (see Plate 1b).

Also acquired by the Association are small groups of records generated by related organizations and the papers of five individual health visitors who have worked both in this country and abroad. The provenance and custodial history of these papers is obscure. They have been kept with the archive and are arranged in separate sequences and listed at the end of the catalogue. The records of organizations include annual reports of the Chelsea Health Society and School for Mothers, 1916–1967, and the minutes of trustees, 1936–1960, and accounts, 1957–1968, of the Institute of Infant Welfare Fund (CMAC:SA/HVA/F). Lady Cynthia Colville, President of the Association from 1930 to 1963, was also Chairman of the Trustees of the Fund, which, in 1960, began to provide travelling scholarships for health visitors to study infant care, feeding and management or the teaching of mothercraft in other countries. As a result of this, the Fund increased the number of its Trustees to include three representatives of the Association, which was to play a large part in drawing up the scholarship scheme.

Small groups of papers belonging to five individual health visitors help to cast further light on day to day experiences and illustrate the variety of work with which they became involved. Rachel Barnes (1881–1981), obtained her RSI Health Visitors' certificate in 1915 (her lecture notebook and examination papers are in the collection) and was employed by Surrey County Council Public Health Department from 1918 to 1946, her duties included home visiting, clinic and welfare work (see Figure 2) and school health in north-east Surrey. Her papers illustrate the interest and sometimes the frustration of her work in these areas and include programmes and press-cuttings about Baby Week activities in Surrey in the 1920s and 1930s, papers to do with wartime arrangements and the government evacuation scheme, health and information sheets compiled and used by Nurse Barnes, some charming photographs (see Plate 2) and even her own portable baby scales (CMAC:SA/HVA/G.1). Some of her papers give a detailed insight into particular events or incidents such as a disturbance at Thames Ditton Infants' School when Nurse Barnes incurred the wrath of a mother by taking firm action against her child's headlice.

The papers of G K Burne (1912–1989) present a rather different picture (CMAC:SA/HVA/G.3). She worked as a District Nurse in Nevis, Leeward Islands, British West Indies, from 1943 to 1946 and as Supervisor and Training Officer of Health Nurses, Harcourt Health Centre, Hong Kong, from 1947 to 1962. Her papers include surveys she undertook in Nevis on infant mortality, illegitimacy, school children, infants attending clinics, tuberculosis and paternal care, reports on the health visitors' training scheme she established at the Harcourt Health Centre, and an intriguing file about the puppetry techniques which she developed for Hong Kong Chinese health visitor trainees to use in health education work. There is also an amateur film which she made at the Harcourt Health Centre in 1954, entitled *Students of mothercraft*, which shows mothers, babies and trainee health visitors at an infant welfare clinic in glorious 1950s colour.

**A** is Advice, which is given you free ;  
**B** is for Babies, one, two and three.  
**C** is the Centre in Molesey we've made ;  
**D** our good Doctor who lends us his aid.  
**E** stands for Economy, taught to us there,  
**F** is the Future for which we prepare.  
**G** is for Glaxo, fine babies it builds ;  
**H** is for Hygiene, which saves Doctor's bills.  
**I** is for Ideal,—and Infants too,  
**J** is the Joy they bring to you.  
**K** stands for Kiddies, the big and the small.  
**L** is the Love we have for them all.  
**M** stands for Mothers, who all come to see ;  
**N**, our Nurse Barnes, on every Friday.

**O** is for Ovaltine, a splendid food ;  
**P** stands for Powders, which sometimes do good.  
**Q** are the Questions we all like to ask,  
    To answer them all Nurse has quite a task.  
**R** stands for Rules, which must be obeyed ;  
**S** stands for Scales on which we are weighed.  
**T** is for Tea, at 1d. a cup,  
**U** stands for Us, who all drink it up.  
**V** is for Virol, it will make you grow strong, and  
**W**, your Weight will go up before long.  
**X** is our 'Xcellent audience here ;  
**Y** is for Year—come again please, next year.  
**Z** is the Zeal, which is shown by each helper  
At the E. & W. Molesey Infant Welfare Centre.

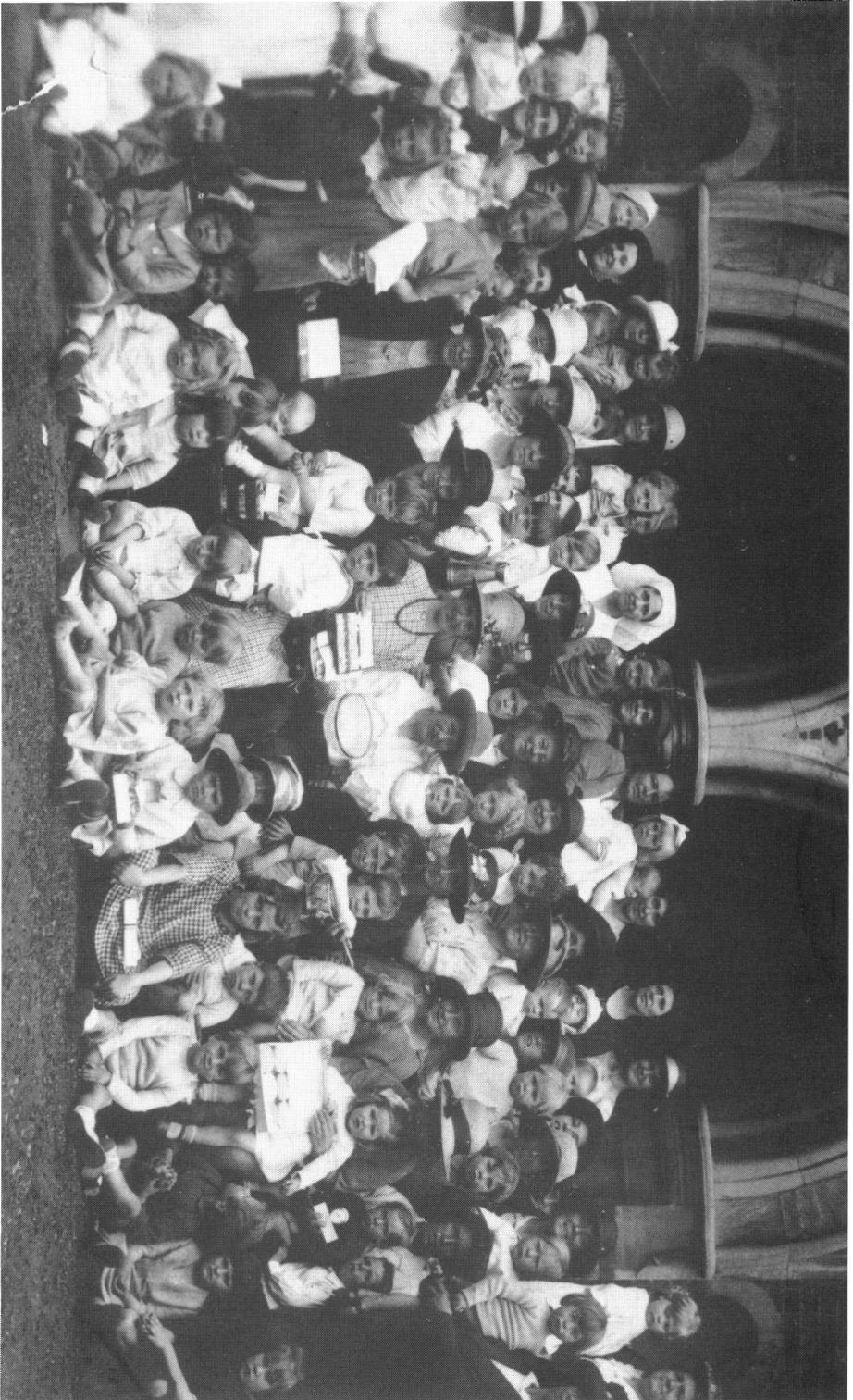
*Figure 2: Infant welfare centre 'A-Z', from the papers of Rachel Barnes (CMAC:SA/HVA/G.1/4).*



*Plate 1a: A Health Visitors' Association formal dinner c. 1930 (CMAC:SA/HVA/E.1/1).*



*Plate 1b: "Invitation to attend antenatal classes", Northamptonshire Health Department, c. 1965 (CMAC:SA/HVA/E.3/5).*



*Plate 2: Mothers and babies at an infant welfare centre, Surrey, c. 1930 (CMAC:S/A/HVA/G.1/19).*

### **A Century of Public Health Issues**

Together these records reflect a century of public health issues: health in the community, in people's homes, schools and workplaces, as well as in clinics and welfare centres. The waves of public concern over the sanitary conditions of the poor in Victorian cities, over infant mortality and maternity welfare in the early part of this century, and over socio-medical problems since the Second World War are all embraced, but, just as importantly, the collection documents the working lives, employment conditions, views and attitudes of the women public health professionals whom the Association has represented over the years.

At some stage prior to their transfer to the Wellcome Institute the archive had, however, been stored in far from ideal physical conditions and the resulting dirt, mould growth, insect infestation and rodent damage have taken a severe toll on the early minute books, some of which are, as a consequence, too fragile to be handled at present. A programme of both paper conservation and rebinding is now under way so that this rich and interesting material may be made fully available for study. The later volumes suffer from a different set of preservation problems which will also need to be tackled in the future: their spines have been put under stress by the sheer bulk of enclosures and these are often attached with damaging glue and sellotape.

Because of the wide interests of the Association, the collection is complemented by others in the Contemporary Medical Archives Centre. Some relevant collections are listed in the sources leaflets published by the Centre on *Nursing, midwifery and health visiting, Birth control, Nutrition and Mothers and babies* which are available free on request.

The archive of the Health Visitors' Association may be consulted by prior appointment, and upon signing a Reader's Undertaking form, at the Contemporary Medical Archives Centre, in the Wellcome Institute for the History of Medicine.