When radio broadcasting first crackled onto the airwaves it was met with great enthusiasm from the wider public. Although we may now associate it more with late night talk-back sessions and music’s top forty, educational broadcasting was a key feature of early radio and helped to establish a deeply ingrained listening culture within New Zealand. Educational broadcasts helped to legitimise radio as more than just a source of light entertainment. Women were a key target for many radio-based educational efforts, viewed as both the main consumers of broadcast content and in the greatest need of instruction within the domestic sphere. Health and the idea of ‘scientific motherhood’ were a key component of these efforts. When World War Two required the Department of Health to adopt new methods of connecting with the public, radio was deemed the most effective option. Women were responsible for the health of the family, and there was already a well-established culture of educating women within the domestic sphere via the radio.
"A year or two ago writers on scientific subjects were dreaming about these things; to-day they are a reality. Wireless telephony has ceased to be a toy for the amateur, it is no longer a laboratory experiment; it has become a practical utility, and will soon be a necessity."

"Wonders of the Wireless Telephone," Waipawa Mail, 7 October 1921, 4.

Radio was still in its infancy when the Waipawa Mail printed this prediction, yet they could not have foreseen just how rapidly their classification of radio as a ‘necessity’ would become a reality. The Government had only legalised non-governmental radio broadcasting and receiving the year before, and listening licences numbered a scant 300. There were no real stations to tune in to, broadcasts were sporadic at best, and entertainment programming was yet to exist. Despite this, radio was already beginning to capture the minds and ears of the population. With radio stations and regular broadcasting established from 1922, licence numbers steadily grew before exploding in the 1930s. Radio was a cultural phenomenon. It was found in homes, hotels, hospitals and community halls, filling spaces with noise and keeping listeners entertained with a variety of different musical genres and short talks. Radio dramas, a precursor to television’s popular soap opera genre, helped to create a growing sense of national identity across the country, with listeners sharing the experience of hearing a story develop. Magazines and newspapers discussed the latest in broadcast programming. Popular broadcasters became notable public figures, such as ZB’s Maud Basham, otherwise known as the loveable ‘Aunt Daisy’. Radio culture was thriving.

So how did a medium usually associated with music and light entertainment become one of New Zealand’s longest running sources of health information? Educational broadcasting played a significant contributing factor to the success and culture of early radio. A wide variety of educational talks, also known as lecturettes, were provided by the various radio stations, with subject matter influenced by the time of day and perceived audience. These broadcasts were a key feature of radio’s development in New Zealand throughout the 1920s and 1930s. Listeners were keen to learn, and the government promoted the use of radio for personal improvement. Women found themselves the intended target of many attempts to encourage better domesticity and motherhood, particularly during the daytime when they were considered the key consumers of content. It was in this context that, when faced with challenges on how to educate the population on matters of health during the war, the Department of Health turned to radio.

The outbreak of World War Two placed New Zealand’s health under an unwelcome spotlight. Pre-war concerns regarding nutrition and childhood disease were now given greater urgency, as rationing removed traditional food sources and mothers found themselves facing solo-parenting. The war also caused fuel and paper to be rationed, meaning that the usual methods of educating the public on matters of health, such as pamphlets and posters, were no longer viable. Radio, however, continued to broadcast unhindered. With an already established culture of radio being used to educate women within the home, it made sense for the Department of Health to shift towards broadcasting as a means to educate the public on matters of health. Women were the keepers of the nation’s health, feeding the family and raising children, therefore they needed to be educated on how to best maintain health during the war. An additional benefit of radio was the ability to cross the urban-rural divide, reflecting the widely dispersed, and sometimes geographically isolated, population of New Zealand. Broadcasting health information into the home also allowed for difficult matters to be addressed, without embarrassment, and remind women that it was their war duty to protect the nation’s health.

LEARNING TOGETHER, SEPARATELY: THE ROLE OF EARLY EDUCATIONAL BROADCASTING IN RADIO’S DEVELOPMENT

“This year has had its share of spectacular successes in programmes and also of programmes of real solid worth apart from musical entertainment, as, for instance, in the talks to farmers, the home science dialogues and the W.E.A. lecturettes.”

The New Zealand Radio Guide and Call Book, 1931

Radio’s early popularity in New Zealand was owed, in large part, to female listeners. Relegated to the domestic sphere, women found radio to be an excellent tool for entertainment and education. Initially considered a masculine, scientific invention, the domestication of radio through physical design and female-focused daytime content made the radio a domestic tool and an integral part of a modern home.
The friendly voices of broadcasters acted as company for housewives, while music could help to liven the domestic chores. Educational lecturettes on household matters provided suggestions for increased efficiency and helped women to conform to societal expectations placed upon them by scientific domesticity. These lecturettes were crucial in helping to develop a culture of radio being viewed as a reliable source of information and legitimised for educational purposes.

During the first few years of broadcasting, transmission was limited to evening hours only, however the growing popularity of the medium caused broadcasting hours to be extended throughout the 1920s and 1930s in response to consumer demand. Radio broadcasting was strictly controlled by the Government during the interwar period, despite the existence of a dual system of broadcasters: the publicly funded National (YA) radio stations and privately operated Commercial (ZB) stations. In 1925 the Government mandated that all stations were required to broadcast a minimum twelve hours per-week, excluding Sunday. Although a seemingly small requirement, this was significant as it indicated that there was a certain standard expected of broadcasting stations. Individual stations began to lengthen their evening output, before daytime broadcasting hours across New Zealand were officially extended during 1927. The acceptability and popularity of radio was ever increasing.

A new 3 – 5pm session was developed by the Radio Broadcasting Company for all National stations, aimed predominantly at female listeners, although it was not initially advertised as a women’s session. Assessing the content broadcast during this time slot reveals a clear gendered intention regarding who was perceived to be the listening audience. ‘Suitable’ topics were discussed, often relating to the domestic realm, such as informative talks on cookery or sewing, and broadcasting “afternoon tea” music. There was a growing perception by broadcasters and advertisers that women were the main consumers of radio content due to their role within the home, creating the idea of a ‘domestic’ audience. This would eventually extend to the creation of a dedicated ‘Women’s Hour’ programme in the 1930s.

Radio did not threaten the societal expectation that a women’s role was in the home, as it did not hamper their traditional work. Instead, it promoted it. Informative talks on household matters advocated for improved domestic skills, encouraging women to educate themselves in modern housekeeping methods, and reinforced the ideal of the housewife or mother within the home and upholding family values. Some housewives shifted their daily routines in order to be at home to listen to specific broadcasts – such was their popularity and the believed value of radio. These afternoon lecturettes were some of the first purposeful educational content to be broadcast, along with ‘interesting’ evening talks of a longer length. While modern listeners might associate radio more closely with music, educational or informative talks were a key feature of radio from its initial development, and were an important facet of developing New Zealand’s radio culture and establishing broadcasting patterns. Early governmental debates regarding radio had always indicated that it should serve some form of...
educational role, presenting information to the public and fostering societal improvement. While the implementation of these initial lecturettes on the National YA channels was at the impetus of government influence, educational and domestic programming also appeared on the Commercial ZB channels. This suggests that there was a market for these talks more broadly. Listeners paid a licencing fee of £1.10s per year to own a radio set, as well as often making donations to their local Commercial ZB station, therefore it was a consumer item and the interests of the listener had to be considered when deciding upon programming. If there was not some degree of popularity for these educational lecturettes, it is unlikely that they would have been replicated by the Commercial ZB channels.

Over the course of radio’s first decade there was a growing acknowledgement that radio could be considered a reliable source of information. Increased broadcasting hours allowed for a growing number of educational talks to be provided over the air. With a culture of listening to the radio for information and education beginning to be well established, adult education providers grew increasingly interested in the potential of radio. At this point educational content, such as the afternoon lecturettes, was generally provided by people who worked for the station, or by a variety of specialists who were invited to speak. The Home Economics Association helped to facilitate some lecturettes on the Christchurch-based National 3YA channel, but there was no marked reoccurring involvement from any educational institutions on a national level. By the end of the 1920s, however, adult education providers were beginning to take advantage of the broad reach and appeal of radio. The University of Otago Home Science Extension Service (HSES) was the first organisation to use the radio to broadcast nationwide talks aimed at women at home, particularly those who lived rurally. Prior to engaging with radio, those interested in an educational subject would have attended lectures at a public venue, such as a church or town hall, or had to rely on written sources. These options were not always available to all, especially rural or remotely located individuals and families. Māori would have also had difficulty accessing these educational opportunities for similar reasons. Harnessing radio broadcasting would enable a far greater proportion of the population to engage with what these education institutions had to offer, shifting education from the public to the domestic sphere.

Based in Dunedin, the HSES had been restricted in their impact due to a limited geographical reach, however, they used radio to far more success. Beginning in 1929, their 15-minute talks were written by university professors from the Home Science Department and discussed scientific and modern approaches to domestic duties, including aspects of health. Women were the clear target of these talks, reflecting the perception that modern women needed to be educated on the best way to keep their homes and feed their families. Rural women were a particular focus of HSES efforts, due to a pervasive belief that they were less likely to adapt to modern housekeeping methods than their urban counterparts. Professor Ann Strong, Dean of the Home Science Department during this period, believed that rural women were the backbone of the country, and that with correct teaching they could help raise a healthy and strong nation. Originally from America, Professor Strong was aware of successful efforts by American universities running extension programmes via the radio. By the 1930s, radio was viewed in several western countries as a successful way to educate women in the home, on domestic matters. The HSES radio talks provided education on a variety of areas such as sewing, cooking, parenting and healthcare, including how to prevent dental cavities and avoid goitre – both public health issues. Professor Strong questioned the relevance of new medical and nutritional knowledge to the general public if it was not put into practice. Practical advice and application of knowledge was key to many of the HSES’s efforts under Professor Strong’s leadership.

The Workers Education Association (WEA) also saw the potential benefits of using radio broadcasting to supplement their already extensive education schemes, broadcasting from 1927/28 - 1934. For the WEA, radio was viewed as a way to reach rural workers in particular, as they believed that those people missed out on the same educational opportunities as urban dwelling workers. Educating rural adults was also an opportunity to “modernise the countryside,” particularly within the domestic realm, and enhance rural living by providing interests outside of the farm and home – but still within the rural setting. Through broadcasting, the WEA created the ability to teach adult education within the home without the time and travel commitments that would otherwise be required. Radio talks allowed the WEA to extend the reach of their educational directive through a variety of single lectures that covered a broad range of topics. During 1934 around 288 lectures were broadcast, covering a wide range of topics, including art, history and biography, economics and science. A March 1933 edition of The New Zealand Radio Record and Home Journal indicates just how broad the range could be, with talks on “Banking in New Zealand,” “Southern Whales and Antarctic Whaling,” “Giants of
German Music – Wagner,” “The Middle Ages and Ourselves – Religious and Philosophic Thought,” and “Birds of a Feather and Human Groupings” broadcast across the nation within the same week. Topics were only limited by those willing to contribute. Lectures were generally presented by academics or specialists, with the WEA receiving wide support from various tertiary providers.

While the HSES and WEA were not the only institutions to take advantage of broadcasting, they best exemplify how an established programme was modified to take advantage of radio very early on. Adults were also not alone in being targeted for educational broadcasting. Government and broadcasting officials discussed the possibility of airing educational material for school children as early as 1926, with the suggestion made that broadcasts could be used to supplement both rural and urban school curriculums, and Correspondence School materials. Rural and Correspondence School children were considered the most likely to benefit from educational broadcasting, providing ‘improvement of instruction’ through access to specialty teaching.

Financial issues ended up delaying the implementation of broadcasting for school children until April 1931. By 1936, 576 schools were using these broadcasts as a teaching resource, as well as the Correspondence School and students learning from home. As children were considered part of the domestic

---

**FIGURE 2.** S. P. Andrew Photographer, “Maud Ruby Basham (Aunt Daisy) (left), and Elizabeth Barr,” S P Andrew Ltd: Portrait negatives, Ref: 1/2-045465-F, Alexander Turnbull Library, Wellington, New Zealand.

---

**BROADCASTING HEALTH INTO THE HOME: THE DEPARTMENT OF HEALTH’S FIRST FORAY INTO RADIO**

With radio holding an important cultural role in New Zealand, and completely legitimised as a source of information and education, it was only natural that the government would choose to announce New Zealand’s entry into World War Two (WWII) over the airwaves. Choosing to broadcast showed the significance and urgency of the event, while also allowing for both the urban and rural populations to hear the news at the same time. For those who lived rurally, relying on the newspaper could sometimes mean delays in receiving information. The war had a tangible impact on New Zealand’s Home Front. Men left to fight overseas, women were manpowered into the essential industries, and rationing was gradually implemented for an increasing variety of goods. For the Department of Health, the war placed a growing urgency on health concerns that had come to light during the 1930s. The nation needed to be healthy if they were going to win the war. While it was every civilian’s patriotic duty to strive for excellent health, they needed to be provided with the tools and education to do so, but rationing meant that many of the usual methods were no longer viable. Paper restrictions, first introduced in 1940, impacted the Department’s ability to distribute pamphlets and posters. Attendance at agricultural events was also no longer possible, due to fuel rationing or postponement for the duration, further diminishing the Department of Health’s ability to connect with the rural population.
In light of these new challenges, new methods of promoting health education needed to be found. Director-General of Health Michael Watt had already demonstrated a long-term interest in trying to encourage a greater emphasis on health education for the public across all health departments. Traveling through America and Australia pre-war, Watt had been impressed by the American State Health Department’s use of radio to provide health advice, and nutritional broadcasts in Queensland, Australia.38 In New Zealand, health and the domestic sciences had been a feature of educational lecturettes since the early years of radio broadcasting, but without any overt involvement or control from the Department of Health.39 While these lecturettes had proven helpful, they lacked any consistency and there was no singularly authoritative source to rely on. Multiple broadcasters touching on health issues held the potential for misinformation, or contradictory information, to be broadcast.

Beginning in 1941, the Department of Health took the unprecedented step of actively using radio broadcasting to promote health.40 A series of radio talks were created as a direct response to the challenges created by WWII and a continuation of the Labour Government’s push to expand their broadcasting presence in the home and support the creation of the ideal family unit. The Department of Health’s radio talks were the first concerted effort made by the government to specifically target adults nationwide and educate them on health. As the government continued to control all broadcasting during the war, due in part to the increased need for censorship, the Department of Health was able to easily take advantage of broadcasting as a medium for mass communication.

The Department of Health’s first radio venture, Health in the Home, was an effort to reduce the spread of misinformation and ensure public health during a period of war. A number of Departmental staff contributed to these broadcasts, providing content and crosschecking for Health in the Home before it was broadcast.41 Compiled by Eric Marris, a Health Department staff writer, and anonymously presented by Dr Denham of Wellington Public Hospital, Health in the Home was broadcast weekly on the National YA channels.42 Each of the four main stations would broadcast on a different day, cycling through the produced content. These early talks proved popular with listeners, leading to a continued run throughout the course of the war. Topics covered included a wide variety of medical issues, public health advice, nutritional information, and childhood developmental disorders. The Listener published a health advice column in conjunction to the talks, beginning 9 May 1941, written by New Zealand’s first State Nutritionist, Dr Muriel Bell, and the Director of the Division of School Hygiene, Dr H. B. Turbott. Turbott and Bell were espoused by the magazine as authoritative sources of health information for readers who did not know who “to listen to and accept” during a period when there were “so many voices proclaiming ways to keep well.”43 A physical column enabled listeners to have a more permanent copy of advice already heard over the radio.

Although popular, broadcasting once a week was not enough to be effective. In June 1943 a second opportunity arose for the Department of Health to expand their broadcasting outreach. Charismatic radio personality Colin ‘Uncle Scrim’ Scrimgeour was fired from his role as Controller of the Commercial Channels, losing his highly sought-after early morning broadcast slot on the ZB channels.44 Scrimgeour had filled his session with a variety of items, including health advice. Initially his efforts had been applauded, given his large audience reach, and the Department of Health had been happy to provide Scrimgeour with information and scripts. However the relationship was terminated when Scrimgeour knowingly chose to broadcast contentious health information about alternative medicines.45 Not only did these broadcasts go against official public health advice, some of the information had the potential to be outright harmful. Seeing the opportunity to take over a timeslot already established for health broadcasting, and with a much broader appeal, the Department decided to establish a second series of educational health broadcasts.46

A new radio venture to educate the public on health issues required an appropriate person to lend their voice to the initiative. The ZB commercial channels were well known for their range of broadcasting personalities, most using the title of ‘aunt’ or ‘uncle’, creating a sense of family and unity.47 Despite a lack of practical broadcasting experience, Dr H. B. Turbott was chosen to represent the Department of Health over the radio. Initially the offer was only temporary, with the idea that Turbott would fill in for a few months, but a replacement was never found.48 Turbott’s personal background made him an excellent choice for the role. He had spent many years training in public health, showing an enthusiasm for tackling difficult issues, and was exposed to a variety of cultural backgrounds and practices. Turbott’s work with Māori, specifically researching the issue of tuberculosis, provided him with insight into Māori health problems.49 This work had earned him a level of respect from prominent Māori leaders. Appointed to the Department of Health’s head office in 1940, his role as Director of the Division of School Hygiene made Turbott keenly aware of health issues facing
school-aged children in New Zealand. As Director, there had been an increasing focus on the role of health education within schools. Turbott’s view of education as important to prevention also aligned with Director-General of Health Michael Watt’s push for greater health education measures.

From June 1943 to June 1946, Turbott’s voice was broadcast into homes across the nation, every morning at 7:30am, except Sunday. Simply listed as “Health Talks” in The Listener’s broadcasting guide, usually with little other information provided, Turbott’s talks covered a broad scope of topics. Unlike the YA Health in the Home broadcasts, which were kept “impersonal” and not attached to any names, Dr Turbott was introduced as the ‘Radio Doctor’. The personal association provided a warmth and friendliness, much like the ‘Aunts’ and ‘Uncles’ that were prominent on the ZB channels, while Dr Turbott’s position within the Department of Health gave the talks authority. As a male, his gender further added to his authority and gravitas when broadcasting. Female presenters were generally limited to less serious subjects of conversation, such as domestic topics, since radio executives believed that was what their home-based female audience would appreciate.

It was not until the 1950s that women were able to discuss more serious or controversial topics on air, during the unscripted ‘Women’s Hour’ sessions. Male doctors were also the societal norm, as women represented a small minority of medical practitioners in New Zealand in the 1940s. Dr Turbott characterised the medical professionals that listeners were likely to come into contact with at the doctor’s office, providing a sense of familiarity.

Tuning in: Who is listening?

Identifying who was the listening audience for Dr Turbott’s broadcasts can be difficult, but by analysing the content, and perceptions regarding listening audiences, we can interpret who the intended audience was perceived to be. Over the last sixteen years women had been repeatedly targeted by radio lecturers discussing domestic topics, as there was an ongoing belief that women needed to be educated on how to ‘properly’ raise children and run the home. Scientific motherhood, a dominant ideology during the interwar period, acknowledged women as controlling the domestic sphere, yet also questioned their ability to do so. Institutions promoting this ideology implied that women inherently needed guidance and education to properly fulfil their role. Dr H.B. Turbott’s radio talks can be interpreted as a continuation of the idea that women needed to be actively educated in scientific motherhood. Mothers and wives were viewed as key to tackling some of the wider health issues that faced the population, despite being placed under increased stress due to the war. If women were educated on how to prevent illness and treat minor injury then the overall health of the nation would improve.

The “Radio Doctor” talks instructed women on the responsibilities of motherhood, such as food preparation and nutrition, as well as how to deal with common childhood ailments and provided information on ‘correct’ parenting techniques. Nutritional issues were a key subject, reflecting the impact of rationing and unresolved pre-war concerns. Scripts for these nutritionally focused talks were provided by Dr Muriel Bell, who focused on practical advice – much like Professor Anne Strong of the HSES did. Cooking advice, simple explanations about vitamins and deficiency, and easy replacements for rationed or out-of-season goods were key elements of Bell’s talks, aimed at helping the housewife navigate these issues. Housewives were expected to feed the family a nutritionally balanced meal. Not doing so could result in developmental defects for their children, which could in turn impact their ability to become a contributing citizen in the future. Medical and public health issues were
addressed, of course, covering a number of major and minor ailments. From athlete’s foot through to cancer, diphtheria immunisation to diagnosing appendicitis, even knowing when – and how – to call the doctor was discussed. Oral health was featured with surprising frequency, including in talks on nutrition and childrearing. Mothers were encouraged to breastfeed their babies to help them develop jaw strength and appropriate spacing for new teeth. Calcium rich foods were important for strong teeth and bones, while children were not to be trusted to buy their own lunches at the school tuck shop due to their propensity for choosing sugary treats. Parenting and child development were also frequently discussed, providing support for mothers who were facing the difficult task of child rearing with a reduced support system, given that many men had left to fight. Although arguably outside what might be considered public health, children were the future generation of soldiers, workers and mothers, therefore there was concern regarding appropriate mental and physical development. A new social focus on the quality of childhood and psychological development of the child had emerged during the interwar period. Mothers were now expected to invest more time and energy into their children to ensure that they not only had the best start to life, but also developed appropriately.68 Rural mothers were publicly critiqued for not dedicating themselves enough to their children’s needs, ignoring that many of them played a key role in running and maintaining the farm on top of their domestic chores. While mothers were the key audience for these talks, fathers were often mentioned or spoken to within Turbott’s discussions.69

From these factors we can see that women, particularly mothers, were perceived to be the key demographic for Dr Turbott’s talks. They represented a continuation of educational efforts established during radio’s early years and were believed to be for the betterment of New Zealand as a whole. Radio was deemed the best way to reach women as it didn’t disrupt their domestic lives. Although the Department may have broadcast the talks with a specific audience in mind, radio was accessible to anyone with a licence and a receiver. Archival files with fan mail to Dr Turbott reveal that there was broad public appeal for these talks. While mothers were listening, they were joined by young teenagers wanting to know how to rid themselves of pimples, old men asking how to reverse their balding crowns, and the odd businessman who wanted a copy of talks on occupational health for his workers.68 Turbott’s listeners were varied, but all shared the same concern for their health and those who surrounded them.
Dr Turbott’s health talks were seemingly popular and effective, however a post-war return to normality meant that he could leave the airwaves in 1946 to return to other Department of Health work. This would not be the end of the ‘Radio Doctor’ though. Turbott returned in 1952, as New Zealand faced a wave of poliomyelitis sweeping the country. His job was to reassure and educate the public, encouraging healthy habits such as handwashing and covering coughs and sneezes. Radio ownership had continued to expand, and a post-war economic boom allowed for an increasing number of portable transistor radios, and cars with radios installed, to flood the market. The Department of Health still considered the radio an effective method of educating the public, allowing Dr Turbott into the intimate sphere of the home. Broadcasting allowed the listeners to feel as though Dr Turbott was talking directly to them, which in turn enabled difficult conversations to take place. Between 1952 and 1984, when Dr Turbott gave his final radio broadcasts, discussions were held on alcoholism, drugs, contraception, abortion and AIDS. This continuation of broadcasting was enabled by radio’s longstanding role as a source of education and information, and the deeply embedded listening culture that remained pervasive throughout New Zealand.

From the first few years of radio’s development, a culture of using the radio to broadcast educational information began to exist. Women were targeted as they were viewed as both the main consumers of radio content and in the greatest need of instruction within the domestic sphere. These talks helped to legitimise radio as more than just a source for light entertainment. At the outbreak of World War Two the Department of Health needed to find a new way to educate the public on keeping healthy. The health of the family was considered a woman’s responsibility to ensure, therefore it was crucial that they be reached. A long-established culture of listening to the radio for educational and informative content made broadcasting the obvious choice for the Department of Health. Through their various talks they were able to connect with women within the domestic sphere and reinforce perceptions that women required to be guided in how best to care for their families.


Health Education and Publicity – Fan mail re broadcast talks. 1944 – 1945, 34/2/4, H1 Box 1391, Archives New Zealand, Wellington.


2. For a better indication of where public radios were found, see The Star (Christchurch), “Notes of the Day,” 26 August 1927: 8.

3. Benedict Anderson’s conceptual framework of ‘imagined communities’ can be applied to radio broadcasting, particularly in the early 20th century when there were fewer options to tune in. Listeners across the country were as- sured a shared experience, while the nature of programming and specific time slots allowed for rhythmic listening pat- terns to be formed. Benedict Anderson, Imagined Communi- ties: Reflections on the Origin and Spread of Nationalism, revised edition (London: Verso, 2006), 35.


5. Lectureettes, otherwise known as “little lectures,” was the title given to many of these adult education talks by the Radio Record when publishing the schedule. Talks on do- mestic or feminine subjects were frequently given this title.


8. The National YA stations were generally considered to be more highbrow, and were influenced by the governmen- tal ideal of radio as a means of improving the population. Commerical ZB stations were thought of as lowbrow, instead catering more directly to their local listeners, which gave them a level of popularity. Without this popularity they would have most likely not survived, as their income was largely reliant on listener donations.


11. For an example of the types of talks given see: “2YA Features – Sir Toby King – Infant Welfare”; The New Zealand Radio Record, Vol. 1, No. 15, 28 October 1927: “A Programme Of Wireless Topical Songs” by Miss M. Puechegud; “The New Zealand Radio Record, Vol. 1, No. 2, Friday 29 July 1927; “Afternoon tea music from the Savoy.” The New Zealand Radio Record, Vol. 1, No. 4, 12 August 1927: 10. The regularity of informative ‘do- mestic’ talks depended on which station’s you listened to, but there were generally at least two of a distinctly domestic or feminine nature each week.

12. This is at least the perception for daytime broadcasting. Day, The Radio Years, 238 – 239.

13. Ibid.


18. The Workers Educational Association also became in- volved in radio broadcasting around the same time, however their broadcast schedule appears to be sparser and less dedicated in frequency. I have also found no evidence to suggest that there was a nationwide schedule or circu- lated talks, with each region varying in broadcast content depending on who was willing to speak.


23. Clarke, 20, 35.


25. While Roy Shucker’s official history of the Workers’ Education Association (WEA) in New Zealand claims that initial experimentation with radio broadcasting began in 1928, primary source evidence from The New Zealand Radio Record shows that there were intermittent WEA talks given during 1927, broadcasting from Dunedin.


27. Bell, 214, 219.

28. Roy Shucker, Educating the Workers? A History of the Worker’s Education Association in New Zealand (Palmerston North, New Zealand: The Dunmore Press,1984), 6. Radio also allowed the institution to overcome the immense regionalism that was created due to there being no national governing body when the WEA was first established. This regionalism caused issues with consistency of content and

29. Shuker, 96.


35. Day, 207, appendix one.


39. The employees from the Department of Health did provide some material to various stations or radio personalities, but this was uncredited.

40. This is opposed to passively using radio as part of their broader advertising scheme. I did not find any archival evidence of radio advertising predating these talks, but this may have been due to my search parameters.

41. Dr H.B. Turcott was a key contributor, having previously provided some one-off scripts to both the National Broadcasting Service and the Director of Education, under his role as Director of the Division of School Hygiene. Health Education and Publicity – Radio, 1940 – 1976, 34/2, AAFB W4914 632 Box 213, Archives New Zealand, Wellington.

42. Dr H.B. Turcott to Dr M. Bell, 14 July 1941, Health Education and Publicity – Radio, 1940 – 1976, 34/2, AAFB W4914 632 Box 213, Archives New Zealand, Wellington.

43. The Listener, “Expert Advice on Health – “The Listener” Doctor’ piece during their “Kitchen Front” segment, from 2 May 1942. It is possible that the New Zealand Department of Health may have been aware of this, as the National Broadcasting Service was still modelling itself on the BBC and replaying sixteen hours of BBC content each week – despite the war. Asa Briggs, The BBC – The First Fifty Years (Oxford: Oxford University Press, 1985), 192, 227.

44. ‘Aunts and Uncles’ generally fronted shows aimed at children, although there were exceptions such as Aunt Daisy, who spoke to women.

45. Turcott claims in his autobiography that Prime Minister Peter Fraser personally asked for him to fill the role, but I cannot find any archival evidence to support this claim. H. B. Turcott, “A N.Z. Doctor – Peripatetic,” unpublished autobiography, c.1984 (author’s own collection), 55.

46. Day, The Radio Years, 238.


50. Dow, 129.

51. Although Dr Bell had written to Dr Turcott to encourage anonymity for the Health in the Home radio series, historian Patrick Day notes that the YA style of broadcasting tended to choose anonymity regardless. Dr M. Bell to Dr H.B. Turcott, 16 July 1941, Health Education and Publicity – Radio, 1940 – 1976, 34/2, AAFB W4914 632 Box 213, Archives New Zealand, Wellington; Patrick Day, The Radio Years – A History of Broadcasting in New Zealand (Auckland: Auckland University Press, 1994), 188.

52. Day, The Radio Years, 238.


55. The number of women in medicine remained small until the 1970s. Brookes, A History of New Zealand Women, 416, 419-420.


57. Ibid.


60. Health Education and Publicity – Fan mail re broadcasting talks. 1944 – 1945, 34/2/4, H1 Box 1391, Archives New Zealand, Wellington.