

The “problem” of abortion in 1930s Aotearoa New Zealand: a study of social attitudes in selected print media, 1936-1938

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The issue of abortion, its practice and its perceived consequences, was a matter of public concern in 1930s Aotearoa New Zealand.¹ There is relatively little historiography on abortion during the 1930s, that which exists has tended to focus on the McMillan Inquiry² submissions and report and the newspaper clippings that are available in the Health Department files on abortion that are held in the National Archives.³ The focus of historical inquiry has been limited to what the Health Department thought was important enough to file. This has shown a view of the New Zealand state, medical profession, churches and to some extent society at large as dominated by small minded, punitive, eugenic and morally conservative organisations and individuals.⁴ This essay will look elsewhere than the Health Department files to discuss what aspects of the practice of abortion were considered a problem at that time, how its problematic status was defined and what solutions were proposed.

The first section discusses the lead up to the formation of the Committee of Inquiry into the Various Aspects of the Problem of Abortion in New Zealand (popularly known as the McMillan Inquiry) in 1936. The second discusses the responses to the McMillan Inquiry report in three publications: newspaper *The Christchurch Press*, the socialist magazine *Tomorrow* and women’s magazine *Woman Today*. The third will conclude with a discussion of the social attitudes expressed in these publications compared to the view that has been established in current historiography.

Generally speaking, in Britain and her colonies the practice of abortion was increasingly criminalised during the nineteenth century.⁵ It then became increasingly scrutinised as a problem during the early twentieth century. The practice of abortion was by no means static; different methods were popular at different times and this was reflected in the way that concern about abortion was expressed. In the first twenty years of the century so-called “quack” medicines, substances and pills sold via

¹ The same was true in other western countries such as Australia, England, Canada and the United States of America at that time. See for example Barbara Brookes, *Abortion in England, 1900-1967*, London, New York, Sydney, 1988; Leslie J Reagan, *When Abortion Was a Crime: Women, Medicine, and Law in the United States, 1867-1973*, Berkley and Los Angeles, 1997.

² The Committee of Inquiry into the Various Aspects of the Problem of Abortion in New Zealand, 1936-37.

³ Barbara Brookes, 'The Committee of Inquiry into Abortion in New Zealand 1936-37', BA Hons thesis, University of Otago, 1976; Barbara Brookes, 'Reproductive Rights: The Debate over Abortion and Birth Control in the 1930s,' in *Women in History: Essays on European Women in New Zealand*, Barbara Brookes, et al., eds, Wellington, 1986; L. L. Smith, 'The Problem of Abortion in New Zealand in the Nineteen-Thirties', MA Research Essay thesis, University of Auckland, 1972; Philippa Mein Smith, *Maternity in Dispute, New Zealand 1920-1939*, Wellington, 1986.

⁴ Brookes, 'Reproductive Rights,' p.131; Smith, *Maternity in Dispute*, pp.107-8.

⁵ Brookes, *Abortion in England*, pp.22-3.

chemists and mail order companies to “restore menstrual flow” and “remove obstructions”, were identified as problematic by the New Zealand Branch of the British Medical Association. In the 1930s there were still concerns about the sale of quack remedies, which by this time included contraceptives, but the main concern was the rise in the number of women dying from septicaemia caused by physical interference with a pregnancy.⁶ In spite of the NZBMA’s concerns, the government’s own statistics show that abortion was, for the most part, safer than childbirth until the hospital reforms of the 1920s. Even at the most extreme time of maternal mortality from septic abortion (in 1934 these made up one third of maternal deaths) the estimated risk of death from abortion was only 0.7%.⁷

The issue of abortion, and whether the practice should be decriminalised, was a hotly debated topic in many European and British white settler colonies during the 1920s and 1930s. By the mid 1930s the state supported provision of abortion services on social as well as medical grounds had come to be seen as a hallmark of socialist and communist countries. In Europe decriminalisation occurred in Sweden, pre-Nazi Germany and, earliest and most controversial, the Soviet Union.⁸ In England, the Abortion Law Reform Association was formed in 1935 to support the provision of abortion by doctors for medical and social reasons.⁹

The practice of abortion or rather its relatively high contribution to maternal deaths in New Zealand was an issue of concern for the Health Department and the newly formed branch of the New Zealand British Medical Association (NZBMA) - the Obstetrical Society. The monitoring of maternal deaths, which included those that occurred during pregnancy, after a miscarriage and during or after childbirth was well established by the end of the 1920s, but the separation of deaths from septic abortion and from post childbirth puerperal fever was not effected until 1927.¹⁰ The separation revealed, not only what proportion of maternal deaths were caused by septic abortion but also that abortion related deaths were on the rise relative to other maternal deaths. In 1927 abortion related deaths accounted for 14 out of 137 deaths, just over 10%. By 1930 that figure had risen to 30 out of 136 deaths (22%) and in 1934 abortion related deaths numbered 42 out of 118, or 36%.¹¹

Health Department officials were alarmed at the apparent rise in abortion related deaths, but were of the opinion that this was a phenomenon related to the current economic status of the country.¹² Like the rest of the western world, New Zealand

⁶ Brookes, 'Reproductive Rights,' pp.122-5; Smith, 'The Problem of Abortion in NZ', p.14; Smith, *Maternity in Dispute*, pp.101-3.

⁷ Of the 6,000 abortions estimated to be performed each year, 42 women died in 1934. 'Report of the Committee of Inquiry into the Various Aspects of the Problem of Abortion in New Zealand', *Appendices to the Journal of the House of Representatives*, 1937, H31A.

⁸ Henry P David, Jochen Fleischhacker, and Charlotte Hohn, 'Abortion and Eugenics in Nazi Germany', *Population and Development Review*, 14, 1, 1988; Annulla Linders, 'Abortion as a Social Problem: The Construction of "Opposite" Solutions in Sweden and the United States', *Social Problems*, 45, 4, 1998; Susan Gross Solomon, 'The Soviet Legalization of Abortion in German Medical Discourse: A Study of the Use of Selective Perceptions in Cross-Cultural Scientific Relations', *Social Studies of Science*, 22, 3, 1992.

⁹ Brookes, *Abortion in England*, pp.79-104.

¹⁰ Smith, *Maternity in Dispute*, pp.102-3. An interesting study on the statistics collected by the Health Department see Pam Patterson, 'the Nation's Wealth' but at What Cost? Maternal Mortality Auckland 1870-1920', Research Essay MA thesis, University of Auckland, 1994.

¹¹ Brookes, 'The Committee of Inquiry 1936-37', p.88.

¹² Smith, *Maternity in Dispute*, pp.106-7.

during the early 1930s was experiencing its largest economic depression since the 1880s. From 1929 to 1935 the Great Depression saw the highest unemployment rates for decades, possibly up to 32% if women and Maori were taken into account, along with slumps in exports, imports and food consumption. The response of the Government, its relief-work schemes in particular, was less than satisfactory for workers and there was rise in the popularity of socialist and communist perspectives. The Labour party, born out of a working class base, won the election of 1935 and governed until 1949. Although the Depression was already in decline in 1935 the government set in place a number of policies aimed at benefiting workers, farmers and employers alike, including the provision for a basic (male) wage to support a family with three children.¹³

The political outcome of the Depression was to raise the status of New Zealand to one of the most socialist of Britain's white settler colonies. But it was socialism tempered by the more traditional moral restraint that had characterised New Zealand society.¹⁴ This perhaps was not surprising, for even in England the newly formed ALRA struggled to gain acceptance and support from both Unions and the Labour Party.¹⁵ The socialist leanings of the Labour Government did not extend to entertaining the possibility of decriminalising abortion or the provision of regulated abortion services.¹⁶ The provision of contraceptive devices and advice through the medical profession was far more widely advocated for than access to abortion.¹⁷

By 1935 the issue of abortion related deaths was already well established as a problem within the Ministry of Health, the Health Department and the Obstetrical & Gynaecological Society (O&G Society).¹⁸ In 1935 the Minister of Health had invited women's organisations to discuss how to reduce the incidence of abortion, and in 1936 the National Council of Women had formed a small committee to address the situation.¹⁹ The election of the new Labour Government did not slow the calls for some kind of action to reduce the incidence of abortion. In March 1936 Professor Joseph Bernard Dawson, Chair of Obstetrics at Otago Medical School, offered a resolution to the O&G Society which called for the Government to institute a commission or committee to investigate the increase in the abortion death rate. The resolution was passed and forwarded to the Prime Minister, Michael Joseph Savage. The Health Department, particularly Drs Thomas Paget, Inspector of Private Hospitals, and M H Watt, the Director General of Health, were more circumspect. They believed that an inquiry would not reveal any more information than they already had to hand and that the key to alleviating abortion deaths would be an improvement in the economy. Watt, however, also believed that the publicity

¹³ James Belich, *Paradise Reforged: A History of the New Zealanders from the 1880s to the Year 2000*, Auckland, 2001, pp.245-69; Brookes, 'Reproductive Rights,' pp.120-1.

¹⁴ Belich.

¹⁵ Brookes, *Abortion in England*; Tania McIntosh, "'an Abortionist City': Maternal Mortality, Abortion, and Birth Control in Sheffield, 1920-1940', *Medical History*, 44, 1, 2000.

¹⁶ There does not appear to have been any support for abortion law reform voiced by any of the branches of the Labour Party during the 1930s. The Timaru Branch suggested that provision of birth control clinics be made in maternity wards. Brookes, 'The Committee of Inquiry 1936-37', pp.7-8.

¹⁷ Most New Zealand researchers have struggled to find many advocates for decriminalisation of abortion in the documents available. See for example *ibid*; Brookes, 'Reproductive Rights.'; Smith, 'The Problem of Abortion in NZ'; Smith, *Maternity in Dispute*.

¹⁸ The Obstetrical Society changed its name to the Obstetrical & Gynaecological Society in 1932.

¹⁹ Letter from Dr Ada Paterson to Dr M H Watt, Director General of Health, (undated) 1936, H1, 131/139/7.

generated by such an inquiry would help to stimulate better social support of families by the new government.²⁰

The response of the government to the Society's resolution took some time. It is questionable whether anything would have come of it at all if there had not been a highly publicised coroner's inquiry into the death of a young woman. She had been buried before the death certificate was released and later exhumed for post-mortem to determine the cause of death. She had died from abortion related septicaemia. The inquiry revealed, at best, poor judgement on the part of a doctor and a politically embarrassing "cloak of silence" that protected the abortionist.²¹ The coroner later admitted he had misinterpreted the actions of the Health Department in obtaining the ruling on doctors' obligations to report illegal abortions,²² but the publicity further supported the O&G Society's request for a commission. The government did not act on the resolution until August and when they did act it was to appoint a committee of inquiry not a Royal Commission.

The committee was made up of four doctors and one lay woman; Dr David Gervan McMillan MP (Chair); Dr T F Corkill, President of the O&G Society; Dr Sylvia Chapman, medical superintendent of St Helen's Hospital Wellington; Dr Thomas Paget, Inspector of Private Hospitals, Department of Health and Mrs Janet Fraser, a well known philanthropist and wife to the Minister of Health.²³ The committee invited submissions from a range of organisations and individuals, and also received some from non-invitees.²⁴ Very few submissions advocated for abortion services, and the few that did only did so under extreme conditions.²⁵

The committee's report was widely publicised when it was issued in early 1937. The committee concluded that some 6,000 abortions occurred in New Zealand per annum, two thirds of which were criminally induced. These abortions caused New Zealand to have one of the highest death rates from abortion in the western world. The submissions suggested that there were four main causes of resort to abortion in New Zealand:

*(1) Economic and domestic hardship; (2) changes in social and moral outlook; (3) pregnancy amongst the unmarried; and (4) in a small proportion of cases, fears of childbirth.*²⁶

²⁰ Smith, *Maternity in Dispute*, pp.108-9.

²¹ *Dominion*, 1936, 30 May, 2 June, 10 June; *Otago Daily Times*, 2 June 1936, p 4; *NZ Truth*, 3 June 1936.

²² Letter from JR Bartholomew, Stipendiary Magistrate, Dunedin to the Undersecretary, Department of Justice, 26 June 1936, H1, 131/139/7

²³ Smith, *Maternity in Dispute*, p.109.

²⁴ Minutes of the meeting of the Committee to Enquire into the Incidence of Septic Abortion in New Zealand, 18 August 1936, H1, 131/139/11. Invitees included the NZBMA, the O&G Society, the National Council of Women, League of Mothers and Mothers' Union, Society for the Protection of Women and Children, Women's Division of the Farmers' Union, Registered Nurses' Association, the Eugenic Society, New Zealand Medical Women's Association and church representatives.

²⁵ One of these was Dr Sophia De la Mare, who spoke on behalf of the National Council of Women (NCW). Although she advocated for women's access to contraception, when asked she agreed that abortion should be made available in the case of contraceptive failure until such time that contraception was more reliable. Her statement caused an outcry from at least one branch of the NCW who did not want legalised abortion associated with their organisation. Brookes, 'The Committee of Inquiry 1936-37', pp.36-7.

²⁶ 'Report of the Committee of Inquiry into the Various Aspects of the Problem of Abortion in New Zealand', *Appendices to the Journal of the House of Representatives*, 1937, H31A, p 26.

The committee suggested greater financial support for mothers, during both childbirth and parenting, and the establishment of a National Domestic Service Corps to support the maintenance of households, greater sympathy and support for unmarried mothers; restriction of the distribution of contraception to medical channels and prohibitions against its advertising, especially to the young and unmarried. The report concluded that the committee did not recommend any alteration to the existing legislation instead they called for full publicity of the facts that they had provided so that the attitudes and actions of the people themselves might be changed.²⁷

The sittings of the committee had passed without a great deal of publicity and its report did not initially generate an enormous response in the publications examined here. This was in spite of the fact that it came out shortly after the fourth trial jury failed to find guilty Annie Aves in spite of overwhelming evidence that she was in fact a well-established abortionist.²⁸ The editorial of the *Christchurch Press*, while it supported the idea that publicity was important, called the idea of a National Domestic Service Corps a “freakish scheme” and a prohibitively expensive one.²⁹ There was, however, a small coterie of letters to the editor immediately after the editorial.

Dr David MacMillan, a gynaecologist at Christchurch Public Hospital, wrote to the *Christchurch Press* that he and his colleague had advocated practical measures that the committee had ignored: the notification of all cases of miscarriage and abortion that presented to hospitals and the establishment of a tribunal and a registry of cases of therapeutic abortion (under the guidance of a consultant obstetrician) to help educate the public and to support the medical profession’s decision making processes.³⁰ Abortionists, he later claimed, were dirty, money grubbing and dangerous compared with the medical profession whose motives he described as humanitarian and altruistic. As a member of the local branch of the New Zealand Obstetrical & Gynaecological Society he was concerned that the state, if it acted on the recommendations of the committee, would be missing out an essential method to control the abortionists.³¹ But the right of doctors to decide whether therapeutic abortion was advisable did not, however, go unchallenged; “Haste Slowly” remarked that “surgeons are sometimes too sure and too positive ... [that an embryo should be removed].”³²

E M Lovell-Smith and “J’accuse” wrote to the *Christchurch Press* with differing aspects of what was a distinctively Christian Socialist perspective. Rather than condemn women who had abortions both chose to highlight inadequacies in the social systems of the day. Lovell-Smith called for the distribution of wealth according to the needs of individuals, “for every new soul born into the world there is more than enough to feed and clothe it.” J’accuse blamed drunken husbands and the aversion of landlords to tenants with children rather than resort to abortion for the decline in the

²⁷ Ibid. p 27-8.

²⁸ “Serious Social Questions,” *Evening Post*, 17 February 1937, p 10. The evidence included foetal remains buried in her garden, instruments and a book containing the details of 183 individuals and the amounts paid, which totalled £2,232. Charlotte Macdonald, Merimeri Penfold, and Bridget Williams, eds, *The Book of New Zealand Women, Ko Kui Ma Te Kaupapa*, Wellington, 1991, pp.32-3.

²⁹ “Encouragement of Larger Families,” *Christchurch Press*, 12 April 1937, p 8.

³⁰ *Christchurch Press*, 13 April 1937, p 13.

³¹ *Christchurch Press*, 19 April 1937, p 14.

³² *Christchurch Press*, 15 April 1937, p 13.

birth rate.³³ The socialist perspective was popular in the *Christchurch Press* with Peter Trolove and “Comprenez –Vous?” both agreeing that capitalism and the sale of liquor for profit were the root causes of the use of abortion.³⁴

The connection between “excessive” sexual intercourse and potential abortion was also present in early letters to the *Christchurch Press*, but only as it stood within marriage. Trolove had called for drunken husbands to be “prohibited person[s]” while their wives had babies on hand; it is unclear whether he meant prohibited from drinking or from intercourse.³⁵ “Nurse” took a more eugenic approach; parenting and sex education in schools, the registration of people as “fit” to marry, and restriction of the right to marriage (and presumably intercourse) to those who passed would, she said, alleviate the squalor so many children were born into. Support for families, she argued, should only be given to those deemed worthy of it.³⁶

It has been claimed that the report created a furore of conservative and religious opinion that branded aborting women as selfish and a menace to the nation.³⁷ This does not appear to have been the case in the *Christchurch Press* where the initial response, was to say the least, muted and definitely not anti-women. In fact the conservative backlash to the report was to take many months to gather momentum and was inspired, in part, by the lack of government action on the report’s recommendations.

The *Christchurch Press* did report church meetings and resolutions on the subject of abortion. Relatively early, the Anglican diocese of Auckland held a meeting of clergy that denounced the practice of abortion as sinful and called on the government to take action to prevent its practice, as well as to prevent the sale of contraceptives to the young. They went further to call on men to practice self-sacrifice in their sex lives, parents to facilitate moral education of the young and the community as a whole to live according to religious and moral standards for the good of the nation.³⁸ Later the Anglican Primate, Archbishop Averill, pushed the point of education further in calling for the Government to be more sympathetic to religious education in schools.³⁹

Two months later the Baptist Churches of Canterbury met and discussed the committee’s report. The problem of abortion, it was decided, was symptomatic of the “low standard of sexual morality” in New Zealand, something they primarily associated with the consumption of alcohol at dances. But it was agreed that other issues were involved, particularly the provision of a living wage and education in birth control methods (presumably for married couples). A resolution calling for a further inquiry was sent to the Government. The Wellington Auxiliary also met and called for greater education of young people in “the sanctity of sex relations.”⁴⁰ The

³³ *Christchurch Press*, 13 April 1937, p 13. This is perhaps not surprising as Christian Socialism was well established in Christchurch at the turn of the century with the likes of prominent women such as Eveline Cunnington. Macdonald, Penfold, and Williams, eds, pp.162-4.

³⁴ *Christchurch Press*, 15 April 1937, p 13.

³⁵ *Christchurch Press*, 15 April 1937, p 13. Lovell-Smith replied to “Comprenez-Vous?” the next day with a much more Christian “... the commandment of our Lord that we should love our brother as ourself...” *Christchurch Press*, 16 April 1937, p 7.

³⁶ *Christchurch Press*, 16 April 1937, p 7. Dr MacMillan was given the right of reply and the subject was closed at that point.

³⁷ Brookes, 'Reproductive Rights,' p.135; Smith, *Maternity in Dispute*, pp.110-4.

³⁸ *Christchurch Press*, 28 April 1937, p 10.

³⁹ *Christchurch Press*, 15 October 1937. See also *Christchurch Press*, 10 November 1937, p 7.

⁴⁰ *Christchurch Press*, 10 June 1937 p 10.

Baptist Union later urged the government to legislate to prevent the consumption of alcohol at dances and clubs.⁴¹

The Presbyterians of Christchurch were also concerned that drinking alcohol at dances was linked to sexual immorality. The illicit sex that might follow such practices was claimed to be the precursor to abortion. The Presbyterians felt that legislation to control alcohol would have a flow on effect to reduce the practice of abortion by the unmarried. At issue for married couples, they felt, was the unavailability of domestic assistance for all but the rich.⁴² Later in the year the Presbyterian General Assembly adopted the resolution that in regard to therapeutic abortion “that which is practiced by consent” (meaning by the consent of the medical profession and the woman) be made legal and safeguards against its misuse be put in place. The meeting also endorsed the use of contraception as part of the duty of responsible parenthood.⁴³

Church associations also met to discuss the issue. The Auckland Diocesan Churchmen’s Association met in November 1937 and passed an extensive resolution calling on the government to act to enhance the dignity of motherhood, support families, provide tax relief for breadwinners, target and prosecute abortionists, prevent the sale of abortifacients and of contraceptives to juveniles, the expansion of censorship, and to put an end to the “frustration of justice in abortion trials as a result of juries failing to agree, in apparent defiance of conclusive evidence.”⁴⁴ The variety of church responses to the report gave rise to a joint statement by Auckland representatives of eight denominations including the Hebrew Congregation that called on the government to remove liquor from dances and censor salacious material.⁴⁵ The Catholic Bishop of Auckland was represented in this group, but no Catholic statement appeared in the *Christchurch Press* until August 1938.⁴⁶

By the end of 1937 the Minister and the Department of Health had been inundated with resolutions from churches and church organisations as well as other organisations that called for the aforementioned aspects of the committee’s report to be made policy. These resolutions did not always go uncontested; Edward Landers wrote to the Minister of Health noting that the New Zealand Returned Services Association had passed a resolution on abortion:

*I ... direct your attention to the incompetency of this body to deal with this subject. ... [it] was not debated freely and confusion between abortion and contraception showed the ignorance of those taking part in the discussion ... the value of the resolution should be rated accordingly.*⁴⁷

⁴¹ *Christchurch Press*, 21 October 1937, p 9.

⁴² *Christchurch Press*, 17 June 1937, p 9.

⁴³ *Christchurch Press*, 18 November 1937, p 9. The resolution made it clear that it did not support indiscriminate use of contraception out of “selfish” motives or to make up for lack of self-discipline. See also *Auckland Star*, 18 November 1937, p 24

⁴⁴ *Christchurch Press*, 10 November 1937, p 7; *New Zealand Herald* 10 November 1937, p 18. *Auckland Star*, 10 November 1937, p 20.

⁴⁵ *Christchurch Press*, 20 November 1937, p 13

⁴⁶ *Christchurch Press*, 26 August 1938, p 10. The statement said that the artificial prevention of births was a perversion and a sin.

⁴⁷ Letter from Edward Landers, Roseneath to the Minister of Health 4 August 1938, H1, 131/139 11291

There was, however, no apparent action by the government on either the committee's report or the many resolutions it received. The Minister of Health, Peter Fraser, told the Dominion Federation of Women's Institutes in July 1938 that the problem of abortion was essentially a moral and spiritual one. Legislation, he claimed, might go some way to restricting certain activities but ultimately the solution relied on "the extent to which the spiritual and moral outlook of the women of the community can be uplifted."⁴⁸

Birth control and the provision of clinics to prevent resort to abortion did not rate highly for the churches, except perhaps for the Presbyterians. The matter was more fully addressed by feminists. Anne Page wrote that provision of inexpensive contraceptives would go a long way to reducing the use of abortion. She admitted that some would no doubt use these for selfish reasons, but there was "no use pretending that birth control is practiced only by exceptionally selfish or immoral people."⁴⁹ Some members of the Women's Division of the Farmers Union (WDFU) advocated for the control of contraceptives and limiting their distribution to medical channels. The remits caused internal dissent for the WDFU and it was publicly castigated by the Catholic Church in Wellington. The remits were held over while discussions took place on whether they were appropriate for the organisation.⁵⁰

State controlled birth control clinics were advocated by "B.I." in *Woman Today*.⁵¹ The Women's Service Guild went further to advocate for abortion as desirable for eugenic reasons:

*... where the standard of parents' health is definitely anti-social, power shall be given to recognised medical health authorities to order that arrangements shall be made at a suitable hospital to abort the mother.*⁵²

It was not stated whether this would require the consent of the family involved. This was, however, an extreme example most other articles in *Woman Today* followed the standard feminist concerns; war, economic insecurity, access to birth control, and domestic help. Why would women want to bring children into the world to be killed in wars, to live in the hardship of inadequate resources without access to cheap and reliable contraceptives or help in the home?⁵³

Women's sexuality was also a topic of discussion in *Woman Today*. Unlike the churches that generally concurred in defining unrestrained male sexual activity as problematic, women's sexuality was more contested. In response to calls for better access to contraception as a solution to the use of abortion, a minority of women claimed the use of contraception as unnatural, with abstinence the only normal and natural way to space or cease births.⁵⁴ This provoked a strong reaction that defended to female sexuality, encompassing love, birth, and parenting as normal in an abnormal

⁴⁸ *Christchurch Press*, 28 July 1938, p 2.

⁴⁹ *Christchurch Press*, 13 November 1937, p 2.

⁵⁰ *Christchurch Press*, 30 August 1938, p 12; 1 September 1938, p 10. The outcome was not apparently reported in the *Christchurch Press*.

⁵¹ *Woman Today*, 1, 3, June 1937, p 61.

⁵² *Woman Today*, 1, 3, June 1937 p 71.

⁵³ *Woman Today*, 1, 4, July 1937, pp 4, 7, 10-11;

⁵⁴ "Why Birth Control is Wrong," *Woman Today*, 1 2, May 1937; Letter from Sophie Donald 1, 3 Jun 1937, p 61

world.⁵⁵ These responses were, however, not nearly as radical as the article by “X” that had appeared in the socialist magazine *Tomorrow* in September 1936 which challenged the Victorian idea that women had no “sex instinct” whatsoever.⁵⁶ Isobel Ferguson, also writing in *Tomorrow*, claimed that:

... a healthy, safe sex-life for our single young folks, would, when their economic position allowed, bring them to the fullness of marriage in a finer state of nervous balance and physical fitness than is at present possible.⁵⁷

Not surprisingly letters to *Tomorrow* were decidedly more radical than those to the *Christchurch Press* or *Woman Today*. “HA” branded the report as prejudiced with preconceived conclusions that were not based upon the facts presented. If the situation was as bad as the report made out, with as many as 6,000 girls and women accessing illegal abortions each year, then surely “it is in the interests of national health, present and future, that the safe procuring of an abortion be legally placed within the means of every girl desiring it.”⁵⁸ Not all *Tomorrow* readers appreciated “HA’s” sentiments “JM” contended that abortion was an unmitigated evil and challenged “HA” to show that “abortion [was] conducive of any good whatsoever and that any real need for the practice ... exists at all.”⁵⁹ “JD” and Isobel Ferguson both supplied letters that would not be printed by other publications, neither advocated access to abortion but instead a loosening of the prescriptive, conservative sexual attitudes prevalent in the committee’s report.⁶⁰

The issue of juries’ inability to convict abortionists had had relatively little discussion during this time. Although the subject of a book published in 1937,⁶¹ it was not a considered a problem for the correspondents examined here. The prospect of changes to the jury system for abortion cases did, however, cause concern in *Tomorrow*, which charged such a suggestion as “dangerous and undemocratic.”

Abortion was commonly labelled a problem in the 1930s, yet the social attitudes examined in this essay did not define the aborting woman as the problem, but rather focused on a wide range of social situations. Historians have in the past highlighted the claims of selfishness that were levelled at aborting women by some of the submitters to the McMillan Inquiry,⁶² but no such claims were forthcoming in the literature examined in this essay.⁶³ The correspondence was more solution oriented than blaming. People who corresponded with these publications highlighted inadequacies in the existing social systems. The inability of male breadwinners to provide adequately for large families pushed many to claim the need for greater state support of families. The sexual double standard was challenged in a way that saw unrestrained male sexuality criticised as irresponsible. The use of contraception

⁵⁵ *Woman Today*, 1, 4, July 1937, pp 11, 12.

⁵⁶ *Tomorrow*, 30 September 1937, pp 13-15.

⁵⁷ *Tomorrow*, 23 June 1937, p 543.

⁵⁸ *Tomorrow*, 3, 26 May 1937, pp 479-80.

⁵⁹ *Tomorrow*, 3, 21 July 1937, p 608.

⁶⁰ *Tomorrow*, 3, 21 July 1937, pp 541-2, 543.

⁶¹ Doris Gordon and Francis Bennett, *Gentlemen of the Jury*, New Plymouth, 1937.

⁶² See for example discussion of the evidence of Dr Shirer, Dr Doris Gordon and the Mothers’ Union. Brookes, ‘Reproductive Rights,’ pp.126-7, 30.

⁶³ The closest claim was that of Anne Page above and the Presbyterian Church in its support of the use of contraceptives within marriage.

within marriage, although contested, was elevated to responsible partnering and parenting rather than that of immorality and social decline. Outside of marriage contraception remained problematic for all but a few correspondents.

The churches were most concerned about morality and mobilised to present the usual suspects as causes of the abortion problem. Temperance, religious education in schools and parental education of children on moral and sexual values remained a priority for these organisations. But the reports of church meetings in no way carried the punitive tone of the submissions of some church leaders invited to present to the committee.⁶⁴ The most punitive attitudes in the correspondence examined here were, ironically, expressed by women. The eugenic solutions proposed by both “Nurse” and the Women’s Service Guild were the most extreme. The Women’s Service Guild remit was particularly extreme in that it appeared to be advocating forced abortion of the “unfit.”

Most correspondents actively engaged solutions to the perceived problem, but few advocated decriminalising some or all aspects of the practice of abortion. Of those that did, Dr MacMillan and the Presbyterian Church supported the right of doctors to determine eligibility for the procedure and the provision of safeguards and services within hospitals. “HA” was the only correspondent to go further and advocate for full abortion services and this suggestion was hotly contested. In the 1930s access to abortion was apparently not a feminist issue; most feminists examined here were more concerned with improving married women’s access to contraception and the family living standards.

The lack of action on the part of the government and its claims that what was needed was a change in the attitude of the public toward abortion becomes less contentious in the light of the correspondents examined in this essay. Historians have in the past chosen to focus on the lack of action to support women’s access to contraception in the 1930s rather than the government’s lack of action to suppress the practice of abortion.⁶⁵ What has been seen in the social attitudes in this essay is not the desire to suppress abortion but a desire to reconcile work, sexuality, health and social support with married life. Admittedly these same issues for the most part remained problematic for the unmarried. For married couples, however, the problem of abortion opened up the discussion on the most intimate and private aspects of marriage. It engaged individuals, the medical profession, the churches and the state in conversation about what constituted appropriate partnering and parenting behaviour and gave an opportunity for some to voice opinions that might not otherwise have been considered appropriate for the print media. New Zealand may still have been a punitive and morally conservative society but, for married couples at least, the boundaries were being challenged and pushed in the debate over abortion in the 1930s.

⁶⁴ See the evidence of Anglican Canon Percival James and Catholic Archbishop O’Shea. Brookes, ‘Reproductive Rights,’ pp.129-30.

⁶⁵ Brookes states that the ideology behind the maternity benefits and child allowances that did arise out of the late 1930s served to prevent women’s individual autonomy and to limit their right to elect freely, or deny motherhood. *ibid.*, p.136.

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