

SUSAN HEDGES

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## Measured love: Regulating infantile bodies, the Plunket Society and modern architecture

The Plunket Society in New Zealand has been involved in regulating infantile bodies since its foundation in 1907. The primary objective of the Society was, however, directed towards a detached and genderless body: “To uphold the Sacredness of the Body and the Duty to Health.”<sup>1</sup> The Plunket Society has always had its critics and has had a long, complicated history since its inception in the early 1900s and the emergence of child psychology in the 1950s, which promoted a more permissive and child-centred child-rearing.<sup>2</sup> A number of studies from the Otago University School of Medicine completed during the 1940s, 1950s, and 1960s also began to question the worth of the Plunket Society to mothers.<sup>3</sup>

This paper considers the Society’s published imagery from the 1940s, reading this against modernist construction in Aotearoa New Zealand in the 1960s, but specifically in light of the new Plunket building on 96 Symonds Street in Tāmaki Makaurau, Auckland (1968). Drawing connections between paediatric practices and modernist architectural principles in early twentieth-century Aotearoa New Zealand, the paper draws parallels between a modernist advocacy of sanitising purity and what I am terming ‘measured love,’ a form of mediated care centred on Plunket’s founding paediatric practices. The broader aim is to render a structural portrait of maternal love relative to modernist architecture. To this end, the paper will follow Plunket’s strategies to ensure a connection and disconnection between mother and baby listing architecture not only through notions of foundation and inception but also the control of time and space. The regulation of the babies’ bodies also shares the rhetoric of the advocates of architectural modernity—both making similar calls on fresh air and sunlight.<sup>4</sup> Erik Olssen points out that if we consider the history of New Zealand in terms of modernisation, then Plunket was also one of the important actors.<sup>5</sup>

The paper looks at the representation of modern architecture and the Plunket Society in the 1940s to discern the connections and disconnects between these seemingly separate worlds of high art and popular culture. Images from publications from both fields are examined through the notion of control and discipline and the regulation of time and space. At stake is a body that can be understood as intimately combining mother and child, producing, as it were, a reproductive and produced body whose corporeality is the living manifestation of vulnerability as lived uncertainty. Certainly, for many women, the emphasis was on survival.

Science and medicine became increasingly accepted ways of addressing illness and disease, and mothers were encouraged to consider how science could be applied to their specific experience of motherhood.<sup>6</sup> In its attempt to measure and regulate a border between life and death that is trembling, haunting, piercing, staining, and marking, a specified maternal role attempted to prevent loss and longing, an unassuaged longing, and a place for vulnerability. *An ounce of prevention is worth a pound of cure*—the Truby King method was a way of avoiding the death of a child and the consequences of love lost.<sup>7</sup> It is instructive to read the strategies he endorsed, relative to the more complex entanglement of maternal and child bodies. On the latter, literary critic Hélène Cixous points to a contrary plenitude resting with motherhood and the haunting of loss that accompanies it:

But as soon as I love, death is there, it camps out right in the middle of my body, in daylight, getting mixed up with my food, dispatching from the far-off future its prophetic presence, taking the bread out of my mouth. It's because I love the beloved more than I love myself, you are dearer to me than I am to myself, you are not me, you don't obey me, I was sure that I was myself immortal, otherwise I couldn't live, I live only on that assurance, but what about you?<sup>8</sup>

So do love and loss coalesce in a maternal relationship. For Cixous, this love/loss means keeping alive a way to pass mortality, a love that exceeds the limits and becomes love in survival. The mother is always destined to be replaced, even if a mother is resolutely turned towards love. Love is delicate and always connected to mortality.

### Measured motherhood

Women in the early part of the 20th century were increasingly aligned with the ideals of scientifically defined motherhood, itself a safeguard against the likelihood of losing a child.<sup>9</sup> Strict regimes of hygiene and cleanliness advocated by the Plunket Society and other publications had some impact on the decline of infant mortality.<sup>10</sup> Beginning with Truby King (1858-1938) in the early 20th century, Plunket followed his ideology in the early years, which advocated an authoritarian childcare regime, middle-class membership, conservative politics, and a hierarchical structure spanning from health professionals to mother and infants.<sup>11</sup> In particular, King advocated for a return to the traditional ideal of “true womanhood” and a cult of domesticity.<sup>12</sup> The latter intended wives and mothers to be, as Erik Olssen has described, a “pious, subservient, supportive nurturant.” Olssen further characterised King's approach as poorly administered authority over children:

[...] damaged health [with the...] absence of discipline and control in early life [being...] the natural foundations of failure later on—failure through the lack of control, which underlies all weaknesses of character, vice and criminality.<sup>13</sup>

Despite the questionable rhetoric, by today's standards, King and the Plunket Society achieved particular importance through their specialised concern with infant mortality. It became every mother's duty to fulfil the natural calls of motherhood, as Olssen again depicted Plunket's avowed stance, “Babies thrive only because they learned to be obedient to the mothers and the Society, the dictates

of Science and the imperatives of time.<sup>14</sup> The gospel, according to King and the Plunket Society, portrayed child rearing as a professional enterprise requiring the application of managed know-how built up upon scientific method.

Following World War I, the Plunket Society grew to include nurses, branches, Plunket Rooms, Karitane Hospitals, Mother Craft Training Centres, and antenatal clinics.<sup>15</sup> By the 1920s, these facilities and staff multiplied further and, with a decline in infant mortality, the Society's specific rhetoric and organisation were seen as underpinning this valuable achievement.<sup>16</sup> Further, the organisation instituted a particular persona for motherhood, the Plunket Woman, for whom mothering was her primary duty. Her success at regulating domestic habits and routines, and, in turn, the child's health and happiness, were taken as critical contributors to society's broader stability and decency. As Olssen reminds us, Plunket did provide many with a satisfying and purposeful form of social contribution, something approaching a vocation, with measures like the weight and length of the baby indicating how faithfully the Plunket disciplines were being observed.<sup>17</sup> However, for some, the roles constituted a form of imprisonment. Typically, women's experiences during the 1940s generally failed to extend beyond this traditionally stipulated child-raising role. Yet the 1940s also witnessed a paradigm shift in understanding maternal-child relationships, with Plunket advocating for the separation through processes of control.

Plunket advice considered the first nine months of pregnancy to be the most

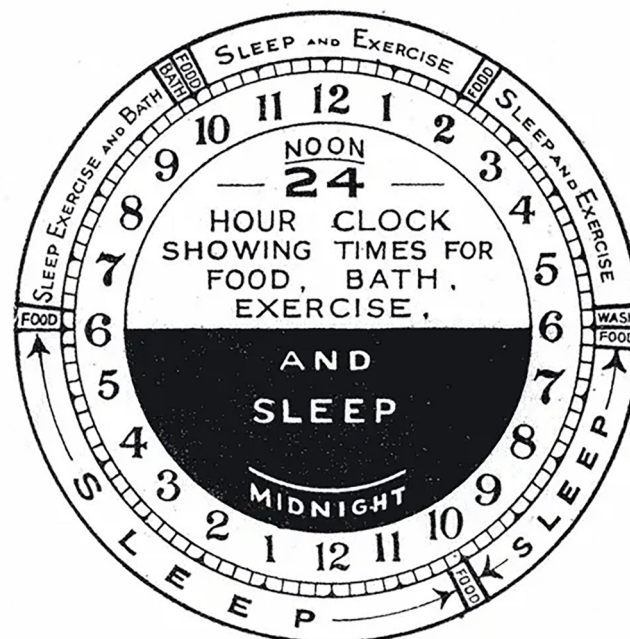


Fig. 23. Clock Face  
For Four-hourly Feeding

Fig. 1 Jock Phillips, Clock-Face for Four-Hourly Feeding, "Timekeeping - Time and Society, 1870s-1930s," *Te Ara - the Encyclopedia of New Zealand*, <http://www.TeAra.govt.nz/en/diagram/6704/the-plunket-clock> (accessed 2 January 2024).

important, a period across which expectant mothers were told to never be depressed, idle, or self-indulgent. They should aim to be free of fatigue and morning sickness, with no outward sign of unhappiness. Any indication of these pointed to maternal 'weaknesses' and potentially risked miscarriage, an event itself suggesting that the mother had not followed the rules.<sup>18</sup> The provision of proper clothing, bedding, exercise, hygiene, and exposure to sunlight was

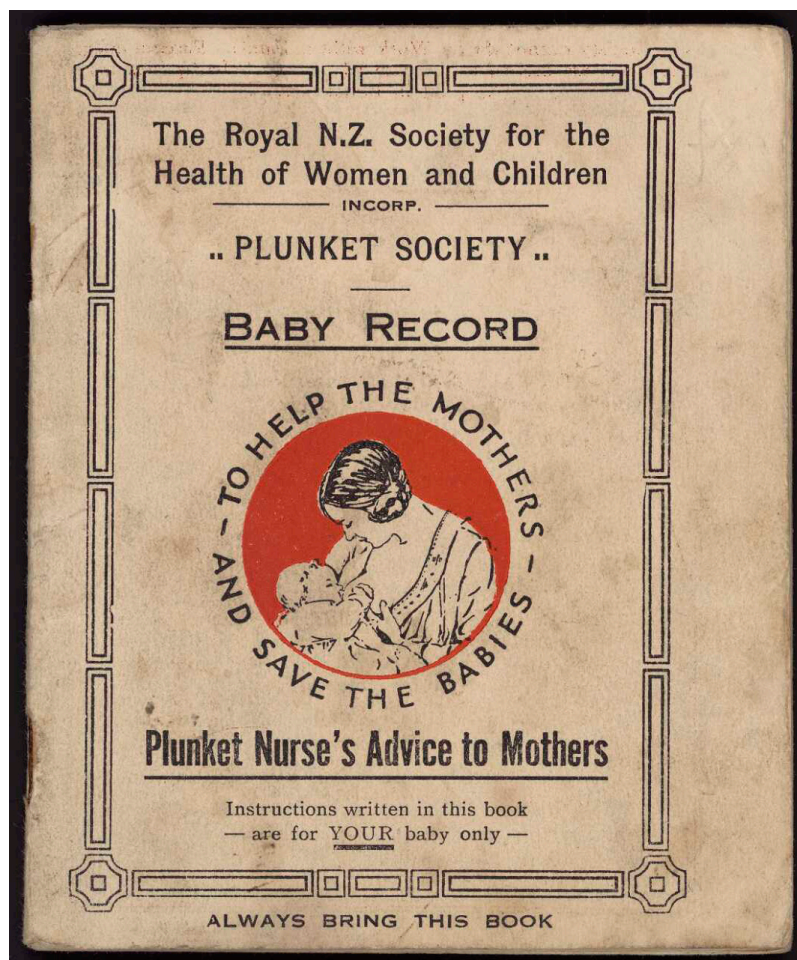


Fig. 2 Royal New Zealand Society for the Health of Women and Children: "Plunket Society. Baby Record; Plunket Nurse's Advice to Mothers; To help the mothers and save the babies" [Front cover, 1936]. [Ephemera of octavo size relating to children, childhood, child development, parent-child relations]. Ref. Eph-A-CHILD-1936-01-front. Alexander Turnbull Library

the duty of every mother; as Olssen puts it, they were the prerequisites "for the perfect fulfilment of the natural calls of motherhood."<sup>19</sup> Regularity ruled, with eating, sleeping, and excreting punctually performed according to the clock—a regularity applied equally to the child as they were to the mother (Fig. 1). Further, the fruits of this regularity found measure with weekly visits to the Plunket nurse who weighed and recorded the length of the baby. So did regularity and growing achievements (or deficits) find careful record in the baby's Plunket Book (Fig. 2).

The Plunket Book, handed to each new mother, noted each child and their parent's strict routines advocated as the most effective way to maintain the baby's health, health paramount to maintaining and strengthening New Zealand's population. The book itself had a page indicating the baby's needs, including air ("Abundance of pure, cool, outside air, flowing fresh and free day and night"), water ("Must be boiled"), food ("Suitable food, proper intervals. No food between the regular feedings. No night feeding."), clothing ("Must be non-irritating, non-constrictive, light but sufficiently warm"), and bathing ("Bath and dress very quickly in a cosy corner. No dawdling").<sup>20</sup> The emphasis was on fresh air and sunshine and the addition of cod liver oil to prevent rickets. The baby was to be woken for feeds and fed at the same time each day, with the times stringently listed by the nurse in the book.<sup>21</sup>



### 1940s New Zealand and the Plunket Society: Modern mothercraft

During the mid-1940s, the Plunket Society published a number of pamphlets illustrating what they took to be society's progress in establishing and consolidating a vision of motherhood for the country. These included *Modern Mothercraft: A Guide to Parents*, the *Official Handbook of the Royal New Zealand Society for the Health of Women and Children*, and *The Work of the Plunket Society in New Zealand: For the Mother and Baby and Preschool Child*. What Plunket emphasised in these publications, in addition to their broader enactment in communities and with families, was the virtue of quantitative measures in the establishment of appropriate infant-rearing practices. Yet the application of scientific authority and orthodoxy over motherhood distanced mothers from their infants; consistent with modernist instrumentality, empiricism eclipsed emotional connection.

The Plunket Society's regulating mechanisms also represent the regulation of time and space within domestic environments, a prescription structuring the child's routines. Printed material and guidelines standardised child-rearing practices to discipline mothers and regulate children's lives.

Fig. 3 "Besides giving advice on infant care, the Plunket Nurse examines and weighs the baby at each visit." Royal New Zealand Society for the Health of Women and Children, *The Work of the Plunket Society in New Zealand: For the Mother and Baby and Preschool Child* (Dunedin: The Society, 1945).

Fig. 4 "At the Plunket Rooms, babies are measured regularly in specially designed measuring boxes." Royal New Zealand Society for the Health of Women and Children, *The Work of the Plunket Society in New Zealand: For the Mother and Bay and Preschool Child* (Dunedin: The Society, 1945).

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Backgrounding the domestic structuring of regularity was the 'clinical cell' where the action of the former was traced in the corporeality and disposition of the baby itself. Such a 'cell' is seen in Fig. 4, where a nurse weighs a baby in a woven basket as part of this measure. Here, the mother, dressed with a formality appropriate to 'going out,' apprehends the scene with downcast eyes and physical detachment, indicating a degree of anxiety. In contrast, the nurse, in sanctified white, appropriate to their transcending role, casts the mother in shadow on the surrounding walls. Such shadows, multiplying the presence of mother and nurse in the encounter betray the staged nature of the image—it is a scene posed for

the camera and its backing lights, an idealised scene designed to be replicated and circulated widely. Curiously, the baby, discretely naked or nearly so, is luminously present without shadow. The mother is rendered a witness to a process whereby touch, devoid of intimacy, is given over to the instruments of measure and the practised, if indifferent, hands of the nurse, as Fig. 5 shows. This haloed nurse in a crisp white veil and uniform, the signature uniform of Plunket's immediate human representatives, almost radiates the laundered freshness of air and sunlight, the elemental priorities of architectural modernity. The scene, with its veiled disconnection and downcast eyes held in "enceinte," perhaps intentionally, call up degrees of worry, care, and love long captured in historical painting centred on the Madonna with Child—in this case with intercedence from an angelic stand-in. Cixous writes of such states:

Whoever is capable of an acceptance this vast can only be the equivalent of the maternal breast, not of an exterior mother, but of the one who doesn't lean over the cradle, who doesn't say "I am your mother," of the mother who doesn't congratulate herself. The mother who loves like she breathes, loves and doesn't know.<sup>22</sup>



Fig. 5 "A Plunket Nurse weighing a baby in a kitchen where he has just been bathed." *Modern Mothercraft: A Guide to Parents. Official Handbook of the Royal New Zealand Society for the Health of Women and Children* (Dunedin: The Society, 1945).

[Hocken Digital Collections, accessed 20/12/2023, <https://hocken.recollect.co.nz/nodes/view/43781>]

Fig. 6 "The Plunket nurse calls, Auckland (1947)." A Plunket nurse dressed in her visiting uniform weighs a baby at home while the mother looks on. [Photograph, Alton Francis, Auckland Libraries Heritage Collections 02470]

For Cixous, an elemental love points to the irremediable separation between mother and child, dividing the experience of motherhood into two distinct moments and feelings, separated by birth and the becoming of a separate subject.<sup>23</sup> Certainly, the images represent, in their idealisation, something far from the actual experiences and expectations of women themselves. As Sylvie Gambaudo sees this appeal to "self-sacrificial effacement" in maternal depictions more broadly, the imagery of Plunket in the 1940s is intent on making motherhood "the marker of a well-negotiated domestication of her enigmatic and feral nature."<sup>24</sup> Of course, what the imagery cannot contest is that the child is from her, and they were once the same body. Cixous offers a parallel terror of measured sanctification:

But that's just it *I was never able to weigh my son*, I could not weigh him, without being caught up and overcome by an invincible terror, with the



result that after a few months three or four I believe I'd given up weighing him, because weighing him for me it was as if each time I was sentenced anew, weighing him was to hear the pitiless word of the scales all over again why bother consulting them.<sup>25</sup>

Under the careful eye of the Plunket Nurse, babies are weighed and measured, with mothers interviewed in domestic scenes in interior worlds abundantly stocked with folded, crisply laundered linen (Figs. 5 and 6). The haloed crisp veil of the nurse becomes an inverted sure support for the measured infant. Hands work scales and weights are recorded in the Plunket Book. Eyes follow scales as the nurse measures, and scenes offer medical or domestic interior worlds and cupboards filled with linen.

More Plunket images abound: mothers wait their turn to see the nurse in the *open air* or in a filtering porch outside a Plunket Room (Figs. 7 and 8). Unsurprisingly, at the centre of the image in Fig. 7 is the nurse.



Fig. 7 "Mothers waiting their turn to see Nurse in the open air at a busy Plunket Room." Royal New Zealand Society for the Health of Women and Children, *The Work of the Plunket Society in New Zealand: For the Mother and Baby and Preschool Child* (Dunedin: The Society, 1945).

Fig. 8 "Mothers waiting for their appointments with the Plunket Nurses at the Central Plunket Rooms, Christchurch." Royal New Zealand Society for the Health of Women and Children, *The Work of the Plunket Society in New Zealand: For the Mother and Baby and Preschool Child* (Dunedin: The Society, 1945).



### Shaping mothers and children

The relationship between modern architecture and health practices in 1940s New Zealand suggests a connection between architectural design and spatial organisation influencing public health and societal well-being. Despite efforts at separation, maternal and child bodies remained entangled through intricate socio-cultural mechanisms, including traditional practices, beliefs, and parenting styles. Plunket’s strategies, bolstered by modernist architectural principles, as I will show, sought to streamline functionality, efficiency, and hygiene. Spaces designed for childbirth and childcare reflected a will to separate or partition, in turn reinforcing maternal-child disconnection. Functional efficiencies, new materials (glass, steel, and reinforced concrete), and new technologies all aided in the attempt to ward off illness. As Beatrice Colomina argues, modern architecture linked to a new kind of space: sun, light ventilation, exercise, hygiene, and whiteness were offered as means to prevent illness.<sup>26</sup>

Fig. 9 Helen Deem and Nora P. Fitzgibbon (eds), *Modern Mothercraft: A Guide to Parents* (Dunedin: Royal New Zealand Society for the Health of Women and Children, 1945), 35, <https://teara.govt.nz/en/diagram/26330/plunket-advice>

Fig. 10 Plunket headquarters, Auckland, (1947). The entrance to the Royal New Zealand Plunket Society’s Auckland Branch headquarters in Symonds Street. A woman is captured leaving the premises while a young mother stands nearby with her pram. [Photograph, Alton Francis, Auckland Libraries Heritage Collections 02480]



Much of Plunket’s early work was conducted in domestic houses, remade as clinics by local members. Bedrooms became interview rooms, and in a strange overlap and complication the domestic house becomes a diagnostic instrument, a mechanism for caring for the body and medical equipment.<sup>27</sup>

In Aotearoa New Zealand, 1940 was also the centennial year—100 years after the signing of Te Tiriti o Waitangi—during which commemorations produced several significant buildings, many of them Plunket Centenary Buildings:<sup>28</sup> New Plunket Rooms at New Brighton, WH Jaines Centennial Plunket and Rest Room at Ngāruawāhia, Llew S. Piper’s Memorial Plunket Rooms at Mt Eden. Many of the smaller centres featured in publications,



including *New Zealand Home and Building*,<sup>29</sup> with descriptive text. For example: “The Centennial Memorial Plunket Rooms at New Brighton, a modern building faced in dark brick, was orientated to the north with large glass doors on that side intended to catch the sunshine. The building accommodated a waiting room and committee room separated by folding doors along with a nurse’s consulting room kitchen and conveniences.”<sup>30</sup> Numerous local communities were responsible for maintaining local operations. Women of the surrounding communities drove fundraising and organisation. “Paddy’s Markets,” cookbooks, and balls became a means to raise money for permanent Plunket Rooms.

By the 1960s, there was another surge in the construction of such facilities. In 1965, a new Plunket Clinic in the Pakuranga town centre in South Auckland was described as an “attractive building, inside and out, and comfortably equipped; the clinic will immediately handle 250 babies as well as a large group of pre-schoolers.”<sup>31</sup> The clinic had a consulting room, waiting room, kitchen, and washroom. In 1969, new rooms were opened in Mairangi Bay and Glendene, both again in Auckland.<sup>32</sup> In 1976, new Plunket Rooms was opened in Papatoetoe on Kolmar Road, which offered a kitchen, an “extra large waiting room,” and even a garage.<sup>33</sup> Mobile Plunket Rooms at Otara in South Auckland were raising funds for more permanent rooms.<sup>34</sup> The moveable clinic was suggested as an answer for many communities who could not fund or find suitable buildings to host Plunket facilities.<sup>35</sup> Again, numerous local communities were responsible for maintaining operations.

### **Plunket on Symonds Street: Ramps, trees, and repeated edges**

The original Auckland headquarters of the Plunket Society was on Symonds Street and had no recorded plans until 1926, when a room was constructed on the roof, followed by a single-storey south wing addition in 1930. In 1966, a report on the structural condition of the headquarters was produced by Haughey and Fox and Partners, advising that “it is unwise for the Society to incur expenditure on extensive alterations. The funds available would be better spent on new work planned so that, if possible, it would form the first stage of an ultimate new building.”<sup>36</sup> Significantly, the original Plunket Headquarters, constructed of brick and lime water, had been subject to earth movement and cracking and was unlikely to withstand even a moderate earthquake.

In 1966, Haughey and Fox, architects and engineers, proposed a new Plunket Headquarters for Auckland. The building was to be erected in front of the existing premises on Symonds Street and boasted,

A four-foot ramp will provide access to the reception area on the first floor above a parking basement. On this floor will be the baby clinic and the preschool clinic.[...]A large room on the second floor will be used as an ante-natal clinic for lectures and meetings.<sup>37</sup>

The building also had a 400-seat lecture room and administrative offices. It had timber-framed partitions and modern, clean materials, including Gibraltar board and vinyl fabric ceilings sprayed with acoustic treatments, incandescent lighting, space heating, and thermostat control.<sup>38</sup> The Symonds Street façade was glazed to bring light into the interior, brighten the internal spaces, and convey a modern, clean (hygienic) approach to the different spaces. Offices and clinics

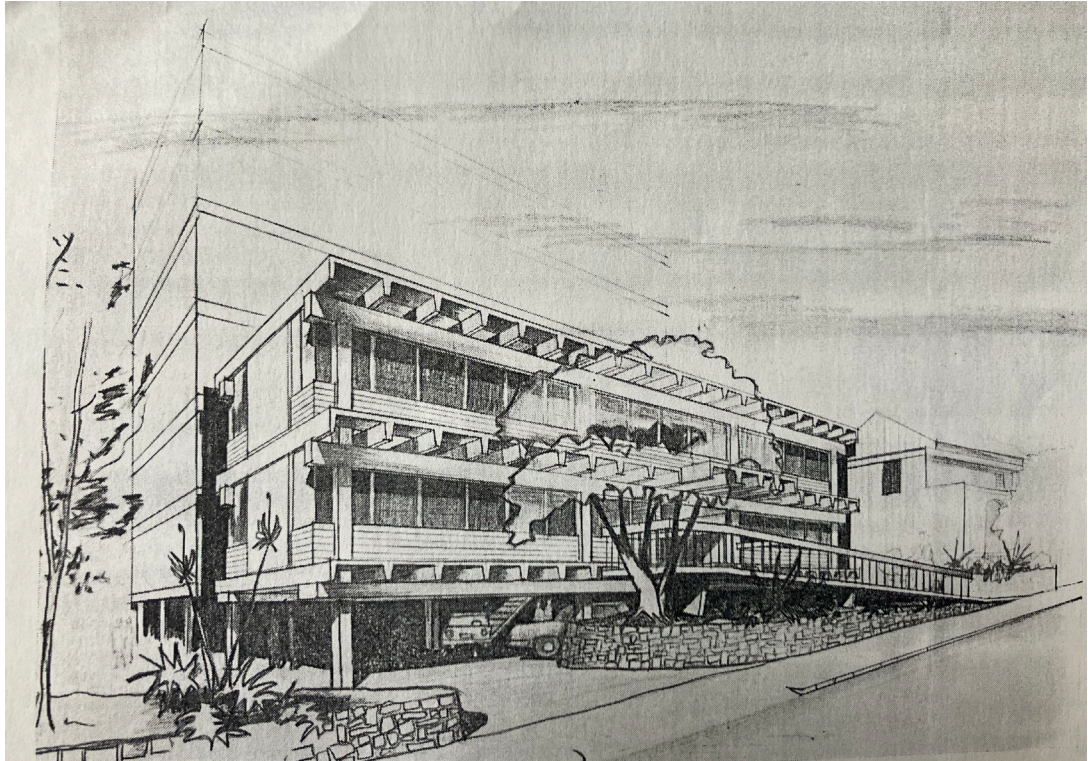


Fig. 11 “New Plunket Headquarters for Auckland.” *Building Progress* (October 1966): 48.

were angled in wings to allow as much daylight as possible. Medical clinics had moveable partition walls to encourage a more flexible approach to space. The building services were hidden behind panels on the exterior to provide the interior with a more defined and uncluttered aesthetic. The new Plunket Headquarters proposed executive suites, waiting rooms, rooms for the charge nurse and secretaries, and ante-natal rooms. The proposal promised eight carparks, preschool and baby clinics, and an access ramp for prams and strollers. In October 1966, the journal *Building Progress* noted that one of its many constructed features was to be conventional windows with regular opening vents, and the glazing on the Symonds Street elevation would be in heat-resistant glass.<sup>39</sup>

Fig. 13 “Vibrapac Blocks Ltd—Commercial contracts using Roskill Stone blocks: 1968 Plunket Society building, Auckland,” *Winstone News* (October 1968). [Photograph, Vahry Photography, Fletcher Trust Archives]





The building, completed in 1968, no longer stands. The modernist building nestled into the incline of the street and gently backed an existing tree, which was itself intercepted by a rising ramp—it was as if ascent into the building would benefit from the shading embrace of nature before doubling back to enter the building. Exhibiting an elemental structural assembly, white precast members picked out floor levels defined by precast “planks,” and their inverted members edged the building, extending out beyond the weather line. A far less significant and carefully thought through apartment building has taken its place—this version of the domestic a minimal dwelling enclosure indifferent to the suburban ideals of outlook, sun, or air. The displacement, in turn, measures a journey from the piety of spiritualised modernism to the bald commodification wrought by apartment buildings.

### Conclusion

The 1940s witnessed a paradigm shift in understanding maternal-child relationships, with Plunket advocating for an array of separation techniques and practices designed to bolster the societal goal of improved child rearing and countering infant mortality. In this, they mirrored similar control processes and practices defining the pick-up of modernist architectural design in the country. Plunket endorsed and employed strategies that entangled maternal and child bodies. As Olssen notes, Plunket had some influence on New Zealand’s architectural heritage and public health policies. Their pamphlets and booklets impacted contemporary societal norms, leaving a complex legacy. Plunket’s representations of relations between mother and child enlist architecture where calls for regulating babies’ bodies and the rhetoric of the advocates of architectural modernity, fresh air, and sunlight. The strategies advocated by 1940s Plunket for separating mothers and babies through control processes and modernist architecture had profound implications on maternal-child relationships; however, despite these strategies, maternal and child bodies remained entwined. The actual practice of mothers tempered the prescriptive ideology of the Plunket Society mothers.<sup>40</sup> Whilst the practices were certainly controlling, the significant investment in the health of children stands out against today’s dwindling investment in early childcare.

By the early-to-mid-1950s, changes in the attitude and approach of the Plunket Society and Plunket nurses were starting to occur. Formal recognition of the importance of milestones as a measure of development rather than solely weight became important. Directives became increasingly conciliatory and descriptive, and by the 1970s, Plunket’s booklets finally advocated the importance of the child’s love, protection, and psychological development.<sup>41</sup> Much has been written on the numerous dilemmas women have faced over time, including relinquishing their control over child-rearing under the auspices of scientific motherhood and fighting to regain it through the tenets of feminism.<sup>42</sup> Motherhood, as many theorists of maternity point out, including Kristeva, is a troubling space. Women as mothers occupy a liminal space between the institution of motherhood and the lived practice of mothering.<sup>43</sup> The plenitude of motherhood can also be a haunting of loss.

It is on the basis of love that one recalls mortality. We are mortal only in that high region of love. In ordinary life we are immortal, we think about death,

but it doesn't gnaw at us, it is down there, for later, it is weak, forgettable.  
But as soon as I love, death is there.<sup>44</sup>

Fig. 14 "Vibrapac Blocks Ltd—  
Commercial contracts using Roskill  
Stone blocks: 1968 Plunket Society  
building, Auckland," *Winstone  
News* (October 1968) [Photograph,  
Vahry Photography, Fletcher Trust  
Archives]





## NOTES

1. *The Work of the Plunket Society in New Zealand for the Mother and Baby and Pre-School Child* (Dunedin: The Royal New Zealand Society for the Health of Women and Children, 1944).
2. For a reading of the Plunket Society and the contested domain of infant welfare reformers, nurses, the medical profession, and the Health Department in the interwar period, see Maureen Hickey, "Negotiating Infant Welfare: The Plunket Society in the Interwar Period," MA thesis, University of Otago, Dunedin, 1999.
3. These studies noted poor communication between doctors and Plunket nurses, the need to shift the focus of teaching from general weight gain to individualised care, the fact that many mothers with second or third children did not bother using the Plunket Society's services, concern with the age and lack of children of the Plunket nurse, and unease over the prescriptive nature of the advice being given to mothers. Jillian Margaret Clendon, "Motherhood and the 'Plunket Book': A Social History, PhD thesis, Massey University, Auckland, 2009, 14.
4. "[...] good design of modern industrial products can only come from trained designers, and the only designers in New Zealand trained in the discipline of function and in the understanding of many different materials are the architects. The first sign of good health, there will be an upsurge of vitality in architecture." Howard Wadman, "This Is Beginning to Happen," *Yearbook of the Arts in New Zealand*, ed. Howard Wadman (Wellington, NZ: Wingfield Press, 1948).
5. Erik Olssen, "Truby King and the Plunket Society: An Analysis of a Prescriptive Ideology," *New Zealand Journal of History* 15, no. 1 (April 1981): 3-23.
6. Clendon, "Motherhood and the 'Plunket Book,'" 69.
7. Clendon, "Motherhood and the 'Plunket Book,'" 71.
8. Hélène Cixous, *Stigmata: Escaping Texts* (London, UK and New York, NY: Routledge, 1998), 72.
9. Clendon, "Motherhood and the 'Plunket Book,'" 69.
10. Clendon, "Motherhood and the 'Plunket Book,'" 71.
11. Heather Knox, "Feminism, Femininity and Motherhood in Post-World War II New Zealand," MA thesis, Massey University, Palmerston North, 1995, 42.
12. Erik Olssen, "Truby King and the Plunket Society: An Analysis of a Prescriptive Ideology," *New Zealand Journal of History* 15, no. 1 (April 1981): 3-23, 4.
13. Olssen, "Truby King and the Plunket Society," 4.
14. Olssen, "Truby King and the Plunket Society," 14.
15. Olssen, "Truby King and the Plunket Society," 11.
16. Olssen, "Truby King and the Plunket Society," 11.
17. Olssen, "Truby King and the Plunket Society," 21.
18. For at least the first half of the 20th century, New Zealand mothers were encouraged to follow a strict four-hour feeding routine laid down by the Plunket Society. The Society published Frederic Truby King's book, *Feeding and Care of Baby* (1913), which included a clock face prescribing exact times for food, bath, sleep and exercise. King, obsessed with constipation and bowel movements, was convinced that if the mother fulfilled her obligations "to herself, her child, her Society and race, then the child would be controlled by calculating prudence for future gains." Olssen, "Truby King and the Plunket Society," 13-17.
19. Olssen, "Truby King and the Plunket Society," 9.
20. Clendon, "Motherhood and the 'Plunket Book,'" 105.
21. Clendon, "Motherhood and the 'Plunket Book,'" 114.
22. Cixous, *Stigmata*, 98.
23. Sylvie Gambaudo, "From Scopophilia Pleasure to the Jouissance of the Madonna: The Mother's Maternal Gaze in Three Photographic Examples," *Women's Studies* 41 (2012): 781-804, 795.
24. Gambaudo, "From Scopophilic Pleasure to the Jouissance of the Madonna," 788.
25. Hélène Cixous, *The Day I Wasn't There*, trans. Beverley Bie Brahic (Evanston, IL: Northwestern University Press, 2006), 26.
26. As Colomina notes, "Medicine and biology became the basis of political theory. Through this 'biologising of politics', the sciences of the body were firmly established as the basis of 'social hygiene.'" The line between architecture and medicine was blurred. Beatriz Colomina, *X-Ray Architecture* (Zürich, Ch: Lars Müller Publishers, 2019), 18.
27. Colomina, *X-Ray Architecture*, 146.
28. John Wilson, "The 'Useful' Memorials of a Centennial Year," *New Zealand Historic Places* (January 1990): 16-23, 22.
29. Christine McCarthy, "'From Over-Sweet Cake to Wholemeal Bread': The Home & Building Years; New Zealand Architecture in the 1940s," *AHA: Architectural History Aotearoa* 5 (2008): 1-12, 2.
30. "Centennial Memorial Plunket Rooms at New Brighton," *Home and Building* 5, no. 1 (December 1940): 21-22, 21.
31. "New Clinic Opens at Pakuranga Centre," *New Zealand Herald*, 2 December 1965.
32. "New Plunket Clinic Opens," *North Shore Times - Advertiser*, 15 April 1969.
33. "Papatoetoe Plunket to Open New Rooms," *South Auckland Courier*, 26 January 1967.
34. "[...] in some areas mobile Plunket Rooms in vans and buses were trialled in order to reach mothers and babies, particularly in new suburban developments without a permanent clinic." Knox, "Feminism, Femininity and Motherhood in Post-World War II New Zealand," 51.
35. "Plunket Rooms at Otara Are Moveable," *New Zealand Herald*, 24 April 1967.
36. G.S. Jeffs, M.N.Z.I.E., Regd. Engineer, *Report on Structural Condition of Original 2-Storey Plunket Society Headquarters Building at 96 Symonds Street, Auckland, C.I.*, 1966.
37. "New Plunket Headquarters for Auckland," *Building Progress* (October 1966): 48-49.
38. "New Plunket Headquarters for Auckland," 48-49.
39. "New Plunket Headquarters for Auckland," 48-49.
40. Clendon, "Motherhood and the 'Plunket Book,'" 15.
41. Clendon, "Motherhood and the 'Plunket Book,'" 175.
42. Clendon, "Motherhood and the 'Plunket Book,'" 94.
43. Julia Kristeva, "Motherhood According to Giovanni Bellini," *Desire in Language: A Semiotic Approach to Literature and Art* (Oxford, UK: Blackwell, 1980), 237-70, 238.
44. Cixous, *Stigmata*, 72.