INSTITUTIONAL CHALLENGES IN ADDRESSING
HEALTHY LOW-COST HOUSING FOR ALL:
LEARNING FROM PAST POLICY

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Abstract
There is increasing interest in how New Zealand might address the policy issue of providing good-quality affordable housing in the future. A crucial part of this is dealing with the quality of existing dwellings, particularly residential housing built prior to the Building Code 1991, which makes up the bulk of the housing stock. Present housing standards for existing dwellings have origins in the policy discussions of the 1930s and 1940s. This article examines the institutional influences on the development of policy for housing regulation in the 1930s and 1940s and discusses the way that institutions can affect how housing quality, particularly in the private rental sector, is framed as an issue today. This paper uses primary documents sourced from government files at Archives New Zealand, giving a fresh perspective on housing history, including the influence of organisational relationships, the redefinition of the housing role of the Department of Health, and the way that morality was embedded in policy – exemplified in the exclusion of Māori from mainstream government administration. We conclude that while the socioeconomic and political contexts of policy may change, the institutions and ideas of the past can linger and shape how policy issues are framed today.

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INTRODUCTION

The shape of the housing market and the quality of housing – whether public or private, old or new – can have an influence on the health of the occupants (Howden-Chapman 2004). Housing is an important determinant of health, a “commodity, purchased by a household, but also an investment in health” (Fass 1987). Therefore, the state can be seen to have a legitimate policy role in addressing the externalities of housing.

In effect, the state – and those who are able to impose their views through it – contributes very substantially to producing the state of the housing market, doing this largely through all the forms of regulation and financial assistance aimed at promoting particular ways of bringing tastes to fruition in terms of housing, through assistance to builders or private individuals, such as loans, tax exemptions, cheap credit etc. And it does this, particularly, by directly or indirectly guiding the financial – and also emotional – investments of the various social categories in respect of housing. (Bourdieu 2005:16)

The current Labour Coalition Government has recently stated its vision for housing in New Zealand as one where “all New Zealanders have access to affordable, sustainable, good quality housing appropriate to their needs” (Housing New Zealand Corporation 2005:7). The launch of The Housing Strategy for New Zealand (Housing New Zealand Corporation 2005) brings together the range of work currently undertaken in housing, including plans to review policy regulating existing dwellings. It is both timely and important to look at the institutional barriers policymakers have faced in the past in attempting to achieve a better quality of housing, particularly for people with a low income, in order to more closely understand what issues might be faced in strategies today. This paper takes a comparative historical perspective, drawing on the content of government files between 1935 and 1950, with a focus on private rental housing. With the benefit of hindsight, the current political and policy interest in housing, demonstrated by the creation of the Department of Building and Housing in 2004 and its expansive work programme reviewing housing policy in New Zealand, can be set in the context of past construction of the policy issues.

A rich collection of histories is available on housing in New Zealand (Davidson 1994, Ferguson 1994, Schrader 2005). These authors outline the rise of social housing under the first Labour Government, documenting the transition from a state housing scheme to a welfare model, influenced by the popularity of home ownership. This paper draws on these histories, focusing on the organisational relationships and ideas that shaped policy regulating housing quality standards in existing housing in the private rental sector.
The private rental sector is growing in proportion to the decline of home ownership and the low base of state housing. While new housing must meet the health and wellbeing requirements of the Building Code, no such requirements apply to existing dwellings, despite the majority of housing being built before the Building Act 1991. The quality outcomes for existing housing have not changed substantially since the nuisance and sanitation requirements of the Health Act 1920, or the Housing Improvement Regulations 1947. This paper explores the ideas and institutions that framed this policy issue, presenting evidence that suggests that the way housing quality in existing dwellings is framed today is contingent on institutions that linger on from the past.

The period during and immediately after World War Two was a critical juncture in housing history. It was a period of major economic change and political uncertainty, features that were catalysts to the rise of a welfare state. “Critical junctures” such as these are moments when change is possible, where political, economic and social conditions collide to create opportunity for institutional change that can then have unintended consequences and outcomes in the future: “political development is often punctuated by critical moments or junctures that shape the basic contours of social life” (Pierson 2000:251).

The effectiveness of policy decisions on housing quality in the 1930s and 1940s was constrained by cultural norms and institutions. The incorporation of morality into housing policy restricted the benefits of state housing by defining who was deserving and who was not. Māori were excluded from mainstream housing assistance on the basis that their needs would be met by the under-funded Department of Native Affairs. Additionally, poor inter-agency communication resulted in unclear problem definition and conflict between government administrations. The crisis in housing quality for those in hardship was eventually diminished in part by a concerted post-war effort to build state housing, and policies supporting home ownership, a form of tenure increasingly embedded in the national psyche after World War One (Davidson 1994, Ferguson 1994).

We begin with a brief discussion of the historical institutional methodology the paper uses and the methods employed to review documents from Archives New Zealand. We then consider the legislative meanings of housing quality, and argue that the legal system has changed very little since the 1940s. Next we examine the institutional influences on how the policy issue of housing quality was defined and addressed, followed by a discussion of the cultural norms that influenced the policy and its implementation, focusing on the morality of housing quality and tenants. Finally, we discuss the contemporary face of these institutional and cultural factors in the context of housing policy in the private rental market today.
METHOD AND DATA COLLECTION – THE IMPORTANCE OF HISTORY

This paper adopts an institutional theoretical framework. Institutionalism is an approach that explains political, social and economic outcomes through the study of institutions. We acknowledge that “institutions are not a substitute for interests and ideas as the ultimate motors of political action” (Hall 1992:109), but they are a useful and important means for examining political change. Institutions can be described as “formal organisations, informal rules and procedures that structure conduct” (Thelen and Steinmo 1992), or “formal rules, policy structures, or norms” (Pierson 2000:265).

A historical perspective helps to illuminate the assumptions that influenced the process of making the rules, and also sheds light on how things work today: “at a general level the historical context shapes current circumstances in important ways” (Malpass 2000:210). Decisions made in the past tend to have implications for the future through a process of “path dependence”. This term refers to the idea that once a path is chosen, or an institution established, it is likely to persist or is increasingly unlikely to be strayed from (Pierson 2000). We use these insights to critically examine the policy decisions and processes of the past, which have created legislation still used in housing quality regulation today.

Data Source and Analysis

A substantial review of government files relating to housing between 1930 and 1945 was used to inform the arguments in this paper. Relevant papers were sourced from the archives of the then Departments of Health, Housing Construction, Native Affairs, Justice and Labour held at Archives New Zealand. Responsibility for housing was dispersed across government departments, which meant locating relevant documents was a process of following trails of correspondence across files and ministries. During this period, considerable criticism was directed towards local authorities for their management of housing quality at the regional level. For this reason, the data source was widened to include archives from the Wellington City Council, in order to better understand the position of local authorities.

The selection of information was important, given that “writing history requires hard choices, about what to put in and what to leave out, and about what is important and what is not” (Malpass 2000:196). We attempted to include all material, and where selection was needed it was chosen to “reveal both contrary and supporting indicators” (Tosh 2000:137). Thematic analysis was used to analyse the information, facilitated by the qualitative software programme NVivo. Coding data into key themes is a useful place to begin qualitative analysis as it can show relationships between events that
emerge from the chronological narrative of history. We then evaluated the material with the goal of exploring the institutional barriers and opportunities to address the quality of housing that existed in this period.

THE SUBTLETY OF A "QUALITY" HOUSE – A BACKGROUND ON THE REGULATION OF HOUSING QUALITY

Before discussing the historical records we will outline the legislation and regulations that control existing housing today because it is apparent that these acts have changed very little since the 1940s. There are four key pieces of legislation in New Zealand that make reference to the expected quality of existing housing stock, including owner-occupied and rented dwellings. These are the Housing Improvement Regulations 1947, the Health Act 1956, the Residential Tenancies Act 1986 and the Building Act 2004. The agencies responsible for enforcement and the quality required by each regulation or act is summarised in Table 1.

Table 1 Current Regulations Applicable to Existing Housing Stock

<table>
<thead>
<tr>
<th>Legislation</th>
<th>Date</th>
<th>Quality Requirements</th>
<th>Responsibility for Enforcement</th>
<th>Responsibility for Administration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing Improvement Regulations (1947)</td>
<td>1947</td>
<td>Prescriptive list of requirements, including heating, amenities, and number of people per room</td>
<td>Local government</td>
<td>Ministry of Health (with the Minister for Housing)</td>
</tr>
<tr>
<td>Health Act (1956)</td>
<td>1956</td>
<td>Free from nuisance and insanitary conditions</td>
<td>Local government</td>
<td>Ministry of Health</td>
</tr>
<tr>
<td>Residential Tenancies Act (1986)</td>
<td>1986</td>
<td>“Reasonable condition” and compliance with relevant legislation</td>
<td>Tenancy Services and Tribunal</td>
<td>Department of Building and Housing</td>
</tr>
<tr>
<td>The Building Act and Code (2004)</td>
<td>2004</td>
<td>Free from nuisance and insanitary conditions</td>
<td>Local government</td>
<td>Department of Building and Housing</td>
</tr>
</tbody>
</table>
The Legal Conception of Acceptable Housing

The definition of an adequate existing house is not made explicit in the Health, Building or Residential Tenancies Acts. The Housing Improvement Regulations are a prescriptive set of requirements, not often enforced because they are thought to be dated, and incompatible with the trend towards legislation that focuses on outcomes rather than solutions, exemplified in the Building Act 2004 and the Resource Management Act 1991. The Health Act 1956 and the Building Act 2004 attempt to ensure that the immediate illness and injury risks of existing dwellings are minimised. A distinction is made between new and existing buildings in the Building Act, with new buildings required to meet much higher health and wellbeing standards (sections 3(a) and (b)).

A local authority may act on a dwelling and its surrounds if they consider it to be offensive or likely to be injurious to health under the Health Act 1956, section 29. The nuisance provision of the Health Act is not found in other legislation and is used by local authorities to address housing quality problems. Under the nuisance provision of the Health Act 1956, a house must be free of vermin, overcrowding of occupants, contaminated or potentially contaminated water, and under section 39 have adequate sanitary facilities. Commonly, local authorities enforce the provisions of the Building Act 2004 relating to dangerous and insanitary housing, where fines can reach up to $200,000. The Building Act applies largely to new housing and renovations, but can be used in place of the Health Act to govern sanitation, dangerous conditions and earthquake safety in existing dwellings (Building Act 2004, sections 121–123). Existing housing is rarely subject to the regulatory provisions of the Building Act, except in extreme cases. The cost for local authorities in taking a case to court is high, and uncertainty of the outcome of a hearing can influence the decision to prosecute. The lack of alternative accommodation for the occupants of a house can also influence the way that housing quality regulations are enforced.

The Residential Tenancies Act 1986 has a slightly different approach, requiring a rental property to comply with relevant legislation and also be maintained in a “reasonable” condition. What constitutes “reasonable” largely depends on interpretation by a tenancy mediator, or an adjudicator in the Tenancy Tribunal. It is further complicated by informal arrangements between landlord and tenant. A tenant may sometimes settle for a house that would not be considered reasonable by an official measure if they are able to pay a lower rent. Also, the onus of complaint is on the tenant, who may fear jeopardising the tenancy (Department of Building and Housing 2004).
Over two-thirds of the current housing stock in New Zealand was built before standards requiring insulation in new buildings were introduced in 1977 (Howden-Chapman and Carroll 2004); in Dunedin this figure is over 80% (Povey and Harris 2005). Very minimal housing regulations coupled with the popularity of weatherboard-style housing, low expenditure on housing maintenance (Saville-Smith and Fraser 2004), and inadequate provision for energy-efficient heating (Parliamentary Commissioner for the Environment 2006) suggest that the quality of existing housing in New Zealand is likely to be a national problem.

In 1946 the World Health Organization defined health as “a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity” (World Health Organisation 1946). Quite clearly the acts outlined above deal with housing as a determinant of health in a narrow sense, where health is the absence of disease or injury and the intention is to ensure the indoor environment does not risk basic and immediate health and safety. The less obviously imminent risks of cold and damp housing are largely ignored (Aylin et al. 2001).

The “Unhealthy” House in the 1930s and 1940s

The ideas expressed in legislation about house maintenance have changed very little since the 1930s and 1940s – an example of how institutions can endure. In the 1930s the ideal house, according to medical professionals, was well-ventilated, dry, warm, light and sanitary, with adequate conveniences including a lavatory and water supply (hot and cold), and occupied by the correct number of people. A survey of Māori households was based on these ideals and took account of lighting, dampness, ventilation, wall and floor linings (Turbott 1935).

The first (and, to date, only) national survey of housing conditions was undertaken in 1935 by the Government through the Department of Internal Affairs and administered by local authorities. This was in response to considerable concern over the presence of urban “slum” areas (Department of Health 1935). The survey regulations stated a house should have freedom from dampness, satisfactory light and ventilation, proper drainage, ample air space, satisfactory yards and paths, good general repair externally and internally, a sink, a bath, basin, w.c. (water closet or toilet) with provision for disposing of waste water, satisfactory hot and cold water supply, satisfactory artificial lighting, suitable provision for heating, a proper stove for cooking food, and adequate cupboards for storage of food (Wellington City Corporation 1937). This survey was the basis of the provisions introduced into the Housing Improvement Regulations 1947, which (as Table 1 shows) still apply today.

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5 The Building Research Association of New Zealand conducts a housing quality survey of 500 random houses providing a “snapshot” of housing conditions (Clark et al. 2005). Quotable Value New Zealand also holds some housing information relating to age of house, floor area, cladding and section area.
THE ADMINISTRATIVE SETTING AND HOUSING QUALITY 1935–1945

In the early part of last century housing policy was scattered across government departments. Housing conditions were managed as a public health issue by the Department of Health, a reflection of the responsibility also held by the Ministry of Health in the United Kingdom (Malpass 2003). The Department of Health administered the Health Act and local authorities enforced it. The Department of Labour was responsible for the Fair Rents Act, while anything to do with what was thought to be Māori housing was the responsibility of the Department of Native Affairs. The establishment of the Department of Housing Construction in 1936 launched a national state housing scheme but further complicated responsibility for housing quality in existing dwellings. The diagram in Figure 1 demonstrates the decentralised administrative approach to housing.

Figure 1 Government Administrative Structure and Responsibility for Housing, 1940
The Department of Health and local authorities had responsibility for the public health of the country, which included monitoring the existing housing stock. They had little funding or mandate to erect new housing, or to fund the improvement of existing dwellings, but they could order owners to improve their properties on threat of demolition. The Department of Labour administered the Fair Rents Act 1936, although there is little record of the enforcement of requirements for the landlord to keep the house in a reasonable state of repair. The responsibility for housing quality in existing dwellings since the early 1900s and prior to the late 1940s primarily rested with the Department of Health, medical officers of health, and local authorities charged with protecting the public’s health.

Institutional Arrangements and Barriers to Addressing Health and Housing

Given the relatively large amount of primary correspondence on housing issues within the files of the Department of Health, it seems they were the first port of call for housing problems. Examples of action using section 40(2) of the Health Act 1920 show the constraints enforcers of the legislation faced in improving housing conditions in 1939. Administering the Health Act, the Department of Health ordered a landlord to improve substandard parts of his property or face an order to close the premises. The landlord was to improve, among a list of nine points: defective flooring and windows; inadequate under-floor ventilation with surface water from the ground outside; the quality of the roof, spouting and down-pipes; inadequate facilities for the disposal of waste; and the quality of the water supply (County Clerk 1939). The landlord failed to act and subsequently the house was condemned. The house was occupied by a family with nine children, who received an eviction notice from the Department of Health stating they were to vacate their house within two weeks (Reuben 1939). Their reply is shown in this abridged letter:

It has been over 12 months since this place has been condemned by the Health Inspector and now it is in a terrible way. […] I did apply at the native Court, Kaiapoi on February 7th for a house and so far we have heard nothing more about it as I had nothing to put down for it and a fit ground to build it on, only we were waiting for the return from your office […] the house is terrible and we can’t get one on account of too many children, 9 of them and son far from well and receiving this final notice for the last and the children and ourselves don’t know what to do we have tried but everybody refused to give one. […] let me know what we are to do. (Reuben 1939)

Their applications to the Native Court were rejected because the family did not have any land on which to build a house, which was a requirement for a loan (Mason 1939). There is no record of a solution to the problem within the files and it can be assumed that the family was forced to search for alternative accommodation. The Department of Health responded:
In the circumstance it would appear that in the interests of health there is no option but for the premises to be vacated. The question of accommodation for this family, however, is a matter concerning which I am unable to make any suggestions. (Fletcher Telford 1939)

The difficulty of enforcing the Health Act was in part due to a shortage in supply of housing caused by economic depression in the 1930s, and the Second World War, which caused a shortage of building materials and labour, and saw the re-direction of funds to the war effort. It was difficult to enforce regulations where there was no alternative accommodation for tenants. This perspective was espoused when the Department of Housing Construction proposed new legislation for slum clearance:

The suggested powers of the Director for ordering demolitions and closures will be no more effective than the existing provision unless there are houses available for those concerned at rents within their means. (Director Division of Public Hygiene 1941, original emphasis)

The problem was not seen to be one of inadequate legislation or enforcement but a symptom of a lack of affordable, good-quality housing. Many felt that this problem definition was not an acceptable reason for the apparent inaction of local authorities and the Department of Health. A housewives union described areas of “slums”, “not fit for any human being to exist in” in Te Aro Flat, Aro Street, Thorndon and Newtown areas of Wellington (Birchfield 1941:4). Dialogue between lobby groups and the Minister of Housing, and later within the new State Advances Corporation shows that local authorities and the Department of Health were regarded to be failing in their duty to maintain the expected standard of housing:

It is agreed that the Health Department and the Local Authorities have most of the powers necessary for slum clearance, and have indeed possessed them for the last 40 years and yet practically nothing has been done to remedy the position. (Director of Housing Construction 1942)

While the previous excerpt suggests that existing legislation was adequate, the Director of Housing Construction embarked on the creation of new regulations in order to deal with evidently poor-quality housing and the seeming inaction on the part of the local authorities and Department of Health. It was hoped that this legislation would enable greater capacity and swifter action in sweeping out the slums and improving the standard of housing in New Zealand.

The new State Advances Corporation, established in 1936 to manage the development and provision of state housing, began to take an interest in existing housing, extending their duty of supply into the supervision of housing stock with the proposal for the Housing Improvement and Slum Clearance Bill and associated regulations. A bill
was drafted in early 1941 without consultation with the Department of Health, Department of Native Affairs or local authorities (Director of Housing Construction 1941). Initially it was proposed that a new department would be created to administer the Act, although this did not eventuate. Comments from the Treasury made it clear that there was reluctance to set up a new department. Treasury was anxious that consultation take place with the Department of Lands and Surveys because of their extensive experience in the area. On consultation the Department felt the Act “does not affect this Department as far as I can see” (Under-Secretary of the Department of Lands and Survey 1941). No mention was made of the pivotal role played by the Departments of Health or Native Affairs, or of the local authorities.

A Diminishing Role for Health in Housing

The process of creating the Housing Improvement and Slum Clearance Act (1945) and Housing Improvement Regulations (1947) realigned the relationship between housing and the Department of Health. Local authorities and the Department of Health expressed disappointment that the Director of Housing Construction did not consult them and ignored their expertise. Addressing the Director of Housing Construction, the Director-General of Health noted:

> It is desired to emphasise that under the Health Act, 1920, certain powers in regard to housing are already vested in the Health Department and Local Authorities. These powers represent the generally accepted belief that health and housing are closely related. (Director-General of Health 1941)

After an inter-governmental committee meeting, the Director of Housing Construction felt considerable progress had been made in “reconciling conflicting interests” (Director of Housing Construction 1941). Files show that attendees disagreed and thought that greater headway in improving the condition of housing could be made by increasing the strength of existing legislation. Nonetheless, the Director felt that the Department of Housing Construction should play a larger role in administering the new bill and take over from local authorities: “I rather imagine that when Local Authorities fully realise what is involved in carrying out their statutory obligations they will be quite glad to pass it on to the Department (Director of Housing Construction 1941).

The Department of Health, sensing the plans to override their jurisdiction and the ensuing complications of having the Housing Improvement Act and Regulations, the Health Act and the council by-laws overlapping, wrote to the Prime Minister and conceded their role in housing to the Housing Division of the Public Works Department.
Under this measure there will be overlapping of the activities of two Departments, Health and Housing, as it and the Health Act both give powers to make regulations on the same matters. Incidentally there will also be overlapping between the local authorities acting under the provisions of the Health Act and the Housing Department acting under the provisions of the proposed Bill [...] I concur, that there will be no objection from our side if as a matter of policy the Government decides that the whole of the matters previously carried out by the Health Department and now apparently intended to come within the province of the Housing Department should be transferred to the latter. (Minister of Health 1942)

The local councils, responsible for the implementation of the Housing Improvement Regulations, were given less than two weeks to respond to the draft regulations. The Local Government Commission brought to the attention of the Prime Minister that there was an inconsistency between the draft regulations and the Standard Building by-laws, and that reference to new buildings as well as existing stock meant that lower standards of building would be required for future houses than were already in existence (Goldstein 1947). It was felt that this would create difficulties in administration for local government. The New Zealand Counties Association noted the same contradiction (McKewen 1947). Eventually a clause was inserted in the Act making the housing standards in the by-laws superior to the Housing Improvement Act Regulations, which meant that the regulations would only apply to housing once it was built. The resulting regulations were administered by the Public Works Department, although the Department of Health still felt they had some general interest in “maintaining a reasonable standard” of existing housing (Maclean 1949).

**MORALITY AND HOUSING**

Institutions can be reflected in the way that people live out their everyday lives, in that they “organise hopes, dreams, and fears as well as purposeful actions” (March and Olsen 1996:249). This section will address some of the rules or institutions in society that can influence the way policy choices are made and implemented.

In the 1940s the rhetoric that all people should have access to quality housing was tempered by the Victorian belief that some were more deserving than others. In 1940 a medical officer of health wrote to the Director-General of Health about a man employed in a government department with three children, who was renting a one-room shack with one bed and no opening windows and was unable to acquire a state house. This was not uncommon as the government was unable to keep up with demand for state housing and allocation was initially based on the idea of the upstanding citizen, hardworking and able to provide references (Schrader 2005). The Medical Officer suggested that the housing conditions of “people of this type” should be brought to the notice of the Minister (Medical Officer of Health 1940).
In another situation, the women of the Elizabeth McCombs Club\(^6\) presented the case of a woman whose husband recently had a nervous breakdown and their four children all shared one room. The Club praised the woman’s character: “She is a wonderful mother and the children are spotlessly clean. They are definitely not slum dwellers” (Elizabeth McCombs Club 1940). The clear implication was that the woman and her family were not slum dwellers because of her reputation as a good mother and housekeeper. The Minister took particular notice of this and committed himself to having them removed as soon as possible. This personal intervention was not uncommon, as records in State Advances files show that ministers were initially able to personally recommend families for state housing (State Advances Corporation 1936–1940).

The inability of families to access quality housing was alleged to be creating poor habits and threatening the social order. Overcrowding in boarding houses and multi-unit dwellings was particularly frowned on: “The often total absence of privacy in the details of daily life, tend to promote a loosening of moral standards which cannot fail to be detrimental from a national point of view” (National Council of Women of New Zealand 1938).

Just as some deserved better housing through their character, reputation or ability to keep a clean house, others were portrayed as undeserving because of their apparent choice to lower their housing standards. People who were seen to perpetuate their situation, and thought to be doing little to alleviate the condition of their dwelling, were in a different category to hardworking tenants. Through their own actions they forfeited a right to be assisted into a reasonable standard of housing:

> Mrs Cook said that, speaking from the other point of view, they would like to say that they did distinguish between people who were naturally dirty, who perhaps had not the mentality to keep abreast of hard times, and the people who were trying hard to keep their homes clean (Women’s Section National Unemployed Workers’ Movement 1935)

These comments extend beyond the quality of the house being linked to health outcomes. The house is a material reflection of poverty for these families, and they were further excluded because they were unable to participate in their expected roles. An untidy house did not conform to the expectations or norms of society at that time, and the people who lived in these houses were seen to be outside the expected respectable norm as well. Poverty was made visible in the condition of the house. A person could redeem their situation by trying their best to keep things orderly and tidy, and in carrying out their expected roles. Those who did not were thought to be corrupted by their habitat.

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\(^6\) The Elizabeth McCombs Club was a group established to increase the involvement of women in politics and was named after the first woman MP in New Zealand.
Political Institutions, Racism and Housing Quality

Ethnicity was associated with ideas of morality and housing quality in the 1930s and 1940s. There was, in effect, a “hands-off” policy towards Māori housing by the Government, and the strategies that did exist for assistance were so under-funded that they had minimal impact. In 1939 a letter from the Under-Secretary of Native Affairs stated the Department had about 3% of what was needed to adequately house Māori (Under-Secretary of Native Affairs 1939) and was unable to address cases recommended to them by the Department of Health:

> Although the applicant may require a larger house from a health view point, if his security will not stand a larger amount and if he is not in a position to repay it, then a smaller house or a house not fully meeting housing by-laws is surely better than none at all. (Under-Secretary of Native Affairs 1939)

An active policy of cultural assimilation coupled with inadequate funding created a huge institutional barrier for Māori to attain or maintain adequate housing. Despite these clearly discriminatory approaches taken at a central government level, Māori were blamed for the outcomes of these policies. The Under-Secretary of the Department of Native Affairs is quoted in the Hauraki Plains Gazette:

> As you will realise the question is not an easy one. It is difficult to make progress without the future cooperation of the people themselves and unfortunately this co-operation is not always forthcoming. There are still many Māoris who appear content to remain as they are. (Under-Secretary of the Department of Native Affairs 1943)

The blame was laid on the actor, rather than on the institutional causes of the situation. The Department of Health took a paternalistic and judgemental approach, asserting that there was no demand for good-quality dwellings among Māori:

> I feel personally that we should initially accept in some points standards which may not conform to the best of European housing practise in order that we may gradually develop a demand for improvement for the very poor standard now existing. (Gilberd 1938)

These statements are in direct contrast to the stories told in numerous letters to the Minister of Health or to the Minister of Native Affairs. People testified to their poor housing conditions and the effect this was having on their families, and the lack of resources allocated by government to Māori in comparison with the Pākehā state housing programme. It was evident that Māori were effectively excluded from state housing and State Advances loans through a policy of referring all Māori to the Department of Native Affairs. This was done under the assumption that the Native Housing Act 1935 gave adequate provision for housing (Chairman Director of State...
Advances Corporation of New Zealand 1936). Nothing in the legislation enacting the state housing programme explicitly excluded Māori, but the pervasive informal criteria for an applicant to be an “upstanding European citizen” effectively discriminated against them: “The State housing programme has been sufficiently long in progress for it to be abundantly clear that Māoris – even the best of them – are not successful applicants for State houses” (Judge Harvey 1944).

Some remarked that the programme was not helping those waiting for housing loans from the Department of Native Affairs: “The erection of State houses right over them, has not tended to ease the situation” (Te Anga 1943). Progress was slow and the Minister for Native Affairs stated, “Māori housing is the worst blot on the administrative system of New Zealand” (Mason 1943). In the late 1940s a small number of State Advances homes were put aside for the then Department of Māori Affairs to manage and rent out (Schrader 2005). It was not until the mid-1950s that Māori were able to apply for State Advances loans, and then only if they were considered to be “living in a European manner” (i.e. not rural), “if the personal factor is satisfactory” (i.e. meeting standards normally expected of a reasonable member of the community), and “if the security offered is in an area acceptable to the corporation” (i.e. urban, in a Pākehā area, private single-holder title) (Department of Maori Affairs 1954).

Indeed it was initially intended that the Housing Improvement Regulations (1947) would not apply to Māori housing. Local authorities felt that the regulations would be too difficult to enforce. This would have had the effect of formalising the inequalities in housing standards between Pākehā and Māori. The exclusion of Māori from the Bill resulted in criticism from the opposition. Mr W.A. Sheat of the National Party was quoted in the Evening Post: “How could a local authority with Māori houses scattered among the European houses bring about housing improvement or slum clearance while it was prevented from touching Māori dwellings?” (“Māori houses exclusion from bill” 1945).

The regulations were subsequently applied to all housing. Nonetheless local authorities were the primary enforcers of the legislation, which may have allowed the informal exclusion of Māori from housing quality standards to continue because the problems of funding and supply were inadequately addressed.

A DISCUSSION OF HOW INSTITUTIONS ENDURE

Raising the quality of New Zealand’s new and older housing stock is important for Government. (Housing New Zealand Corporation 2004:44)

The explanations in parentheses are gathered from material within the file that also holds the letter referenced (Archives New Zealand SAC 1 32/1/5).
Lieberman has claimed that “once constructed at a moment in history, institutions typically endure for significant periods of time, influencing political dynamics and associated outcomes in subsequent periods” (Lieberman 2001:1013). How do the post-war institutions constrain the current policy process seeking to address housing quality issues today? The policy issue remains the same: finding a way to ensure that “all New Zealanders have access to affordable, sustainable, good-quality housing appropriate to their needs” (Housing New Zealand Corporation 2004:7). Indeed, significant regulatory requirements like the Housing Improvement Regulations continue to apply, even though it might be assumed that our expectations for housing have changed over the last 60 years. The continuity in the substance and enforcement of regulations for existing housing stock is a stark example of how institutions can endure.

Analysis of past housing policy shows that the concept of “all New Zealanders” has not always been inclusive, and morality remains an issue in rental housing allocation today. The language used to speak about both tenants and landlords in the media and in debates on housing can be dichotomous, either pejorative or positive. This is best exemplified by calls for a “bad” tenant register. Submissions on the Review of the Residential Tenancies Act have revealed interest in the idea of a register of landlords and tenants (Department of Building and Housing 2005). The Real Estate Institute of New Zealand has taken action on this and created The National Tenancy Database, launched in August of 2005, which allows property managers to record details of previous tenants.

These initiatives have the potential to reduce the risks of the private rental sector for both tenants and landlords by making tenancy orders public. Investors have the right to access available information in order to protect their property, as tenants have the right to full information on their new home. However, the register also has the potential to further exclude a portion of tenants from rental housing, creating a sub-market of “bad” tenants unable to rent from reputable landlords and forced into informal agreements and cheaper, lesser-quality housing. Tenants may be taken to the Tenancy Tribunal due to rent default, a situation that can be the result of previous debt, bad credit or financial difficulties, all of which restrict “choice”. The register may increase barriers to rental housing for these tenants, creating a sub-market of low-quality housing rented only to tenants on the “bad” list, or alternatively could create opportunities for greater assistance and support to maintain adequate housing.

A “bad” tenant is associated with damage to property and failure to pay rent, while a “bad” landlord is portrayed as a person taking advantage of the “vulnerability” of a tenant by neglecting to do up a property or extorting a high rent. The real danger in the dichotomous construction of tenants is the association of specific groups in communities with a stereotype of a “bad” tenant, creating difficulties for some groups
of people seeking to rent a good-quality home. Recent research has shown that landlords balance the risk of their investment by associating certain characteristics with a less desirable tenant. For example, a survey of landlords showed that they preferred not to rent to large families, students, sole parents, refugees and migrants (Saville-Smith and Fraser 2004).

Statistics show that within the general population, Pākehā are more likely to gain access to home ownership than Māori (Housing New Zealand Corporation 2005), despite reports of home ownership being a desired tenure (Waldegrave et al. 2006). Past policy can be expected to have impacted on housing outcomes for Māori today; for instance, making possession of freehold land a criterion for gaining a housing loan in the 1940s meant that land confiscations during the 19th century had ongoing ramifications (Williams 1999).

There are wider stories to be told, however, beyond the time period discussed in this paper, as indicated by high home ownership rates particularly among elderly Māori couples (Cunningham et al. 2002). Research on discrimination in the private rental market, while somewhat dated, shows that discrimination by ethnicity remains a determinant of housing quality. A study in 1986 showed that barriers were put up to restrict the property available for Māori and Pacific Nations peoples based on racial discrimination: “Some private landlords and a very high proportion of members of the Real Estate Institution actively prevent Māori and Pacific Islanders from gaining access to rental accommodation” (MacDonald 1986:87).

In her study MacDonald found that Pākehā were treated differently to Māori and Pacific Nations people. Māori were often directed or forced to take up lower-quality or state housing, even where income levels were adequate for a higher-quality house, (MacDonald 1986, Office of the Race Relations Conciliator 1991). According to recent reports in the media, a property manager told a client that a property was not rented to her because she was Māori (Radio New Zealand Live Wire 2005). The evidence of discrimination and emergence of a “bad” tenant register highlights the necessity of social housing and the need for initiatives to overcome barriers that can prevent universal access to decent housing. State housing, unlike private rental housing, is determined by a social allocation formula to ensure that tenants with restricted options are given priority.

It is unlikely that supply-side measures like social housing will be a major component in addressing the quality of existing housing. As stated in the draft Housing Strategy: “the high demand for social rental housing would impose unrealistic costs on the government if it was to continue to increase supply to meet all demand” (Housing New Zealand Corporation 2004:10). Third sector and private rental housing are
identified as alternatives to social housing, although the “barriers to an adequate supply of good quality, affordable rental housing need to be identified and resolved” (Housing New Zealand Corporation 2004:10).

Legislation regulating housing quality today is based on the housing policy of the past. Local authorities still enforce this legislation and face similar criticisms to those expressed in the 1940s. A recent workshop raised the issue of enforcement with local authorities, who outlined their constrained resources, lack of alternatives for housing occupants and the complexity of many housing quality issues, which make enforcement difficult (Townsend 2005). However, acknowledging the difficulty of enforcing housing-quality legislation may make it more likely that the issue will be more effectively addressed than it has been in the past.

Housing policy in the 1940s was shaped by institutional arrangements at the government administrative level, and by societal norms that influenced implementation and excluded some people from the benefits of social policy. Differences in the way the problem of housing quality was framed made it difficult for the Department of Health and Director of Housing Construction to collaborate. The Department of Health felt the problem was a supply one and argued that it would be ineffective to try to enforce quality requirements during a shortage of affordable housing. The Director of Housing Construction defined the problem of housing quality as a legislative issue because of the slow progress made in addressing visibly run-down housing and perhaps the delay in the building of state housing caused by economic and political conditions. The isolation of each department created barriers to constructive dialogue on the nature of the policy issue and meant that a piece of legislation was created that was very similar to existing provisions.

There are still a number of separate agencies with responsibilities for housing standards – the Department of Building and Housing, Housing New Zealand Corporation, the Ministry of Health and territorial local authorities. The establishment of a new Department of Building and Housing in 2004 has brought together previously scattered work on housing policy, and provides the opportunity to establish a new institution and ways of working in housing. A further opportunity is provided by the review process intended to address the policy issue of housing conditions in existing dwellings (Housing New Zealand Corporation 2005). The past responsibilities of the Department of Health for housing raise questions about the role the Ministry of Health should play in addressing housing as a determinant of health today. There is a commitment to reducing inequalities and addressing the wider determinants of health within the Ministry of Health (Ministry of Health 2002). Despite this commitment, the Ministry plays only a consultative role in housing issues, taking a diminished position to that shown in the 1930s and 1940s.
It is notable that citizens in the 1930s and 1940s brought the condition of their housing to the attention of the state but were largely ignored on the grounds that they were Māori. There has been comparable inaction on the problem of unheated and substandard existing housing across New Zealand today. Outliers to this general observation are localised and include the Housing New Zealand Rural Housing Programme (which has provided loans for essential repairs to households, including those in private tenures), the National Energy Efficiency and Conservation Strategy (which, among other initiatives, retrofits housing with insulation), and He Kainga Oranga – The Housing and Health Research Programme, which insulated 1,400 houses in a random control trial on the links between insulation and health (Howden-Chapman et al. 2005, 2006). Explicit reference to the quality of existing housing in the Housing Strategy and the release of Healthy, Wealthy and Wise (Parliamentary Commissioner for the Environment 2006) indicate a greater interest in the environmental and public health ramifications of inadequate housing, and the potential for long-overdue discourse and larger-scale national action on the issue.

The Government has accentuated the role of inter-agency collaboration and there has been attention paid to the means of achieving this (Walker 2004), but problems may arise where the nature of the policy issue is defined without appropriate input from the wider public sphere. This was shown in the recent review of the Residential Tenancies Act, which failed to effectively tap into the views of tenants. Tenants had only a 7% response rate, in comparison to a 70% response rate from landlords (Department of Building and Housing 2005). The challenge of identifying and addressing the institutional barriers to greater participation by tenants in framing housing quality policy remains to be resolved.

**CONCLUSION**

Our intention has been to show the importance of examining the origins of institutions that shape policy creation and implementation in order to gain insights into the operation of present policies. Past policy and institutions can seem far removed from contemporary experience, but while the current context of housing differs from the 1930s and 1940s, the effects of institutions and cultural norms have many similarities. Achieving healthy housing in existing dwellings remains a policy problem. While exclusion from good-quality housing is less institutionalised in housing policy, some similar outcomes are evident in the way that private rental markets reinforce and perpetuate stereotypes of “bad” or risky tenants. The creation of a new organisation, the Department of Building and Housing, if it identifies healthy housing as a key outcome, provides an opportunity to confront the barriers of the past. Effectively addressing the issue of ensuring access to healthy housing for all, including the majority of the population who live in existing houses, would be a critical contribution to improving a key social and environmental determinant of health.
REFERENCES


Chairman Director of State Advances Corporation of New Zealand (1936) Memo from the Chairman Director of State Advances to the Under-Secretary of Native Affairs, 13 August 1936, Archives New Zealand SAC 1 32/1/5.


County Clerk (1939) Dwelling Premises Situated Main North Road, Woodend, Now Owned by You, and Occupied by Mr H.T. Reuben, 21 February 1939, Archives New Zealand H1 8839 194/18.


Department of Maori Affairs (1954) Department of Maori Affairs Maori Housing Act, 1935 and Maori Housing Amendment Act 1938 – Lending and Building, 22 August 1954, Archives New Zealand SAC 1 32/1/5.

Director Division of Public Hygiene (1941) Notes on Slum Clearance Improvement Bill, 27 August 1941, Archives New Zealand H1 135/40.

Director of Housing Construction (1941) Slum Clearance Legislation (Housing Improvement Bill 1941), 17 February 1941, Archives New Zealand HD W 1521 180/1 pt 1.

Director of Housing Construction (1942a) Housing Amendment Bill, 17 July 1942, Archives New Zealand HD W 1521 180/1 pt 1.

Director of Housing Construction (1942b) Memo for the Minister of Housing, 18 August 1942, Archives New Zealand HD W 1521 180/1 pt 1.
Director-General of Health (1941) *Slum Clearance Legislation, 27 August 1941*, Archives New Zealand H1 135/40.

Elizabeth McCombs Club (1940) *Minutes of a Deputation from the Elizabeth McCombs Club to the Hon. H. T. Armstrong, 26 April 1940*, Archives New Zealand HD W 1521 180/1 pt 1.


Judge Harvey (1944) *Native Housing, 10 January 1944*, Archives New Zealand MA 1 ACC W2459 BOX 249 30/1 pt 2.


McKewen, T.M. (1947) *Regulations to be Issued under the Housing Improvement Act, 1945 12 June*, Archives New Zealand HD W 1521 180/1 pt 1.

Medical Officer of Health (1940) *Letter to the Director-General of Health, 22 August 1940*, Archives New Zealand H W2191 Box 15 135.

Minister of Health (1942) *Housing Improvement Bill, 5 November 1942*, Archives New Zealand H1 135/40.


National Council of Women of New Zealand (1938) *Letter from the Christchurch Branch of the National Council of Women to Dr Telford, Department of Health, 18 July 1938*, Archives New Zealand H W2191 Box 15 135.


Reuben, K. (1939) Letter to the Minister of Native Affairs, April 27 1939, Archives New Zealand H1 8839 194/18.


Te Anga, T.H. (1943) Native Housing – Kihikihi, 25 April 1943, Archives New Zealand MA 1 ACC W2459 Box 249 30/1 pt 2.


Under-Secretary of Native Affairs (1939) Native Housing – Your Ref 194/18, 18 May 1939, Archives New Zealand H 1 8839 194/18.

Under-Secretary of the Department of Lands and Survey (1941) Slum Clearance Legislation, Archives New Zealand HD W 1521 180/1 pt 1.

Under-Secretary of the Department of Native Affairs (1943) “Maori Housing Department’s problems” Hauraki Plains Gazette, 20 December 1943, Paeroa.


Women’s Section National Unemployed Worker’s Movement (1935) Deputation to the Hon. Sir Alexander Young (Minister of Health), 15 August 1935, Archives New Zealand H 1 b.116 177/2.