

Background

In a symposium at the National Library of New Zealand Te Puna Mātarauranga o Aotearoa in 2003, Ian Wedde concluded his talk on creating knowledge out of documentary heritage collections with a concept which he called a 'core sample' methodology¹. This methodology of historical research and narrative is the foundation for these vignettes.

The idea of the 'core sample' method Wedde outlined, at least as I interpret it, is that the researcher hones in on what a person is doing at a specific moment in time in a specific place. Wedde describes it as making "anyone at all, no matter where, the physical and cultural occupant of a geohistorical shaft extending from the air they stood in, through the ground they stood on, and of a view 'as far as the eye can see'."²

Here is Wedde commenting on why he finds this model interesting: "the richness of the narratives it generated and the volume of connections it registered. Where the factuality of the catalogue was replaced by the profligate knowledge richness of the 'core sample', and narrative connectivity by the core's tall stories, a place to stand appeared that could be occupied by anyone capable of being astonished by the marvellous yarns with which scholars had just astonished themselves".³

In thinking through the brief for the Cenotaph Stories that our fight against Covid-19 has been 'like a war', I wanted to test out this methodology to see if it might be useful for students and their teachers seeking to go beyond the factual details of a given Online Cenotaph record and to explore the significance of a given experience, or sequence of events, for the people whose lives are recorded there.

For the purposes of exploring this concept, I chose to start with an Online Cenotaph record that I have a personal connection with, and to use this as a platform to leap from to compare and contrast the experiences of two doctors (my great grandparents) during the time of the First World War and the related Influenza Epidemic, and the experiences of essential health workers (and those in bubbles with essential workers) during the COVID-19 pandemic response in Aotearoa (my brother and his partner, and my father).

¹ Ian Wedde. 'Making Ends Meet: Archives and Narratives'. *Making Ends Meet: Essays and Talks, 1992-2004*, pp 280-293. (Victoria University Press, Wellington, New Zealand: 2006)

² Ibid. p 292

³ Ibid. p 292.

Identity ▾

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I took a fairly structured approach to generating my core samples, fleshing out one set through historical research and pouring over photograph albums and texts and artefacts and secondary sources from Auckland Museum online and other documentary heritage collections; and the other through the same questions asked in person or survey form, supplemented by trawls through the mass living archive that is the Internet.

My questions can be found below and I constructed my ‘core samples’ from these to see what connections might emerge. I will let the reader determine these connections for themselves by standing in their imagination in that geohistorical shaft Ian Wedde describes. But they have to do with the medical practitioner’s calm focus under pressure on what is in front of them within a highly organised system, irrespective of plans or politics playing out in the background; the efforts societies go to protect these systems and what happens when those efforts fail; of making do and adaptation; of the impact of wars on those who remain at home, of technological innovation, and of the body as a battleground.

I want to thank my family members, present and past, who allowed me to examine them in this way; returning themselves to points on their respective curves of cases and fatalities and the experiences they lived through during the times the society around them was under threat. It was a rare treat to receive a *Cenotaph Stories: Contemporary Reflections Grant* from Auckland Museum to enable us to connect in this way.

Questions used to generate the core samples

1. What is your name and who are you?

My name is and I am a (at the historical moment I will be describing in my response)

If you have a photograph of yourself from around that time, I would sincerely appreciate being able to include it in the project.

2. What is the spatial setting your moment of activity / experience takes place in?

Where are you standing (or sitting) in your imagination / recollection of this activity / experience? E.g. 'at my desk in my office', 'at home sitting at the kitchen table in my kitchen' etc.

For this core sample I am interested in uncovering experiences and the 'material' of being an essential health worker (or being in a bubble with an essential health worker) during of COVID-19 - within a broader concept that our fight against COVID-19 has been "like a war".

Please choose a moment of activity / experience in a spatial setting that will generate interesting 'material' relevant to capturing this experience and related to this topic. Material may be technologies, people, clothing, a general 'atmosphere' (e.g. of chaos or of calm) and so on. Please ensure private details of any people you describe are protected.

3. What is the time period that your activity / experiences takes place in?

Imagine looking at your phone or watch while you are in the midst of the activity / experience you are describing. What date and time does it have on it?

In addition to reporting the date and time, please provide a broader sense of the temporal context. Imagine yourself saying to a friend "remember that time when we...." or "remember that time during". Examples of your broader temporal context (also known as the historical lead up) might be:

- The government has just announced the country is in lockdown*
- I am taking off my PPE having had my first encounter with a patient with COVID-19 during Alert Level 4*
- My partner (an essential health worker) is late home and I am making dinner*
- I have been called to consult on a case of probable COVID-19 but the country is about to move from Alert Level 4 to Level 3 in one day's time*
- I am in the middle of my first telephone consultation with a patient*

This broader temporal context will be fleshed out further through research to situate the sample. If you have any supporting material or evidence to assist with this detailing, please provide it.

4. Please describe the space around you in detail at that specific time, starting by taking an imaginary 360 degree panoramic photograph.

Imagine you are in your spatial setting and taking a 360 degree panoramic photograph using your mobile phone, turning yourself around full circle to capture all that you can see. Consider the following examples of what you might record:

- *What is the layout of the space or room?*
- *What are the specific objects or physical elements / details in the space?*

If you have a camera that can do this or a video camera, please feel welcome to take (or reconstruct) a 360 degree image as the setting would have been at the time. We can blur and anonymise any people or private details in the image.

At each point in the panorama, make a note of significant details that 'evidence' the moment in time you have identified. Are there windows? What is happening through them? Are there significant posters on the wall? Are there particular objects you want to draw attention to?

5. At the moment in time you have selected what's happening? Look down on yourself from the ceiling or a point in the air. What do you see?

Please consider the following kinds of questions:

- *What are you doing in general or attempting to accomplish?*
- *Who are the people involved? Just you? Others?*
- *What is your status or role (and how might we know) - and that of others?*
- *What explicit structures, rules or norms govern the situation you are in? (E.g. if you are at work, 'being professional')*
- *What are you wearing?*
- *What is your affect like? (A feeling state becomes an affect when it is observable, for example, as overall demeanor or tone and modulation of voice. Affect is to be distinguished from mood, which refers to a pervasive and sustained emotion. Common examples of affect are euphoria, anger, and sadness.)*
- *What are you feeling?*
- *How are you interacting with others?*
- *What are your specific behaviours, both verbal and non-verbal?*

6. In your chosen setting, what's the air around you like?

This is an opportunity to describe the visceral sense of being where you are. What season is it? What does it feel like? Thick? Hot? Cool? Tepid? What does it smell like? What can you hear? And so on. Is anything obstructing your ability to feel that air? A mask, for example?

7. In your chosen setting, look down. What is directly beneath you? And beneath that? And beneath that?

It's okay if it's carpet. Describe the carpet. Is it new or old? Patterned or plain? And beneath that? Another floor in a building? The ground? What is the land you are on? Who owns it?

Useful sources (for historical research)

- [Digital New Zealand](#) (includes Auckland Museum and National Army Museum)
- [Picture Wairarapa](#)
- [Papers Past](#)
- [Online Cenotaph](#)
- [New Zealand Electronic Text Centre](#) (includes official war histories)
- [NZHistory](#)
- [Wellington volunteers and the 1918 flu epidemic](#) (Volunteer Wellington)
- [Black November: The 1918 influenza pandemic in New Zealand](#) by Geoffrey Rice (Canterbury University Press, 2005)