First Aid and Voluntarism in England, 1945–85

Abstract
First aid was the focus of growing voluntary activity in the post-war decades. Despite the advent of the National Health Service in 1948, increased numbers of people volunteered to learn, teach, and administer first aid as concern about health and safety infiltrated new activities and arenas. In this article we use the example of the Voluntary Aid Societies (VAS, focusing in particular on St John Ambulance) to highlight continuities and change in the relationship between state and voluntary sector in health and welfare provision during the four decades after 1945. Though the state assumed vastly expanded health and welfare responsibilities after the war, the continuing vitality of the VAS suggests cultural continuities that the post-war welfare state did not eradicate. The article therefore builds on the insights of historians who argue that volunteering remained a vital component of British society across the later twentieth century, and that the state and voluntary sector were not mutually exclusive.

After the Second World War, there were fears that the voluntarism that many saw as an essential feature of British society, and which had come to the fore in the collective effort of the home front, would be fatally eroded by the advent of the welfare state.1 William Beveridge worried...
that the patchwork of voluntary associations, which he considered central to the robust civil society on which British democratic freedoms depended, might be forced into retreat by the expanded state which his famous report helped to bring about.\textsuperscript{2} A submission from St John Ambulance (SJA) to Beveridge’s post-war study of the voluntary sector argued that the public were developing an attitude that ‘‘“the state will provide”...the man-in-the-street considered the Brigade’s work was over’.\textsuperscript{3} According to historian Rodney Lowe, the events of the war decisively shifted the public mood towards acceptance of statist responses to welfare issues:

the perceived economic efficiency of the wartime state (as compared to the perceived inefficiency of the market in the 1930s) and the common need of all classes in the blitz to rely on the social services each paved the way for a degree of state intervention and a centralisation of welfare services strikingly at variance with the national tradition of individual freedom and decentralisation.\textsuperscript{4}

Muscle out by a ‘comprehensive’ National Health Service (NHS), improved state pensions, sickness and unemployment payments, and public-sector social care, there appeared to be much less for the voluntary sector to do in post-war Britain.\textsuperscript{5}

But despite the fears of contemporaries, voluntarism did have a future in post-war Britain. Recent historians have shown that the British willingness to engage in voluntary activities of all kinds remained undiminished. The increased scope of the welfare state did not simply lead to a decline of the ‘voluntary ethos’ and the replacement of an active, engaged citizenry with passive recipients of state welfare. Writing in the early 2000s, Charles More pointed to evidence suggesting that activities which involve membership of an organization had increased since the 1950s, noting that on one count almost half the population volunteered for some activity during the calendar year.\textsuperscript{6}

Historians of the post-war voluntary sector have increasingly emphasized change rather than decline. For example, James Hinton in a study of the Women’s Voluntary Service considered that, from the 1960s, the ‘quietly auxiliary role in provision of personal social services developed by WVS’ was replaced by ‘the new voluntarism centred

\textsuperscript{2} Frank Prochaska, \textit{The Voluntary Impulse. Philanthropy in Modern Britain} (London, 1988), 89.
\textsuperscript{4} Rodney Lowe, \textit{The Welfare State in Britain since 1945} (2nd edn, Basingstoke, 1999), 12.
\textsuperscript{5} Parliamentary Archives, <https://www.parliament.uk/business/publications/parliament-archives/>, HL/PO/PU/1/1946/9&10G6c81, National Health Service Act, 1946, for ‘comprehensive’.
\textsuperscript{6} Charles More, \textit{Britain in the Twentieth Century} (Harlow, 2007), 232.
around information and advice services designed to help clients negotiate the intricacies of welfare rights, mutual aid groups operating with little direct connection with the state, and campaigning, pressure-group activities. In a similar vein, Matthew Hilton argues that since 1945 there has been shrinkage of ‘service organisations’ (those doing good works in particular places) and a growth in NGOs undertaking campaigning and advisory roles, these latter constituted at national level and relying on indirect public support rather than active participation.

Nevertheless, the utility of ‘voluntarism’ as a framework through which to understand post-war welfare provision has been questioned. Martin Gorsky claims that across the twentieth century the private sector, after the state, has usually played the larger role in providing healthcare outcomes, and that the relationship between state and market should be seen as more important than state and voluntary sector. He argues that recent historiographical concern with voluntarism in the health sector reflects recent ‘third way’ and ‘big society’ political ideologies—interpretations which assume that there has been and ought to be an ongoing role for voluntary groups and charities in healthcare.

Yet, the historiography of voluntarism and post-war welfare in Britain has largely ignored first aid—which can be defined as ‘such skilled assistance as will preserve life, promote recovery and prevent the injury or illness becoming worse until medical aid has been obtained’—but it is an activity with much to tell us about the developing relationship between voluntarist civil society and the welfare and ‘warfare state’. The ‘Voluntary Aid Societies’ (VAS)—in England, the British Red Cross Society (BRCS) and the SJA—were a crucial part of the mixed ecology of emergency healthcare during the first half of the century; from the mid-1930s, these organizations were at the forefront of civil defence, training and providing volunteers to give emergency first-aid assistance during bombing raids. There were

undoubtedly tensions between an ethos of voluntary public service and the emerging emancipated individual of the post-war era. But the VAS continued to occupy an important place in the public life of the nation. In this article we trace shifts and continuities in the activities and composition of the VAS from 1945 to 1985. First, we show that, though some of the old rationale for the VAS disappeared in the era of the NHS, there was still space within which VAS could operate, and a practical need for the kinds of training and emergency care that they had long experience in providing. Second, we consider how the VAS were able to adapt their services and their appeal to volunteers to the realities of a changing society. We then examine how the composition of SJA volunteers in particular changed markedly across the period, in response to significant social and economic shifts. Finally, we examine cultures of volunteering within the VAS, arguing that while in many respects these organizations were a conservative cultural force, volunteers interpreted involvement according to their own meanings and purposes.

Most of the discussion is focussed on SJA, which was probably the most prominent of the two organizations in first-aid provision and training across these years. However, BRCS will be considered where appropriate, since the two organizations overlapped, collaborated, and complemented each other in many ways. Overall, we argue that the VAS represented the adaptation of an older service ethos and liberal view of welfare to new circumstances. These organizations’ survival, and, on many counts, flourishing, across the three post-war decades gives us an insight into change and continuity in an English voluntarist tradition across a period often represented as an era of radical social transformation.

**New Spheres of Service**

During the first half of the twentieth century up until the creation of the NHS, multiple agencies and spheres of activity coalesced to form the patchwork of health provision in Britain. The VAS were primary providers of first-aid training, and in many areas represented the first response to emergencies. SJA, which was until the early 1970s divided into an Association (SJAA) concerned with training and a Brigade (SJAB) concerned with providing first aid, spread like an evangelical movement through industrialized areas of Britain from 1877, preaching

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mutual aid in the sphere of first aid; works’ Brigade divisions often doubled as ambulance services for the local community. During the First World War, amongst many activities, BRCS and SJA Voluntary Aid Detachment (VAD) members supplemented medical services; as a result of the war effort, recruitment and training activity peaked (as we see in Figures 1 and 2). After the First World War, SJA and the BRCS came together to form the Home Ambulance Committee, the county committees of which administered 325 local voluntary ambulance services by 1925. In the mid-1930s, the SJA, BRCS, and St Andrew’s Ambulance Association in Scotland were commissioned to prepare first aiders for a chemical war. The three organizations trained over 100,000 people by January 1939, with the BRCS taking the lead and training over 85,000 people by March 1939. The Second World War was the high point in VAS activity: the expectation of mass casualties as a result of aerial bombardment led many people to seek first-aid training from VAS, who also trained Civil Defence personnel. SJA issued a staggering 304,765 certificates in 1940 alone (most of which were for first aid), and the membership also expanded significantly from 84,419 in 1937 to 167,271 in 1942 in England, Wales, Northern Ireland, and Ireland. Including Civil Defence personnel, SJA trained 1.2 million people between 1938 and 1945. Some 50,000 SJA volunteers joined the Civil Defence service, with their skills of particular use to the casualty section.

Immediately after the Second World War, at the point of the creation of the NHS, Beveridge surveyed the state of the voluntary sector in Britain. In his publication *The Evidence for Voluntary Action*, SJA described the range of their first-aid activities:

Every year Brigade members deal with more than half-a-million cases of First Aid—the majority being treated by members when on Public

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21 Clifford, *Good Uniform*, 40.
Duty, including Ceremonial Parades … sporting events … and at entertainments of various kinds … Hundreds of minor injuries are treated at the Beach Huts … and assistance is also given in staffing First Aid Huts and Tents in Holiday Camps … The Brigade also

Figure 1

Figure 2
maintains a Road Service, with roadside First Aid Posts, and during 1946 ... [operated] 588 ambulances. SJAB divisions also ran ‘Comfort Depots’ supplying communities with home-nursing materials on loan. The BRCS reported a similar range of first-aid activity.

As the post-war period progressed, some of these functions were eroded. Ambulance provision became the responsibility of the local authorities in England, Wales, and Northern Ireland in 1948. SJAB Comfort Depots were taken over by the state in some areas, and roadside and beach first-aid posts were gradually phased out as the necessity for these was reduced by increasingly effective motorized ambulances. At the same time, numbers of adult members of the SJAB went into decline which continued throughout the later twentieth century (see Figure 3). This decline preceded the advent of the NHS

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23 For example, Rand and Members, *St John Ambulance Consett*, 73–4; Cole-Mackintosh, *Century of Service*, 102.
24 Beveridge and Wells, *The Evidence*, 147; the same publication (143–53) shows that both VAS also provided a number of services that augmented state medical care but which fall outside of the first-aid remit of the current article, including care and transportation of the elderly and disabled, blood transfusion services, assistance in state, and voluntary hospitals.
and was in part a natural readjustment after the extreme activity of the Second World War—from 134,350 in 1942, adult brigade membership had already shrunk to 72,648 by 1947. In 1953, members of an ambulance division in Hull bemoaned their dwindling membership and were told by a visiting Corps Officer that they were not unique, and ‘there were divisions even worse placed than ourselves, some having only the Div. Off. [Divisional Officer] turning up for drills’. The same officer speculated that reasons for the decline included national service, which ‘took men away at the age they would join the Brigade and killed the interest in the minds of young men who knew they would be called up at 18 and could not therefore see the point in taking up ambulance work’.26

However, Gorsky’s argument that the voluntary sector made little impact in the delivery of ‘curative services’ in the post-war NHS undervalues the important role VAS played in supporting the NHS in its early years and beyond.27 In relation to 14,000 road accidents occurring each month, BRCS noted in 1947 that the new ‘comprehensive National Health Service’ did not make ‘provision for first aid work’.28 In the immediate post-war decades, VAS continued to run some ambulance services; County Councils subcontracted ambulance work to SJA and the BRCS in England, and St Andrew Ambulance held the contract for supplying the entirety of ambulance provision in Scotland. In 1950, SJA claimed that 90 per cent of the new NHS Ambulance Service personnel were part-time volunteers.29 For the first two decades of the NHS, therefore, many ambulances were still driven by volunteers from the VAS (though by the time of NHS reorganization in 1974, most ambulance staff were paid).30 In the early days of the post-war welfare state, BRCS offered further services, including nursing, home visiting, loaning medical equipment, meals on wheels, and homes for older people.31

Moreover, in a society apparently becoming ever more risk-aware, there were new areas in which the VAS’ expertise and experience in first aid were required. Perhaps the most obvious context in which increased risk awareness underpinned a rise in first-aid knowledge and training was in the workplace. Across the first half of the century,

26 Private collection, Minutes of Hull West St John Ambulance Division, Annual General Meeting, 10 February 1953.
legislation was introduced requiring that particularly dangerous industries supply first-aid boxes and/or have ambulance rooms and staff on hand who had been trained in first aid, for example: the Coal Mines Act 1911; the Ambulance and First-Aid Arrangements at Blast Furnaces, Copper Mills, Iron Mills, Foundries, and Metal Works Order, 1917; the Hides and Skins Regulations 1921; and the Chemical Works Regulations 1922. In terms of implementation of this legislation, Arthur McIvor notes a turning point under the wartime coalition government: during the interwar depression, many workplaces had been able to avoid their health and safety obligations, but Ernest Bevin as Minister of Labour during the Second World War was proactive in enforcing regulation, with the result that the number of works doctors increased from 60 to around 1,000. In the second half of the twentieth century, legislative governance of workplace first aid was generalized: the First Aid (Standard of Training) Order 1960 detailed the level of training required for workplace first aiders; the Factories Act 1961 required that all factories provide at least one trained first aider for every fifty employees; in 1963, the Offices, Shops, and Railway Premises Act required that these workplaces have a trained first aider for every 150 persons. The Health and Safety at Work Act 1974 stepped away from detailed governmental regulation of hazards in the workplace, giving industries greater autonomy in how they exercised their health and safety responsibilities; this move increased the onus on voluntarist measures on the part of employers and employees. In this spirit, the Health and Safety (First-Aid) Regulations 1981 stipulated only that employers should make provision for first aid based on their own risk assessments and did not specify precise numbers of first aiders (though later government literature did come with suggestions about numbers). Despite this shift in regulatory philosophy, the number of certificates awarded by SJA reached its peacetime peak in the later 1970s, this against a backdrop of intensified competition from private training providers catering for the occupational first-aid market (see Figure 4).

32 The National Archives: Public Record Office, Kew (TNA: PRO), St John Ambulance Association Occupational First Aid Sub-Committee (SJAA OFASC), BK 2/1416, ‘A List of Statutory Enactments about First Aid in Factories’.
But the demand for first-aid training was broader than just the workplace. In 1967, the SJA annual report noted an ‘ever greater importance placed on first-aid knowledge in Educational establishments; national and local organizations including Scouts, Mountain Leadership groups, local referees, Boys Brigade, Sub-Aqua clubs, Duke of Edinburgh, motorists’. The growth in per-capita gross domestic product and in leisure time (in particular, an increase in paid holidays for many workers) between 1945 and the 1970s underpinned a more expansive leisure society and diversification of leisure and sporting pursuits; many of the activities which have grown in popularity since the Second World War included an element of danger, to which have been progressively applied the expectations of damage limitation through trained first-aid cover. Outward-bound leisure was still making increasing demands on SJAB services as trainers and first-aid providers in 1975: ‘now that sailing and all forms of water sports are so popular, first aid and rescue facilities on both inland and coastal waterways are of paramount importance … The number of Divisions already undertaking river and inshore rescue, as well as mountain and cliff operations, is steadily increasing’.

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expansion; the Health and Safety at Work Act 1974 required that professional and amateur sports clubs make provision for the safety of spectators, participants, and volunteers as well as employees. From the later 1960s, organizers of a new phenomenon in mass public entertainment, the summer rock festival, relied on VAS to provide some measure of medical cover: ‘almost invariably the organizers of such shows have failed to appreciate the depth of planning such large gatherings of people demand, with the result that the Members covering such large gatherings have been confronted with a task calling for last minute improvisation’.42

A somewhat less benign post-war demand for first-aid training resulted from the threat of nuclear attack. The Second World War had demonstrated the utility of volunteer civil defenders trained in first aid, operating under conditions of bombardment. As a response to the Cold War, the British Government recruited volunteers into a Civil Defence Corps. Instituted in 1948 and stood down in 1968, the Civil Defence Corps had as many as 500,000 volunteers on their books by the mid-1950s.43 Every member of the Civil Defence Corps was supposed to receive at least some first-aid training, though the amount varied across the different units that made up the Corps, from a basic course lasting no more than three hours for those in the Headquarters units, for example, to more extensive courses based on the training of the VAS for those in the Rescue and First Aid sections.44 So, despite a much-expanded state health service in Britain in the post-war period, there was a growing demand for first-aid services within both the warfare and the welfare state of the kind that SJA and the BRCS were experienced in providing.

To Adventure and Pioneer

In a 1947 memorandum, SJA faced the prospect of the state expanding into their spheres of activity with a combination of equanimity and determination:

The Brigade is more than ready to co-operate with the statutory authorities in any way possible although naturally preferring to operate and control its own personnel in doing so; but at the same time it is prepared to hand over any of its work to local authorities as soon as the latter are in a position to carry it out. The Brigade holds that, however efficient the State Social Services are, there will always be a place for individual, personal service, between neighbour and neighbour, and many opportunities for voluntary bodies to adventure and pioneer in new spheres of service to the public.  

Similarly, in 1947, the BRCS Secretary responded to the National Health Service Act (1946) by declaring that the charity was ‘always ready to give emergency and supplementary aid’, and that there would continue to be ‘scope for the voluntary worker even in a state planned and state-aided service’. However, there was no automatic reason why the job of providing first-aid training and cover should fall to the VAS. In France, for example, post-war first-aid cover and ambulance services were often provided by private individuals or organizations who charged the state, individuals, or insurance companies for their services; in later decades in Britain, private companies increasingly competed with the VAS for contracts to supply first-aid cover at events and to train workers in first aid. As the ‘new liberal’ political economics of Margaret Thatcher’s Conservative government opened up public services to private contractors (as well as the voluntary sector), SJA found that it had competition. In this context, the organization trumpeted as a significant achievement the 137,000 certificates awarded in 1985: ‘the SJAA is maintaining a strong position in providing courses for the public, even though we have over 500 competitors in the training business’. But the post-war VAS could not take for granted their central role in the field of first aid and made efforts to ensure continued relevance.

Key to these efforts, as is suggested above, was the readiness to respond to state agenda. In 1949–50, a War Office Working Party met to outline the role of the BRCS and SJA in the next war. SJA and the...
BRCS were both quick to respond to the risk of another war and to offer the first-aid expertise of their personnel in the service of the nascent Civil Defence Corps.\textsuperscript{51} It appears that much of the first-aid training given to the Civil Defence Corps volunteers was organized and run by SJA or BRCS volunteers and doctors and, as a minimum standard, trainers were required to hold certificates from these organizations.\textsuperscript{52} The VAS also cooperated with official requests to encourage their members to sign up for Civil Defence Corps and the National Hospital Service Reserve (an auxiliary body intended to supplement the NHS in case of war).\textsuperscript{53} The extent of this partnership meant that when the Civil Defence Corps were disbanded in 1968, it was the VAS upon which the government relied; should a war appear imminent, it was expected that these organizations would train the public quickly in emergency first-aid skills.\textsuperscript{54}

SJAA with their long industrial connections was also well placed to respond to increasing demand for trained first aiders in the workplace. The organization wrote first-aid manuals and tailored courses to fit the needs of industry. Courses were organized and delivered by volunteers and examined by doctors associated with the organization.\textsuperscript{55} Between the First Aid Standard of Training Order 1960 and the submission of evidence to the Robens Committee in 1971, SJAA examined and certificated 785,000 workplace first aiders.\textsuperscript{56} Though the VAS were not the only deliverer of workplace first-aid training—in 1969, many workplaces employed professional nurses who trained voluntary members of staff in first aid—it was the SJA and BRCS manuals that were followed in most courses.\textsuperscript{57} In 1972, only 6 per cent of industrial first-aid courses did not use the VAS’ combined manual, First Aid.\textsuperscript{58} By the early 1970s, SJA published a range of supplementary first-aid publications alongside their main manual, including a manual

\textsuperscript{51} MOSJ, St John Ambulance Association Annual Report, 1950.  
\textsuperscript{52} Wellcome Library, Civil Defence, PP/AWD/F/4, Box 31, County Medical Officers of Health Group of the Society of Medical Officers of Health and Association of County Medical Officers of Health of England and Wales, Minutes of meeting 9 May 1952; East Riding Archives and Local Studies, Beverley (ERALS), Bridlington Borough Council Correspondence File on Civil Defence Corps 1949–62, BOBR 2/15/4/1702, Civil Defence Training Memorandum No.1 (1957).  
\textsuperscript{54} TNA: PRO, Home Office Civil Defence files HO 322/733, Training Notes for Instructors: Organization of First Aid Services.  
\textsuperscript{55} Clifford, \textit{A Good Uniform}, 32–6.  
\textsuperscript{56} TNA: PRO, SJAA OFASC, BK2/1416, Evidence Given to Robens’ Committee by St John Ambulance, 1971.  
\textsuperscript{57} TNA: PRO, SJAA OFASC, BK2/1416, Society of Occupation Medicine Report on the Teaching of First Aid in Industry 1969.  
\textsuperscript{58} TNA: PRO, SJAA OFASC, BK2/1416, Dr J. D. Cameron ‘Training of First Aiders in Industry’.
specifically tailored to first aid in occupational settings—by 1970, their eighteen publications had sold 300,000 copies. 59

SJA strove to shape and lead the emerging field of occupational first aid. A VAS sub-committee on Occupational First Aid was established in 1969. 60 This committee met monthly from 1969 and was attended by executives from nationalized industries as well as senior medics from the Society of Occupational Medicine and the Royal College of Nursing and senior civil servants from H.M Inspectorate of Factories and the Health and Safety Executive. The Occupational First Aid sub-committee oversaw the production of a new Manual of Occupational First Aid, and, inspired by a Canadian SJA initiative, commissioned research that they hoped would show that training employees in first aid meant not only that they were equipped to assist victims of accidents but also that they were likely to behave in a more safety conscious manner. In 1971, SJA submitted evidence to the Robens Committee, advocating tightening first-aid requirements and the introduction of a common standard of accreditation of workplace first aiders, whilst also burnishing the organization’s own credentials as the primary first-aid trainer. 61

Whilst the SJA sought to retain a role as trainer, standard setter, and campaigner for wider dispersion of first-aid skills, the Brigade arm of the organization continued to provide first aid through its trained volunteer divisions. Workers in dangerous industries continued to join SJAB divisions situated in their workplace across the three post-war decades. Those who joined SJA and St Andrew divisions in the dock industry had their own first-aid magazine, with details of competitions, rescues, and techniques. 62 In some areas, there was expansion in Brigade divisions during the post-war decades; for example, the East Midlands Division of the National Coal Board agreed at a meeting in 1948 that ‘it would be a good thing to go forward and organize a scheme and work in line with the St John Ambulance Brigade Organisation’; the meeting was ‘in favour of attempting to form a Brigade at each colliery’. Over the ensuing decade, the Coal Board provided grants for the establishment of divisions, which could cover expenses such as uniforms, payment of lecturers, and examination fees, as well as expenses associated with annual camps. 63

60 TNA: PRO, SJAA OFASC, BK2/1416.
61 TNA: PRO, SJAA OFASC, BK2/1416.
63 TNA: PRO, National Coal Board East Midlands Division (NCBEMD), Correspondence and Papers, COAL 50/728, Area 6 Assistant General Manager, St John Ambulance Brigade (SJAB), County of Nottingham, Minutes of meetings 1948–59; TNA: PRO, NCBEMD, Correspondence and Papers, COAL 50/724, Area 6 Assistant General Manager, SJAB camps 1954–9.
In addition to workplace first aid, SJAB and BRCS volunteers continued to provide first-aid duties at public, sporting, and leisure events, including football matches, amateur sporting events, cycling races, fetes, rallies, concerts, rock festivals, theatre, and cinema. A historian of SJA, writing in the 1960s, commented that ‘the black and white uniforms are a familiar site wherever people congregate in large numbers’—indeed, she considered that such was their ubiquity, they were taken for granted by many members of the public, who presumed SJA to be part of the NHS. A member of a Hull SJA division during the 1960s remembered that the duties she attended included ‘football, children’s homes, New Theatre, Regal cinema, roller skating’. A member of the Durham BRCS remembered first-aid duties at Durham Miners’ Gala and the Great North Run during the 1980s. SJAB members took to the water to bring assistance to the growing number of leisure craft—at Filey in 1975, five out of the six lifeboat crew were SJA members. The voluntary nature of this cover meant that private organizers of events were spared costs; it also saved the state from expenses of providing trained care at public events. SJA even helped out in instances of public unrest: an annual report from 1977 claimed that the police had been thankful for the presence of SJA volunteers at disturbances at Lewisham and at Notting Hill Carnival.

So, for at least 30 years after the advent of the NHS, voluntary effort continued to make a significant contribution to healthcare. This was a period in which demand for first aid was growing, and the VAS were well positioned to address this demand. The voluntary sector, not the state or private sector, continued to set standards in first aid and took responsibility for training the public, particularly in workplaces and in civil defence. Volunteer ambulance units attended public gatherings of all kinds, bringing skilled assistance to those in need at no cost to the state and very little cost to private entrepreneurs who staged entertainment and sporting events.

Changing Membership

Despite the continued relevance of the services that the VAS provided, and overall membership levels that, in the case of SJA, did not dip below 1938 levels until the 1980s, VAS changed considerably from the 1930s to the 1980s. Most obviously, the class, gender, and age composition of their memberships shifted in line with wider social, cultural, and economic changes.
economic, and cultural changes: SJAB became less dominated by working-class men adult men, and the BRCS less dominated by upper- and middle-class women. These shifts reflected the VAS’ adaptability to emerging social arrangements.

During the first half of the twentieth century, SJAB divisions in industrial areas were part of the broader male-dominated working-class civil society of institutions and associations evoked by social historians such as Rob Colls, including trade unions, ‘nonconformist and Methodist chapels and Sunday Schools, the Cooperative Wholesale Society and Cooperative Union, and the national friendly societies, and after them, the allotment societies, the brass bands, voluntary bodies, sporting clubs, youth organizations’. As late as 1971, SJA pointed out in evidence given to the Robens Committee that: ‘industrial workers constitute the largest group of First Aid members in the organization’. But across much of the twentieth century, traditional industries (including coal mining, iron and steel production, and shipbuilding) were in decline. For example, mining and quarrying represented 8.8 per cent of male employment in 1921 but only 4.3 per cent in 1951; the UK coal mining industry shed 170,000 jobs between 1959 and 1963, and in County Durham alone, the proportion of occupied males working in coal mining dropped from 46.9 per cent in 1911 to 10.6 per cent in 1971. Though industrial production as a whole rallied after the Second World War, with British manufacturing enjoying an ‘Indian Summer’ in the 1950s, the number of people employed in manufacturing began to shrink from the 1960s and dropped off steeply during the 1980s. This industrial decline, particularly marked in traditional, dangerous industries where there had always been a strong SJA presence, may have been at least as important as the advent of the NHS in the shrinking of the adult male membership SJAB (see Figure 3). For example, as shipbuilding and coal mining industries contracted sharply

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70 TNA: PRO, SJAA OFASC, BK2/1416, Evidence Given to Robens’ Committee by St John Ambulance.


in the North East during the 1980s, many SJAB divisions closed or were amalgamated.\textsuperscript{75}

However, though the period after 1945 saw continual decline in the numbers of male volunteers in the SJA, the overall membership reached its highest point in the later 1950s. Whilst it declined thereafter, membership figures were still greater in the late 1970s than at any point previous to the Second World War (see Figure 2). This expansion was largely because of the growth of the Cadets—the youth branch of the SJAB, established in 1922 and consisting of boys and girls of age between 11 and 18. In 1937, there were 14,286 Cadets compared with 70,133 adult members of the SJAB in England, Wales, and Ireland; by 1957, there were more Cadets (72,019) than adult members (60,310) (see Figure 5).\textsuperscript{76} The rise of youth leisure movements (Scouts, Guides, Church Lads’ and Church Girls’ Brigade, Boys Brigade, etc.) was one of the success stories of associational voluntarism in the twentieth century. From roots in late-Victorian responses to the emerging category of ‘adolescence’, youth groups proliferated and grew.\textsuperscript{77} Although supply-side arguments are made about the provision of ‘rational-recreation’, the success of these groups also had a demand-side component; this may be linked, in part, to the mid-century trend observed by some social scientists and historians for families to place more emphasis on the happiness and fulfilment of their children, a trend assisted by improving material conditions and decreasing family sizes.\textsuperscript{78} Certainly, youth groups such as SJA Cadets met the appetite for activity to amuse and stimulate young people.\textsuperscript{79} The activities offered to SJA Cadets were similar in many respects to those they could expect in the Scouts and Guides, as the leader of the Beverley SJA Cadets in the 1950s and 1960s remembered: ‘You had to do twelve badges to get [the] Prior Badge; we did camping, map reading, signalling and all things scouts did.’\textsuperscript{80} An important attraction for many was the institution of annual camps for their cadets. According to one historian of SJA, although there were

\textsuperscript{75} Sheila Thorpe and Dorothy Rand, \textit{St John Ambulance Burnopfield 1907-2007: A Centenary Souvenir} (Burnopfield, 2007), 10; Rand, \textit{St John Ambulance Consett}, 35.

\textsuperscript{76} Cole-Mackintosh, \textit{A Century of Service}, 114.


\textsuperscript{79} Cole-Mackintosh, \textit{A Century of Service}, 111.

\textsuperscript{80} John Whittles (Pseudonym), Interview with the Author, 27 April 2010.
camps in the interwar period, ‘since the end of the Second World War a new spirit of adventure has been generated and camps have become more challenging’. In the 1950s, the National Coal Board allowed SJAB Divisions attached to its collieries to gather every year in the Derbyshire Miners’ Holiday Centre in Skegness. These camps were extremely popular, with arrangements having to be made for an additional camp in Rhyl in Spring 1954 because of the demand. In Spring 1955, 1,909 Ambulance men, 1,492 Ambulance Cadets (boys), 243 Nurses (women), and 952 Nursing Cadets (girls) attended the NCB East Midlands Division SJAB camps, a record number (4,596 in total).

Post-war changing gender roles also impacted on the membership profile of VAS. SJA, with its strength in industrial areas, traditionally had a strong male membership—many married working-class women had little time for leisure pursuits or voluntary work, as their time was fully taken with economic activity, caring for the family, or both. Across the three decades after 1945, however, declining family sizes, labour-saving domestic appliances, and changing cultural norms meant that a wider range of leisure activities became available to working-

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82 TNA: PRO, NCBEMD, Correspondence and Papers, COAL 50/724, Area 6 Assistant General Manager, SJAB Camps 1954–9.
class women—though this can be easily exaggerated.84 Certainly, the adult female membership of the Brigade declined more slowly than male in the post-war decades. In 1947, Brigade membership in England, Wales, and Northern Ireland stood at 48,978 men and 23,670 women; by 1967, membership in England and Wales (Northern Ireland was not reported) stood at 32,347 men and 18,036 women. Frustratingly, SJA reports after this date usually do not report membership numbers, but it seems likely that in the 1970s the proportion of female to male members continued to increase: in 1977, the Brigade’s Commissioner-in-Chief expressed concern over the decline in male membership, noting that over the past year, membership of the male Brigade ambulance units dropped by 465, whereas membership of the female nursing units increased by 363. In the cadet divisions, the feminization of the SJA was more marked. From a position of approximate parity between nursing (female) and ambulance (male) cadet numbers before the Second World War, nursing cadet numbers exceeded ambulance cadet numbers in 1942 and soared far above them thereafter (see Figure 4). This may in part have been due to the greater opportunities for a career in nursing with the expansion of employment in the NHS across the post-war decades.

The BRCS’ demographic shifts were rather different. The organization had a large number of middle-class female volunteers in its rank-and-file during the first half of the twentieth century, as well as upper-class women in leadership roles. After the Second World War, women from these classes increasingly moved into professional employment; Helen McCarthy notes that, from the early 1950s, ‘an increasing number of officers [in the WVS, Women’s Institutes and BRCS] were being elected from lowlier occupational groupings, with the wives or female relatives of farmers, market gardeners, minor public officials, small tradesmen, railwaymen and unskilled workers seizing the reins from the titled ladies of the shires’.85 Although the BRCS’s VAD membership was in decline from the late 1950s and 1960s, VAD membership remained over 40,000 until 1968. As with SJA, the organization still had more volunteers with first-aid training in the early 1970s than in the 1938.86

So, while we have highlighted significant continuities in the roles of the VAS, particularly SJA, these were organizations that were changing

with the times. Crucially, they were able to appeal to new groups, as social and economic change eroded their traditional constituencies.

The Voluntary Ethos

In this final section we utilize qualitative data from VAS publications, local history, and reminiscence literature alongside oral history interviews with ten people who volunteered between the 1950s and the 1980s (eight SJA members, one former BRCS member, and a member of the Civil Defence corps) to offer insights into organizational culture and the range of meanings individuals attributed to their volunteering activity.

It was once a staple of empirical social science and social history that post-war social and economic change, including affluence, the decline of ‘traditional working-class communities’, and the advance of the welfare state resulted in an increasingly individualistic culture in which people were more likely to turn their backs on public service and wider community in favour of home-centred, ‘privatised’ lifestyles.87 The persistence of volunteering in the UK across the later twentieth century and into the twenty-first century suggests some caution in accepting such narratives: statistics for volunteering as a whole show no clear decline in the later twentieth and early twenty-first centuries.88 Indeed, evidence presented in this section suggests that an older, paternalistic kind of voluntarism, as well as a voluntarism rooted in ‘traditional’-type working-class communities and kinship networks, continued into the 1960s, 1970s, and 1980s. However, the VAS evidence shows that volunteering was not simply a matter of persistence of older ‘socially oriented individualism’; the ‘new sort of individualism’ could also encourage membership of voluntary organizations.89

In the immediate post-war years, it is not surprising that the VAS themselves expressed doubt about the impact of the welfare state on society. The obvious comparison with the recent massive mobilization of volunteer effort during the Second World War led to anxiety about the individualistic direction of society. SJA publications often lament the growth of a selfish, something-for-nothing culture—explicitly connected to the new Welfare State—and position the organization as a guardian

89 Bedarida, *A Social History*, 252.
of the voluntary ethos, seen as a self-evident good. For example, a 1950 editorial in the *Review of the Order of St John* asked:

> Is voluntary service losing its appeal? There is undoubtedly cause to wonder whether in these days of the ‘Welfare State’ too many people, especially among the younger generation, prefer to be at the receiving end of the line. There are, of course, still great opportunities for voluntary service, and there is no limit to the work of St. John.\(^{90}\)

Of course, the VAS were always likely to view the extension of the Welfare State with suspicion, since their whole rationale for existence depended on the notion that the volunteer had a part to play in the delivery of welfare and emergency care. Furthermore, SJA and BRCS had origins in, and were ideologically wedded to, paternalistic liberal welfare regimes of the late nineteenth century. As a result, there were strong conservative overtones to the organizational structure and ritual life of the VAS. The Red Cross movement established auxiliary emergency services to the armed forces, and, as Roger Cooter noted, SJA was also imbued with characteristics derived from its late nineteenth century militarist origins:

> [St John Ambulance founder member John Furley] was never happier than when playing soldiers ... [it was] hardly surprising that the Association should have consisted (much like the Salvation Army, founded only a year later) of ‘corps’ ‘divisions’ and ‘brigades’ ... with power ascending up a hierarchic chain of command to a central authority.\(^{91}\)

This role as complementary service to the military continued into the post-war era; the SJA *Review* in 1950 claimed that ‘one of the objects of the Brigade is to provide Reserves for medical services of the Forces of the Crown’, and we have seen how both SJA and BRCS cooperated closely with the Civil Defence Corps.\(^{92}\) The VAS were also closely tied to other hierarchical conservative national institutions—the monarchy and the church. The Order of St John, parent organization of SJA, remains a Royal Order of Chivalry with an overtly Christian mission.\(^{93}\) Both VAS appointed members of the royal family as their patrons and presidents; since the beginning of her reign, the Queen has been Patron of the BRCS; those invested as Knights of the Order of St John were

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\(^{92}\) *Review of the Order of St John* 1950, vol. 23, No.2.

obliged to swear allegiance to ‘Her Majesty our Sovereign Head’ and to remember that the cross of St John represented ‘the purity of life required of Christ’s soldiers and servants’; thus ‘citizenship was associated with patriotism and loyalty’ as Paul Ward, following Frank Prochaska, has argued. In addition, the VAS’ higher echelons were studded with members of the upper classes during the period we are concerned with, reflecting and validating social hierarchy more broadly. For example, in 1955, the Hampshire SJA Commissioner was Colonel W.P.S. Curtis, O.B.E., D.L.; Countess Mountbatten of Burma was the county president of the SJA Brigade; The Duke of Wellington was the president of the SJA council; and Sir Maurice Hallett G.C.I.E., K.C.S.I. was the chairman of the St. John Council, in the same year, in the very different county setting of Durham, local leaders of SJA included Viscount Gort M.C. as Chairman of the Council; Lt-Col Sir Myers Wayman, K.B.E., F.S.S., J.P. as County Commissioner; Lady Wayman as County Superintendent; and Lady Starmer as County Vice-President.

We cannot simply deduce the beliefs and motivations of members themselves from the structure, ritual practices, and pronouncements of the organizations. But those who volunteered could not ignore the conservative tone of the VAS, and many appear positively to have embraced it. Interviews and written memories of VAS members are often imbued with a sense of respect for social hierarchy. A history of Gainsborough’s SJAB notes approvingly the pride of a retiring member of SJA in 1959 who had met Lady Mountbatten three times: ‘what a wonderful set of memories to have’. A publication compiling SJA members’ memories appears disproportionately weighted with stories about encounters with royalty (e.g. ‘To Tea with the Queen’, ‘A Day Out’, ‘The day I met the Queen’, ‘The Queen Mother’s Birthday’, ‘Trooping the Colour’, and ‘Our Trip to Buckingham Palace’). SJA support for the institutions of state was exemplified through participation in church and remembrance parades, as an interviewee who had been a Brigade member in Hull during the 1960s recalled:

We did a parade to the cenotaph on remembrance day, from outside the Guildhall to St. Marys or Holy Trinity . . . There was always sea cadets on these parades, army corps, RAF, cub scouts. More or less, uniformed organizations were expected to take part . . . I enjoyed the

parades ... they were part of showing the public what we were and what we stood for ... very much a sense of pride.\textsuperscript{99}

In an era of social and cultural change, the VAS preserved traditional, socially conservative values. As the state expanded its responsibility for welfare provision, the VAS represented continuity with a strand of ‘liberal’ thought that suggested the state should be only one among a number of service providers.\textsuperscript{100} Kevin Cummings, a professional loss adjuster who has given many years of service to the BRCS, evoked in his discussion of the BRCS in County Durham during the later 1970s and 1980s continuity in the liberal ideal of paternalism and social responsibility, with the able and privileged giving time to voluntary and charitable organizations.

I’m from the generation that was just used to having a voluntary role, to doing voluntary work. It was just part and parcel of what you put back in. I mean, all of my friends did something, or still do something ... The tradition in Durham was that the manager of Barclay’s Bank in Durham was always our treasurer. The service was provided at no cost ... You also had at branch president level, most were what we would now style leading people in county. Lord Barnard here [County Durham], in Northumberland we had the then Duchess of Northumberland, over in Cumbria there was Mrs Strickland. On council I sat next to a Lady from Devon – these were the types of people who were involved. This worked well because they had the connections to make these types of things happen . . . . It was a continuation of the end of the immediate post-war generation ... People were more likely to wish to be involved in a voluntary organization ... there weren’t the distractions there are now. There were still far more people around who, whether they had a cold or whatever, however they felt they knew that at 7 o’clock on Wednesday they got themselves there ... it was an unconscious thing ... you just had that commitment\textsuperscript{101}

But it is also likely that less deferential and more horizontal ideals of community service, rooted in traditions of working-class mutuality in industrial areas, informed and motivated some volunteers, particularly in SJA. As the preamble to the organization’s 1972 publication \textit{The Industrial First Aider} claimed, the first-aid movement in Britain had begun in industrial areas with ‘longstanding traditions of solidarity and self-sacrifice in times of accident and emergency’.\textsuperscript{102} As late as the 1960s

\textsuperscript{99} Margaret Simpson, Interview with the Author, 17 February 2017.
\textsuperscript{100} Lowe, \textit{Welfare State}, 12–13; Colin Rochester, Angela Ellis Paine, Steven Howlett, \textit{Volunteering and Society in the 21st Century} (Basingstoke, 2010), 69.
\textsuperscript{101} Cummings, Interview with Authors, 23 February 2017.
\textsuperscript{102} TNA:PRO, BK 2/1416, St John Ambulance, \textit{The Industrial First Aider—A Guide} (1972).
and 1970s, SJA could draw on the kinship networks and strong sense of place and duty within working-class neighbourhoods to supply members. For example, Mark Hoggard was born in 1955 in Dewsbury and grew up in an area still characterized by heavy industry, including mining. He joined the local SJA brigade cadets in the 1960s because his father, a lathe turner, was a member (in turn encouraged by his brother). Thirteen members of Mark’s family were in one unit, including himself, his father, his three brothers, wives, children, and an uncle, as well as friends:

We used to be able to go and do fairly decent sized units just as a family . . . I was always in the same division. That bond is less now – we don’t see as many family units as we used to . . . ’cause families move away now, it’s like a lot of things, because the culture is, your family in those days used to live fairly close by, but now your families move away.103

Though this kind of testimony suggests some continuity of earlier social and cultural patterns across the three post-war decades, the VAS evidence can also be read as supportive of those scholars who highlight important social and cultural shifts across the same period—including a decline in the kind of deference towards institutions, hierarchies, and social norms which had underpinned a certain strand of VAS appeal to volunteers.104 Volunteering in this period and indeed, in earlier periods, could be ‘less about groups and duty and more about personal identity . . . less about altruism and more about forming an exchange relationship’.105 It was a long-standing practice in some workplaces to pay a small bonus to staff who voluntarily acquired first-aid skills through joining SJAB.106 Indeed, one Hull SJA Corps officer, speculating on causes for the decline in Ambulance Brigade membership in the immediate aftermath of the Second World War, commented that if employers’ payments were withdrawn the membership of some divisions ‘would fall away rapidly’.107 Furthermore, we should not underestimate the appeal of VAS as simply something to do. They provided structured, sociable activity which appealed to many young people from homes with more limited means in the mid-century.108

Some interviewees pointed out that it was the opportunity to learn first aid that attracted them to SJA or BRCS above other youth groups they

103 Hoggard, Interview with Author, 13 June 2017.
105 Rochester et al., Volunteering, 129.
107 Private Collection, Minutes of Hull West St John Ambulance Division, Annual General Meeting, 10 February 1953.
108 East Riding of Yorkshire Museums Service (ERYMS), Interview with Arthur Douglas.
might have joined, again reflecting the idea that personal interest rather than any sense of duty could underpin volunteering. John Whittles left the Scouts for SJA Cadets as an adolescent in the late 1940s, and recalled that, though many of their activities were similar (St John Cadets earned badges for camping, map reading, and other activities), it was the medical aspect that particularly appealed: ‘I liked studying the human body. I liked the bandaging … I was always interested in medical things’.109 Similarly, Christine Healey joined a SJA cadet nursing division in Hastings in 1971, after becoming fascinated with first aid in the Girl Guides.110 Kevin Cumming’s childhood interest in first aid led to him joining Houghton Le Spring (County Durham) SJAB Division as an adolescent in 1969, and then to a long connection with the BRCS from the later 1970s. Regular, structured activity was also attractive to many adults. Declining fertility rates (and hence a decline in the proportion of the life-cycle spent child rearing) and shorter working weeks opened up free time for leisure for many in the post-war period.111 This was reflected in the kinds of appeal that groups might make for volunteers, which, as Matthew Grant has noted in relation to post-war Civil Defence Corps recruitment material, often placed an emphasis on leisure and sociability rather than duty.112 Indeed, one SJA member recalled that a division she joined in the 1970s was effectively ‘a social club’.113 Figure 4 shows the rise of girls’ (age: 11–18 years) involvement in SJA during the post-war period. It appears that the chance to acquire, and to exercise, first-aid expertise could be valuable to this group, since learning first aid as a member of a VAS could be a step towards a career in the NHS. Between 1938 and 1976, employment in health services grew by 142 per cent, and by the early 1970s, the NHS employed 300,000 nurses.114 The BRCS and SJA were asked to run pre-nursing training courses, paid for by Local Education Authorities in the early years of the NHS, to encourage young people into nursing.115

So, the conservative tone of the VAS in the post-war decades was fitting for their role as representatives of Britain’s liberal tradition of voluntary engagement in welfare provision. The political dimensions to

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109 Whittles (Pseudonym), Interview with Author, 27 April 2010.
110 Christine Healey (Pseudonym), Interview with author, 23 May 2017.
111 Bedarida, A Social History, 253–73.
113 Healey (Pseudonym), Interview with Author, 23 May 2017.
115 BRCSMA, Branch Circulars 1947, W. J. Philips, Secretary, to County Directors and Youth A.C.D.s, ‘Pre Nursing Courses’, 27 September 1948.
this are complex, however—as Sutcliffe-Braithwaite has pointed out, an antagonism to the Welfare State could be rooted in a strain of left-wing, working-class self-reliance as well as in more right-wing anti-statism.\textsuperscript{116} At the same time, many members had their personal reasons for volunteering—cadet groups offered some excitement and adventure for the young; for adults, the social pleasures of membership, the chance to acquire skills, and the occasional honorarium were important, perhaps reflecting a world in which personal choice and self-fulfilment were increasingly emphasized over duty and community as guides for social action. However, VAS members rarely narrated their involvement in such groups purely in instrumental terms. Most were keen also to accentuate the humanitarian dimension of joining a voluntary organization focused on providing first aid. The altruistic dimension gave voluntary activity meaning for participants, as Joe Greendale, who joined the SJA in the 1970s, recalled: ‘People used to ring up “can we have an ambulance tomorrow?” and we’d say, “well, we’ll try—can’t promise, but we’ll try”… we just enjoyed going out and helping people’.\textsuperscript{117}

### Conclusion

To some extent, the continuity of VAS in the post-war era reminds us of the unevenness of social change. Just because a new supposed social democratic consensus suggested that the welfare of the individual would now be entrusted to the state, this did not mean that older traditions of voluntaristic self-sacrifice to a greater communal and national good, an instinct and ideology that had recently come to the fore in the war effort, would simply disappear. Indeed, as James Hinton has pointed out, ‘the rapid expansion of statutory services during the 1960s and 1970s served, as in wartime, to stimulate rather than to displace auxiliary voluntary service’.\textsuperscript{118} At an ideological level, organizations like SJA spoke of a conservatism that was deeply ingrained. An ethos of duty, hierarchy, church, and state continued to underpin the VAS, and many of their membership shared such assumptions. But the VAS seem also to have offered opportunities for leisure, learning and self-development that had broad appeal in an age in which individuals appeared less bound by traditions of deference, service, and community mores. VAS were able to offer solutions to evolving needs and desires—we have highlighted here the increased

\textsuperscript{116} Sutcliffe-Braithwaite, \textit{Class, Politics}, 65.

\textsuperscript{117} Joe Greendale (Pseudonym), Interview with Author, 13 February 2017.

\textsuperscript{118} Hinton, \textit{Women, Social Leadership}, 236.
demand for first-aid training in the workplace, the need for first-aid cover in a more leisure-oriented society, and a huge growth in SJA Cadet membership across the mid-century. Nonetheless, the VAS’ training of individuals in the skills of first aid has an existential dimension that can be seen to transcend political and social considerations. As BRCS volunteer Kevin Cummings pointed out: ‘In a first aid situation, you don’t know when it’s going to happen ... can I do something or can I not?’