

other things, the most comprehensive and convincing explanation yet written of Maori willingness to sell land, as well as resistance to land selling.

All of these writings serve to explain why the ideal propounded by Governor Hobson at the foundation of the colony, 'We are now one people', has given ground to the concept of 'two peoples, one nation'. But that also is too simplistic. In a comprehensive chapter on 'The Social Pattern' Graeme Dunstall includes succinct pages on the racial question, showing that the concept of a united Maori nation is a myth, that ancient local and tribal orientations persist and are overlaid with complex new divisions which reflect the integration of many Maori with one or other of the facets of a complex modern commercial-industrial society. The current striving for recognition of the vitality and worth of the New Zealand Polynesian heritage is long overdue but racial separatism is clearly inappropriate and it is still the western liberal tradition, belatedly flowering and properly modifying the New Zealand tendency to create monolithic institutions, that will provide the best basis for racial tolerance and cultural pluralism.

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A History of Dentistry in New Zealand. By T.W.H. Brooking. New Zealand Dental Association, Dunedin, 1980. 286pp., illus. N.Z. price: \$20.

THIS HISTORY, commissioned by the New Zealand Dental Association, celebrates the rise of one of the country's most successful occupational groups. In less than a century New Zealand dentistry was transformed from a trade practised by almost anyone with 'strong wrists', to a fully university trained, specialized and self-disciplining profession. As a result *professionalization* proves a comfortable 'organizing theme' for both Brooking and his dentists. Ethical dentists were almost completely successful in raising the status and income of dentists as well as improving the standard of dental care.

Brooking divides this process into four periods. The first, a sub-professional stage, was marked by low levels of skill, a complete lack of state control, an absence of dental organizations and almost a single method of treatment, painful extraction. With the passing of the 1880 Dental Act and the introduction of registration, dentistry became semi-professional. Dentists gained new scientific skills and status through technological improvements such as the foot-powered drill, adjustable chair, and the use of anaesthetics. They also began to organize themselves, first locally, and then with the formation of the New Zealand Dental Association in 1905. As a result of these changes ethical dentists asserted their superiority over their artisan competition. The opening of the Dental School at Otago University in 1908 allowed the transition to full professional status, completed with the creation of the Dental Council in 1937. However, this third period was also a time of delayed development. Dental mechanics successfully countered the efforts of the Dental Association to use the B.D.S. as the bench-mark for entry. In 1910, 1911, 1922 and 1926 legislation passed on behalf of mechanics

allowed backdoor registration and limited the ability of the university to attract students. The Dental Council finally eliminated advertising and dental companies, and with them the remaining connotations of 'trade'. From 1950 dentistry entered its final post-professional phase. A high degree of specialization and the rapid expansion of the Dental School under the able leadership of John Walsh (1947-72) led to a greater emphasis on research, conservation and preventive care. Using statistical evidence Brooking goes on to show how dentists have become increasingly secure in status and income, more professional in family background and how they have remained until very recently all but exclusively male.

The threat of socialization to a private practice, fee-for-service occupation provides another major theme. Dentists justified and achieved legislative protection for skill and a Dental School, through suggesting a social-darwinist link between an individual's teeth and social survival. They were therefore vulnerable to the charge that high fees and the limited numbers of practitioners did not take dentistry to the masses. Poor teeth in first world war troops led to the introduction of the Dental Nurse Service. Initial hostility from many dentists was deflated by popular enthusiasm for the scheme. Fears that nurses would gain equality, as had the dental mechanics, proved groundless, largely because sex role stereotyping kept them in a subordinate position. Labour governments have proven more of a psychological threat than a socializing fury, leaving their mark in the adolescent scheme, and private practice intact. More recently the challenge had come from an attack on the ability of professions to serve public health and also from some disturbing findings from surveys of New Zealanders' dental health and dental attitudes. Research showing too many adults with dentures supported Ivan Illich's attack on professionalism in *Medical Nemesis*. These challenges have led dentists to re-evaluate their role in the community and search for new ways of making the developments of modern dentistry available to a wider range of social groups.

This book succeeds because of Brooking's ability to integrate the developments of a single profession with the broader patterns of New Zealand's social history. He regards professionalization as being fuelled, not just by economic or technological forces, but by the local climate of opinion and social attitudes. Social-darwinist assumptions, the egalitarian demands of the dental mechanics and dentists' desire for social respectability, are all given an important place in assessing the successes and failures of New Zealand dentistry. Even poor attitudes to dentures held by many New Zealanders are seen as related to the predominance of a British lower middle-class outlook in the society as a whole. The danger of speculation associated with such an approach is justified and Brooking regards the book as an 'introductory essay' rather than an 'authoritative work'.

If there is a criticism, it is simply that in focussing on 'ethical dentists' elements of conflict are downplayed. Professionalization was, after all, a process whereby the blacksmiths, the advertisers and the quacks were purged rather than elevated. Ethical dentists were much more successful than their competition in dominating the new institutions created between 1880 and 1920. They were also clear in their adoption of a professional model from an early period. Their achievement of their goals and their institutional dominance makes the path of professionalization appear far too inevitable. Even the association of qualitative improvement with professionalism is questionable. Ethical dentists' social control of the Dental School, the Dental Association and the Division of Dental Health of the Department of Health also placed them in control of the institutions of scientific and

technological innovation. Such a monopoly undermined the power of opponents to counter the increasing influence of the ethical dentists and closed off any other avenues of development for New Zealand dentistry. In spite of this, Brooking has produced an extremely worthwhile contribution to the country's social history, and one that will lead to further valuable research.

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Brown or White? a history of the Fiji Sugar Industry, 1873-1973. By Michael Moynagh. Pacific Research Monograph number 5. Australian National University, Canberra, 1981. xiii, 306pp., map. Aust. price: \$9.00 soft cover.

THE HISTORY of post-European contact Oceania is, first and foremost, an era of foreign domination. In the tiny states of the Pacific the essence of imperial rivalry, economic exploitation and colonial rule have been played out in all their complexity, manifestations and contradictions. Yet while the unfolding repercussions of colonialism can be seen with great clarity in the South Pacific, there is a paucity of detailed scholarly research on most island states on the relationship between their colonial past, current political-economy and how these have largely predetermined post-independence development strategies. To adequately investigate such issues for any one country is a substantial undertaking. Nonetheless, important insights can be achieved, perhaps more easily than anywhere else in the world, from studies of key actors or economic activities. Most Pacific islands are so small, their economic and political structures relatively uncomplicated and easily discernible, that the study of a strategic sector, or even of one company becomes, in effect, an examination of a country's productive and social foundations. And so it is with Michael Moynagh's *Brown or White?*

Since the end of the nineteenth century, sugar cultivation has indisputably been the most important economic activity in Fiji. It has also had the single most profound impact in shaping the post contact social and political organization of the country. The country's employment, trade, production, infrastructure and urban characteristics are largely legacies of the colonial sugar economy. Similarly the nation's ethnic composition, social tensions, electoral system and cultural mosaic are direct outcomes of the industry. It has been Moynagh's task to trace the evolution of Fiji's sugar industry from its beginnings in the 1870s. What is pivotal to this account is the fact that the industry was, for over ninety years, under the domination of one Australian company, the Colonial Sugar Refining Co. Ltd. That nearly eight chapters of *Brown or White?* are devoted to CSR's operations is an indication that CSR has been synonymous with Fiji sugar. CSR was the Fiji sugar industry. By implication, it was also the backbone of the Fiji economy and highly influential within the colony's political institutions.

Brown or White?, however, is far more than an empirical history, though it meets the requirements of excellence of such an endeavour. The book is exhaustive in its compilation of documentary and other data sources. In fact, Moynagh