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The limited number of trained medical personnel available in the Group remains one of the foremost problems in maintaining an adequate health service. Sufficient Cook Islands medical practitioners will not be available until 1955. Endeavours are being made to increase the number of trained Maori nurses, who, it is anticipated, will be available to serve as District Nurses in the outer islands. The European staff is in the main recruited from New Zealand. Training of Cook Islands nurses and Mosquito Inspectors is being conducted on the lines suggested by the South Pacific Health Service. Dental nurses are being trained locally for a period of three years and their course is designed to enable them to do preventative and operative dentistry. A Maori youth is being trained as a dispenser and another as a laboratory and x-ray technician at the Rarotongan Hospital.

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Most midwifery in the Cook Islands is performed by untrained midwives in the villages. All nurse trainees are receiving instruction in obstetrics, and it is hoped that they will eventually attend to the majority of the routine maternity work. Male dressers are being trained at the hospital at Rarotonga for one year. The training includes elementary nursing, dentistry, and mosquito control. These dressers are designed to assist in filling the gap until such time as there are sufficient Cook Islands medical practitioners, at which time they will then become Mosquito Inspectors. Administratively the responsibility for the medical service is vested in the Chief Medical Officer, who shares with his assistant direct control over public health and mosquito control. The European

medical officers also pay frequent and regular visits to the outer islands.

Public Health

During the year an Ordinance relating to the manufacture and sale of food was passed, and the Medical Department have carried out the necessary inspections of the premises concerned. Adequate steps have been taken for improvements where these were considered necessary. Routine inspections of shipping and aircraft entering the Group were made; 20 major vessels and 7 smaller vessels and 36 aircraft were inspected during the year.

During the year it was considered necessary to establish a quarantine station, due to epidemics of measles, paratyphoid in the Group, and infantile paralysis in New Zealand. For the whole year a ten-day period of surveillance on all people coming from New Zealand

was enforced.

The child-welfare scheme also continued its activity. In Rarotonga and Mangaia, European District Nurses are responsible for this work. Village committees, co-operating with the District Nurses, attend to all phases of maternity and child-welfare work. In the outer islands these duties are undertaken by the medical practitioners.

Medical Facilities

At Rarotonga there is a general hospital with a maximum of thirty-six beds. This hospital deals with all the general medical cases from Rarotonga and other cases transferred from the outer islands. It is equipped with an operating-theatre and x-ray facilities. The building is old, and during the year a new site was chosen, and plans for a modern hospital are in process of preparation. The sanatorium at Rarotonga is a new building and is well equipped. Sixteen beds are available, and steps are being taken to increase the bed space to thirty-six beds. Mangaia has a single room in use as a dispensary. A new hospital and cottage for the medical practitioner has been included in the 1949–50 estimates. Mauke has a one-room dispensary, but a new hospital and cottage is under construction. A hospital dispensary with accommodation for four patients is available and considered adequate for the needs at Atiu. Mitiaro has no medical facilities. A new hospital is planned for Aitutaki, where at present a one-room dispensary and Native-style hospital of three beds is used. At Manihiki there is a Native-style one-room dispensary, but a hospital and cottage for the medical practitioner are planned. At Rakahanga a dispensary is to be erected shortly. A combined hospital