

owing to their situation, are very liable to be polluted. For an annual cost of about £30 a simple drainage scheme could be laid down, and an excellent water-supply could be laid on to the town from a neighbouring stream.

SANITARY INSPECTION.

On the 14th November Mr. Kershaw was appointed Sanitary Inspector for the Hawke's Bay Health District under "The Public Health Act, 1900." A systematic inspection of the district was immediately begun, special attention being given to schools, hotels, boardinghouses, bake-houses, and premises which were directly concerned with providing accommodation or food for the public.

Hotels.—The sanitary condition of the hotels was found, on the whole, to be fairly satisfactory. As a rule, the cubic space in the bedrooms of hotels, and especially of boardinghouses, is deficient. It is true that as they are built of wood there is better natural ventilation than if they were built of brick, but this advantage is largely discounted by the fact that it is the exception to have a fireplace in the bedroom, so that one of the most important means of ventilation is generally absent.

The results revealed by this inspection were not of a very startling nature; no extraordinary degree of filth was discovered, but the general conclusion I have arrived at as the result of personal inspection and Inspector Kershaw's reports is that there is no efficient systematic sanitary inspection carried out by the local authorities. If anything grossly insanitary occurs it is probably remedied through the local inspector or pressure of public opinion. Although section 76 of the Public Health Act expressly states that the local authorities are empowered and directed to cause their district to be inspected and to abate nuisances, the desired results are not obtained. Water-spouts leak and cause dampness under houses, water lies in back yards, stables remain filthy, manure-heaps accumulate close to dwellinghouses, pigsties exist too close to houses, water-tanks are not emptied and cleaned, in towns the by-laws regulating the keeping of poultry are not enforced, &c. In fact, all the small details which go to make a healthy and a cleanly town are not paid sufficient attention to. In small towns the cause is not far to seek, and may, I think, be put down to human nature. It is not a pleasant job for a local inspector to go into his next-door neighbour's or some friend's back yard and find fault with him on these grounds. Even if the local inspector does his duty and reports the matter to the local authority, very often the report is ignored because of the personal relations existing between the person complained of and some members of the local body.

In the districts of all the County Councils, and of most Road Boards, there is not even the excuse of the frailty of human nature, as no attempt was made in these districts to abate nuisances on their own initiative. In these districts, and in the towns, the idea is prevalent that it is the duty of the officers of the Health Department to interfere, even in such small matters as an offensive manure-heap. Rome was not built in a day, and as yet the smaller local bodies and County Councils do not seem to realise that as much responsibility rests on them to insure the sanitary state of their districts as rests on the authorities of a large borough.

I have delayed bringing any pressure to bear until a reasonable plan could be proposed to improve and facilitate the carrying-out of inspection and disinfection after infectious disease. In response to my requests to certain local bodies that Inspectors should be appointed, it is only fair to mention that Wairoa County and Ormondville Town Board have appointed Inspectors, and that Hawke's Bay County made arrangements for their Surveyor and roadmen to inquire into nuisances when reported, and disinfect after infectious disease. I regarded these measures as only temporary, and the only thorough and efficient way to provide adequate and impartial inspection and reliable disinfection is for local authorities to combine together and appoint an inspector under one central authority, or under the Health Department, such inspectors to be paid by contributions in proportion to the population of each local authority. The advantages of such a scheme over the present system are many: (1.) If an adequate salary can be provided a trained and experienced inspector can be obtained. The popular idea is that any one can be an inspector of nuisances, but this idea is erroneous; and, besides, something more than a nuisance inspector is wanted—namely, a man who understands drainage-work, plumbing, and disinfection, from a theoretical as well as from a practical point of view. (2.) Such an inspector would be outside local influences. (3.) A scattered road district, with a few inhabitants, cannot possibly insure any efficient inspection, and occasional inspection is as necessary in country districts as constant inspection is in towns. Provision is made for some such arrangement in the definition of a "local authority" in the Public Health Act. Dr. Valintine has, I believe, already effected such a combination in the Wellington District, and it was from hearing of this combination that I have considered that such a scheme would be eminently suitable for certain portions of this district.

INFECTIOUS DISEASES.

The following is the summary of infectious diseases reported from 1st October, 1901, to 31st March, 1902:—

Napier.—Scarlet fever, 6; typhoid fever, 58; tuberculosis, 8; diphtheria, 1.

Hawke's Bay District, excluding Napier.—Scarlet fever, 35; typhoid fever, 22; tuberculosis, 22; diphtheria, 11; measles, 13; influenza, 3; blood-poisoning, 1.

Total for Health District.—Scarlet fever, 41; typhoid fever, 80; tuberculosis, 30; diphtheria, 12; measles, 13; influenza, 3; blood-poisoning, 1.

The most important feature in this summary is the number of cases of typhoid fever in Napier. As cases were frequently occurring after 31st March, I have considered that it would be more convenient to make a separate special report which would include all the cases, as judging from past history in Napier there are seldom any cases after the middle or end of May. It may be simply mentioned here that the source of infection could not be traced to either the water-supply