28. Is not that practically putting them in a class by themselves?—Yes, as far as I can judge, that is so.

29. And you approve of something on the same lines?—Yes, I approve of that.

30. Do you know anything of the working of the National Provident Fund?—No. I know the provisions of it. but I do not know the working of it. I know the general tenor of it, but have not come in contact with it among the people at all.

31. *Hon. the Chairman.*] Do you admit that there is any necessity now to provide medical attendance at a cheap rate for those people who do not go to the public hospital and for those who are not members of lodges?—That is, is there a big class requiring attention under those conditions?

32. Yes, do you think there is?—Personally I do not think so. It is those people who go as out-patients that require attention. You may take it that every one else is supplied.

33. *Hon. Mr. Fisher.*] You mean they are capable of looking after themselves: if they do not go to hospitals or go for charity you infer that they are able to look after themselves?—Yes, those are mainly the indigent ones, although they are not all indigent.

34. *Hon. the Chairman.*] Is there not a large number of the population who do not go to the hospitals or belong to lodges and go without medical treatment?—I think there are very few.

35. How do the poor people get medical treatment at the present time?—Of that class there is a great number in the lodges.

36. I am speaking of those who are not in lodges: how do they get that medical treatment at present?—Honestly I do not think there are any that are not provided for under those conditions. I think in New Zealand there are very few who require medical treatment who do not get it either by going to the hospital, by belonging to a lodge, or by calling in a doctor, hoping to pay and meaning to pay, but who are not going to say that because they have not the money they are not going to get the attention. I think there are very few who go without medical attention as far as is necessary for them.

37. Do you think there are facilities at present for them getting that medical attention in the earlier stages of their trouble, or do you think they only call in medical aid when the difficulty has increased?—Undoubtedly in the lodges, where the facility is very great, the danger is that it is abused by calling in unnecessarily. If there are any ills they are certain to be attended to early. A person not in a lodge might for the sake of saving expense put off calling in a doctor for a little longer, but not longer than the people who are quite able to afford it under the same circumstances.

38. From your experience regarding those cases can you say if it would be better to have medical attention earlier in the case of those who do not go to a hospital or belong to lodges?—We claim that the sooner a disease is treated the better. That obtains with the poor as well as the rich.

39. Do you think the State should take a part in assisting those people towards getting medical attention earlier than they might do otherwise?—Yes, I do.

40. It naturally follows that you agree with the action of the State in regard to inspecting school-children?—Yes.

41. The State takes its part in that connection?—Yes.

42. With regard to the 1s. per visit as the average pay to a medical man for visiting lodge members, that conveys very little to my mind. Can you tell us how much per member the lodges pay?—The remuneration is at the rate of 15s. per head per member per year. That includes the husband, wife, and all children up to 16 years of age, so that 15s. per head on an average of three to the family means that it covers practically three people. Each individual doctor is given a list of those who have chosen him as their doctor at the beginning of the quarter. The doctor may have, say, 100 members nominally on his list, and at the end of the year he would get the £75 cheque. If during the year he took a note of all the visits he had paid and all the people he had consulted for that £75, it would work out at about 1s. per visit or per attention.

43. Do you think many of the visits are necessary?—Yes and No. A great number are quite unnecessary, and a great number would never have been conceived of if the person had to pay the ordinary rate under the ordinary circumstances.

44. Do you think that if State aid was increased or any aid was increased in regard to sickness or procuring medical attendance that there would be a greater demand for medical attendance?—Undoubtedly.

45. In other words, there would be malingering?—Yes, malingering and imagination.

46. *Hon. Mr. Luke.*] Imagination—that is a lively quality?—Yes, a very lively quality.

47. *Hon. Mr. Beehan.*] There is not much malingering going on now?—There is more than you credit. The trouble is that a man out of work is obtaining more money than when in full work, and there is every inducement to malinger. He gets £1 a week from the lodge, half wages from his employer, and he may be in an accident-insurance company also, and under those conditions there is every inducement to malinger. From our point of view it is one of our greatest troubles.

48. *Hon. the Chairman.*] Has your association got any proposals to make as to what further steps the State should take in addition to those already taken in regard to the schools?—You mean in regard to treatment after having the medical inspection of school-children?

49. Yes?—One thing is that the inspection itself is not carried far enough and is not universal. Our impression is that it is only a tentative business to see to what extent it is necessary to carry it further. At present it will take some ten or twelve years to get through the schools alone—there are not enough inspectors. It is practically useless except to provide data for a bigger scheme later on.

50. Has your association ever considered any proposal as to how it should be extended later on?—No, not definitely. We presume that the inspection is not going to be sufficient, and