Of the value of Dr. Buck's work in the north it is impossible to speak too highly. His great influence with the Natives, as well as his professional skill, was a big factor in suppressing the outbreak there.

Typhoid, as usual, has found only too encouraging a nidus in the Native settlements. Eight separate outbreaks have to be recorded, as follows:—

Paeroa (Ohinemuri County)—January and February, spreading all through Thames Valley.
Whakatane (Whakatane County)—February.
Mataura Bay (Thames County)—March.
Ohaeawai (Bay of Islands County)—March.
Waahi (Raglan County)—March.
Matakana Island (Tauranga County)—June.
Whangaroa (Whangaroa County)—July.
Omania (Hokianga County)—November.

There were thus serious epidemics in progress in different districts practically continuously throughout the year. It was necessary to establish temporary hospitals at Paeroa, Ohaeawai, Whangaroa, and Omanaia.

The Paeroa and Thames Valley outbreak was the most serious, some 65 cases occurring during the first three months of the year. The outbreak at Whangaroa was also severe, 19 cases being under treatment in hospital.

I visited the Thames and Piako Native settlements during the epidemic, and addressed meetings of Natives upon the causes and methods of avoiding the disease. To the very primitive ideas on water-supply one can attribute much of the trouble. At one Native settlement visited the supply was obtained from shallow wells. At some time the Natives had been instructed to dig a shallow trench round the top of the well to prevent surface water entering. The purpose of this trench had been forgotten, and we found that it had been utilized as a convenient place for the disposal of all the household filth.

The reluctance of the Native to relinquish the old custom of holding prolonged tangis over their dead also is a grave source of anxiety to the sanitary officer and the nurses. Much disease is spread at these meetings held over the departed, and unless the scheme for notification of deaths among the Natives is enforced it will be difficult to check this danger. The tohunga also continues to do harm. In one case in which the tohunga proved to be a white woman a warning was issued. By her ignorance of the true nature of the disease, and the failure to take precautions, she had probably been the means of spreading infection.

Native Nursing Service.

Under Miss Bagley's able management this important branch of our work is beginning to assume the importance it deserves. The Natives are at first suspicious, but soon learn to rely on the nurses and to welcome them and assist them in their work. During the smallpox epidemic Miss Bagley and her staff were untiring, and their organization of temporary hospitals for this and during the various typhoid outbreaks, at short notice, showed what systematic training can accomplish. That these camp hospitals could be established in a few days and be run without a hitch and give results equal to permanent institutions reflects the greatest credit on Miss Bagley's power of organization.

In the Rotorua district Nurse Anderson's work was rewarded by a most satisfactory absence of typhoid even during the outbreaks at Thames and Tauranga. During the earlier part of the year Nurse Dawson was appointed to the Thames district, and soon had established herself as a favourite with the Maoris. Her work was exceptionally heavy owing to the widespread typhoid outbreak.

Nurse Mataira was occupied chiefly in the Bay of Plenty district, where she succeeded in getting the Natives to adopt modern methods in the Opotiki district.

For Whakatane a satisfactory scheme of co-operation between the Church of England Native Mission and the Department was formulated, and Nurse North was appointed to the work.

In the Bay of Islands district and at Paeroa arrangements for co-operation between the nurses engaged on mission work and the departmental nurses were made.

Nurse Taare was occupied chiefly in dealing with epidemics of typhoid and smallpox in various parts, and did excellent work all through.

Temporary appointments were made also for nursing during the epidemics of typhoid and smallpox. At Te Ahuahu camp Nurse Stephenson, who had done excellent service, had the misfortune to contract typhoid herself at the end of the outbreak; and, though very seriously ill, I am glad to say a good recovery was made. It illustrates the dangers which our nurses face cheerfully and without fear.

In the Bay of Islands Hospital District Nurse Hawken was appointed during the latter end of the year.

It is unfortunate that the Hospital Boards generally do not appreciate the importance of the Native nursing service in their districts. Save at Thames the scheme is regarded with indifference or active opposition, although the only contribution asked of these bodies is that they should assist in the matter of travelling-expenses.

The District Health Officer, Wellington, reports:—

Improvements with regard to the sanitary conditions in the various pas are gradually being effected, especially in the direction of enforcing the provision of more sanitary methods in connection with the privies. Many old insanitary whares have been condemned and new and more up-to-date habitations built. Muriwai Pa, in which last year many cases of enteric fever occurred,