have had up to the present time ten degenerate children, all of whom are a lifelong burden on the State. Taking the case of these children, and assessing the cost to the State of maintaining them, the total amount for this family will not be less than £16,000."

The Committee are of opinion that supervision of mentally defective children and adolescents is an important factor in lessening venereal disease, and urge the Government as soon as possible to adopt a system of registration and classification of mental defectives, and of segregation where necessary, either in mental hospitals or in special institutions where these defectives may be suitably taught, and, where possible, usefully employed to defray the cost of their maintenance.

## PART IV.—SUMMARY OF CONCLUSIONS AND RECOMMENDATIONS.

### SECTION 1.—CONCLUSIONS.

Following are some of the conclusions drawn from the evidence by the Committee:—

There is very general ignorance among the public on the subject of venereal disease, and this has stood in the way of its being grappled with effectively.

Syphilis not only causes loss of life directly, but many deaths ascribed to other causes in the Registrar-General's returns are due to the after-effects of this disease. It is responsible for many still-births and abortions, and its evil effects are seen in such children as survive. These effects may persist until the third generation.

Gonorrhœa, popularly, but quite erroneously, supposed to be a comparatively mild complaint, is regarded by medical men as being as serious a disease as syphilis. It is difficult to cure, especially in women, unless properly treated at the outset. It is a great cause of sterility in both sexes.

Owing to the absence of accurate statistics it is impossible to make comparisons between New Zealand and other countries as regards the prevalence of venereal disease, or to say whether it is increasing or decreasing in this country.

There are in New Zealand no fewer than 3,031 persons being treated by registered medical practitioners for venereal disease in some form, or for the effects thereof—1 person in every 428 of our population. At the clinics since their establishment 3,634 patients have been treated—3,038 males, 596 females.

An interesting calculation as to the prevalence of syphilis in New Zealand has been made by Dr. Hay, Inspector-General of Mental Hospitals. Working on what is known as Fournier's Index—*i.e.*, the relation of the number of cases of dementia paralytica existing at any one time to the number of concurrent syphilitic infectious—he computes the number of persons in New Zealand now who have or have had syphilis to be 33,000, or 1 to every 38 of the population.

The Committee desire to state, however, that in their opinion there can be no accurate estimate of the prevalence of venereal disease until some system of obtaining accurate statistics has been adopted. One point which has come out clearly in their investigations is that venereal disease is sufficiently prevalent to cause serious concern and to call for energetic action.

Evidence was given to the Committee to show that children with mental and physical defects due to venereal diseases may become a charge on the State; that a proportion of these on being released become parents of defective children, who in their turn have to be supported at the public expense. It was also shown that such defectives have little sexual control, and are usually very prolific.

According to the Commissioner of Police there are only 104 professional prostitutes in New Zealand. There is, however, a great deal of "amateur" prostitution, and this is chiefly responsible for the spread of venereal diseases.

The evidence points to a good deal of laxity of conduct among young people of all social conditions, especially in the large towns. This is generally attributed by the witnesses to the weakening of home influence and the restlessness of the age.

Apart from the venereal disease among those who indulge in promiscuous intercourse, there are many cases in which innocent wives are infected by their husbands, and other cases (not so frequent) of innocent husbands being infected by their wives.

Children suffer innocently from venereal disease, not only by inheritance from infected parents, but by accidently coming in contact with the germs on towels, &c., which have been used by a patient. There are also cases which come before the Courts where disease has been conveyed directly in crimes of violence by sexual perverts.

The free clinics in the chief centres are conducted by experts, and are doing good work. Their influence for good is greatly impaired, however, by the fact that a proportion of the male patients and the majority of the female patients leave off treatment before they are cured. As the law stands there is no power to compel them to continue treatment, and in many cases they resume promiscuous intercourse and spread the disease.

Evidence has been given of other cases, some of them of a very shocking character, in which persons suffering from venereal disease are not seeking medical treatment and are communicating the disease to others. As the law stands at present there is no power to restrain them from such conduct or to compel them to receive medical treatment.

### SECTION 2.—RECOMMENDATIONS.

The Committee stress in the strongest terms the duty of moral self-control.

They urge the cultivation of a healthier state of public opinion. The stigma at present attached to sufferers from venereal disease should be transferred to those who indulge in promiscuous sexual intercourse.

Parents have a great responsibility as regards the instruction and training of their children so as to safeguard them against the dangers resulting from ignorance of sexual laws. There is too little parental control generally in New Zealand. The Committee recommend the training of teachers, and provision for giving appropriate instruction in schools.