

SUPERANNUATION FOR NURSES.

The Act providing for the superannuation of nurses came into force on the 1st April, 1926. This benefit is greatly appreciated by the nurses, especially those at the beginning of their career.

Mrs. Grace Neill, Assistant Inspector of Hospitals and Deputy Registrar of Nurses from 1895 to 1906 died in November, 1926. Mrs. Neill's work in securing State registration for the nurses of New Zealand is well known. She was also closely connected with the establishment of the St. Helens Hospitals instituted by Mr. Seddon for the dual purpose of providing safe maternity facilities at reasonable cost for the wives of working men, and for training midwives. Further reference to Mrs. Neill will be found in the Director-General's report.

J. BICKNELL,
Director, Division of Nursing.

PART VI.—MAORI HYGIENE.

I have the honour to submit a brief annual report of the work of the Division of Maori Hygiene for the year ended the 31st March, 1927.

General Health.—The general health of the Maori people throughout the Dominion has, on the whole, been excellent. The supervision exercised by the district nurses to Maoris has been attended by splendid results. Their frequent visits to the various villages, and the instruction and teaching that forms such an important part of their duties, have had their effect on the attitude of the people towards medical treatment, and has been reflected in the general health. Unnecessary loss of life amongst children has been avoided, and infectious diseases, by being dealt with effectively in their early stages, have prevented the spread of epidemics that were such a deplorable feature of the past.

Epidemic Diseases.—There was no marked incidence of any of the usual epidemic diseases during the year. The most serious menace to Maori health is still typhoid fever, but, in spite of an occasional outbreak, its incidence amongst the Maori villages is steadily decreasing. The most serious outbreak occurred in Hawke's Bay. Every village in Hawke's Bay was visited by officers of the Department, and a comprehensive campaign of anti-typhoid inoculation was carried out. The Chairman and members of the Tamatea Maori Council were indefatigable in their efforts to assist the Department, and much time and expense was saved by their local knowledge and active co-operation. Much passive resistance was experienced from some of the followers of Ratana, but the more enlightened ones amongst them raised no objection when the position was explained. There was, however, a lack of that hearty assistance that should be extended to measures that are taken for safeguarding the health of their people. They formed a marked contrast to the spirit which animated that section of the community that supports the Maori Health Council. During epidemics, the attitude of relying on supernatural protection against typhoid fever is a distinct menace to health.

Inoculations.—Anti-typhoid inoculations continue to be carried out in districts where typhoid has occurred, as a routine method of protection. The result in the lowered incidence of this disease in districts where it was once endemic has more than justified this policy. Sporadic cases occur, but, except under exceptional circumstances in a new district, it is impossible for the cases to spread in a virulent epidemic. During the year two cases occurred in North Taranaki. An inoculation campaign was conducted, and met with hearty support from the chiefs of the tribes. In most districts there is always a certain number of objectors. Their numbers are usually increased by the followers of Ratana and certain interfering Europeans who have been influencing the Maoris against submitting to inoculation. It has become increasingly difficult to get a high percentage of protection in districts where objectors are in any number. In spite of the difficulties, I look upon anti-typhoid inoculation as having saved more lives than any other single factor in preventive administration.

Sanitation.—Though much may be left to be desired, the general sanitation of Maori villages has improved beyond measure. A health survey was recently made of the villages in the Arawa district, with special attention directed towards sanitation and water-supplies. The Arawa Trust Board is steadily installing pure water-supplies and adequate latrine accommodation in each settlement in its area. Meeting-houses have been built or renovated and renewed, whilst public kitchens in connection with them have nearly all been provided. The improvement in the settlements of Ohinemutu and Whakarewarewa has been very marked. With the further carrying-out of the recommendations of the Royal Commission regarding these villages they should become model villages that would add greatly to the credit of the Maori race. The setting-up of the Lake Taupo Trust Board, with an assured finance, should also lead to the improved condition of the villages around Lake Taupo.

For Maori gatherings of the present day the provision of adequate latrine accommodation, disposal of refuse, and the general sanitary conduct of the meeting is taken as a question of routine, and the heads of the settlements welcome the assistance and instruction of the Department's Inspectors of Health. The viewpoint of the Maori has completely changed from that of some years ago. Village Committees and Health Councils are anxious to assist in preventing trouble and sickness. A