the accuracy of the cause of death. There are large numbers of the Maoris who do seek medical aid, but there are, unfortunately, followers of various cults who will not avail themselves, although aware of the facilities offered by the Department for nursing service and free medical attention, if necessary, and it is regarding this element that my remarks are specially directed.

A system of registration of births and deaths is in force under the Registration of Births and Deaths, Act, and for the six years ending 1926 I submit particulars as follows :—

Year.	Births.		Deaths.	
	Number.	Rate per 1,000.	Number.	Rate per 1,000.
1921	1,056	18·7	842	14·5
1922	1,442	24·7	913	15·7
1923	1,181	19·8	762	12·8
1924	1,246	20·4	773	12·7
1925	1,716	27·5	818	13·1
1926	1,593	25·0	902	14·2

The increase in the births recorded in 1925 is probably due more to late registration than to any sudden accession to the annual number of births occurring.

General.

Population.—The Maori population, according to the latest figures available (April, 1927), totals 64,234, composed of 33,564 males and 30,670 females, of which 26,179 are children under the age of fifteen years. Although these figures show an increase of 11,483 over the figures of 1921, it does not follow that the Maori will continue to exist as a distinct full-blooded race. In the year 1891 there were 14·9 Europeans to 1 Maori. This has steadily increased until 1927, when the proportion was 21·4 Europeans to 1 Maori. This external dilution must be considered as an enormous factor in affecting the distinctive culture of the Maori, and with improved education and conditions generally lead to internal dilution of the race through increasing intermarriage.

Population under Fifteen Years of Age.—In 1891 the percentage of children under fifteen years of age to the total population was 34·1. In the year 1921 this had increased to 40 per cent., and, according to the latest figures available, in 1927 had risen to 40·76.

Proportion of Sexes.—In 1891 the number of females per 1,000 males was 832 ; in 1921 the figures reached 890, and in 1927 had increased to 914. These figures reveal that an excessive preponderance of males does not exist amongst the Native people, and therefore race-extinction based on these ideas need cause no apprehension.

Miscegenation.—The latest figures available in 1927 give the percentage of miscegenation at 15·4 to the total Maori population, as against 12·7 on the figures of 1916—an increase of 2·7 in eleven years. This, however, is not altogether a true criterion of the amount of miscegenation that is taking place, as all half-castes, according to the latest figures, were included as Maoris, whereas in the previous returns half-castes living as Maoris and fractions of European blood less than half were included ; nevertheless, it gives some indication of the amount of miscegenation that has taken place, and, although proceeding slowly, must ultimately lead to the absorption of the race.

Conclusion.

I wish to express my appreciation to the officers under my control, who have at all times assisted to further the work of the Division.

To the Directors of other Divisions, Medical Officers of Health, and their staffs, I am also indebted for the valuable assistance rendered in the co-ordination of their services with those of my Division.

E. P. Ellison,
Director, Division of Maori Hygiene.

PART VII.—MATERNAL WELFARE.

SECTION I.—REPORT OF THE CONSULTING OBSTETRICIAN, HENRY JELLETT, M.D. (Dubl.).

I have the honour to present my annual report as Consulting Obstetrician to the Department of Health.

The work done in obstetrics by the Department has very greatly increased during the past year. Amongst my duties the following are the most important :—

(1) The inspection of such maternity hospitals as are recognized for the training of midwives.
(2) The consideration with the Medical Faculty of Otago University of the training of medical students in midwifery.
(3) The recasting of the existing scheme for the training of midwives and maternity nurses.