## PUBLIC HEALTH.

With the exception of a small outbreak of enteric fever and a mild type of influenza, there has been no epidemic of any kind during the past year, and the health of the community has been excellent. In spite of these facts, however, the year under review has been a very disappointing one as far as natural increase of population is concerned, the actual number of registered births being just under half that of 1927. The figures indicate a very low death-rate as well, and taken in all it seems clear that the results shown are due to a failure to register. The matter will be dealt with at length under the heading "Vital Statistics."

It has not been possible to carry out any medical malagas, though most parts of both islands have been visited by Native medical practitioners during the past year. The Administrator made his malaga round each island, that in Upolu commencing on the 11th June and occupying ten days, including a visit to the Island of Manono. The Savai'i malaga commenced on the 9th July and occupied nine days. In both islands there was abundant evidence of lack of sanitary control, especially in the matter of drop latrines, very many of which were found to be greatly neglected and in bad ropair, and also in that of general tidiness of villages, about which pigs were roaming at will. There was, however, a very marked difference in the cleanliness and general tidiness of those villages controlled by loyal Natives, where it was evident that constant efforts were made to preserve order.

The general health of the Natives encountered on malaga was excellent, very few cases of sickness being met with, and most noticeable of all was the complete absence of bad cases of yaws. Free treatment for the Samoans has been continued throughout the year, with the one exception of operations not considered absolutely essential, in which case a receipt for taxes has been insisted upon before operating. It is a curious fact that quite a number of prominent members of the Mau movement paid their taxes under these conditions. Treatment for hookworm and yaws has been carried on throughout the year, most parts of both islands having been visited for that purpose. Owing to a further shortage of trained Native nurses, due to defections from various causes, it has been found necessary to close several out-stations staffed previously by them. A Native medical practitioner was sent to Falelima, on the south-west coast of Savai'i, early in December, and is already doing good work, as he is able to cover all of the western side of the island, which is otherwise very inaccessible. In January of this year (1929) the first Native medical practitioner to obtain the three-years certificate granted by the Medical School at Suva, Fiji, returned to the Apia Hospital. His services will be utilized shortly in Safotu, Savai'i, and later he will be given charge of the Tuasivi Hospital. It would appear that the Native students at Suva are well taught, and they should prove capable practitioners. The Chief Medical Officer paid a flying visit to Suva in September last, where he inspected the new school buildings and was much impressed by what he saw.

still four students studying at the school, two of whom should qualify in 1929.

There is a marked falling-off in the general attendance at the Apia Hospital as compared with the year 1927, though both the European and Samoan in-patients show a decided increase, which is also reflected in the Chinese department. In the case of the European wards the increase is undoubtedly due to the presence in Apia of the Royal Marines who remained behind after the departure of the warships in March, 1928, and also to the special Military Police who later on replaced them; whereas the added increment in the Samoan wards is largely accounted for by the increase in the number of major operations, and a decided rise in the number of women who were admitted for confinement.

The map accompanying this report shows the centres at which treatment for Natives can be obtained. It will be seen from the figures below that the population is unevenly distributed between the Islands of Upolu and Savai'i, Upolu carrying almost twice the number living in Savai'i, and that the Apia Hospital District area contains nearly two-thirds of the whole population of the Island of Upolu. In the account which follows the numbers refer to districts on the map.

Upolu: Area.	Population.	Districts included.
(a) Apia Hospital area	17,261	 1, 2, 3, 4, and western portion of 10.
(b) Aleipata Hospital area	5,254	
(c) Lefaga-Safata area	2,862	 9 and eastern portion of 10.
(d) Fagaloa Bay area		
Savai'i:—		
(e) Tuasivi Hospital area	6,112	 1, 2, 7а, 6в.
(f) Safotu Hospital area		
(g) Salailua–Asau area		 5а, 5в, 5с, 6а, 7в.

(a) Apia Hospital Area.—This district, which contains about 66 per cent. of the total population of Upolu, is the easiest district for working in Upolu, as there are quite fair motor roads—very good in parts—including twenty-two miles westwards to Mulifanua, and a few miles less to Falefa, on the east coast of the island. It contains the main hospital at Apia, where there are four European Medical Officers stationed, including the Chief Medical Officer. There are nine European nurses, one Native medical practitioner, five cadets in training, and eighteen Samoan nurses, of whom thirteen are trainees. In addition, there are four cadets qualifying at the Medical School in Suva. The Apia Hospital is well equipped, being electrically lighted and having an X-ray plant and separate European and Samoan maternity departments. The laboratory, which is under the charge of a trained bacteriologist, is the largest and best equipped in the South Pacific. "Silverlite" gas is used for heating purposes, and also for sterilizing in the operating-theatre. There were originally four outstations in this district, each with a trained Samoan nurse in charge, but owing to shortage of nursing staff it has been found necessary to close three of them, leaving only Mulifanua open at present.

(b) Aleipata Hospital Area has been under the charge of a Native medical practitioner for some months, who has an interpreter cadet and two trained Native nurses to assist him. He makes periodical malagas to his district for injecting for yaws and hookworm treatment.