

By permission of the Director-General of Health a most useful conference of Nurse Inspectors was held in Wellington in September, 1935. It was the first one ever held, and it proved extremely useful in assisting to draw up definite standards for their work throughout New Zealand. Quite apart from this aspect such a meeting together makes for a team spirit as nothing else can do.

Subjects chosen for discussion were—

- The requirements of a Private Hospital;
- Inspection of maternity nurses, midwives, and district nurses;
- Standardization of the district nurses' uniform;
- A general survey of the Nurse Inspectors' duties.

It is hoped to hold meetings of this kind from time to time.

DISTRICT NURSING.

The following table covers the statistical summary of the district nurses' work for this year as compared with the work of the nurses during the past year. The number of nurses has been increased by three owing to the Department taking over the control of the nurses under the Wairoa Hospital Board and the placing of a nurse at Whangaroa.

				1934.	1935.	
Total number of nurses	..	..	..	25	28	
		European.		Maori.	European.	Maori.
Total number of individuals treated	..	844		30,023	1,095	31,977
Total number of treatments given	..	1,369		41,733	1,633	44,107
Maternity cases—						
Confinements	..	..	..	255	18	215
During puerperium	..	..	..	483	20	525
Complicated maternity cases	..	..	..	49	..	45
Maternal deaths	..	..	..	5	..	5
Ante-natal and post-natal—						
Number of ante-natal cases	..	..	..	1,782	..	2,169
Number of post-natal cases	..	..	..	1,924	..	2,054
Infant welfare—						
Number of infants seen	..	..	..	5,404	..	7,472
Number of attendances	..	..	..	7,318	..	10,352
Number of visits paid to pas	..	..	..	5,445	..	6,165
Schools visited—						
With doctor	..	..	248	43	202	67
Without doctor	..	..	943	633	1,360	610

For the year 1935 the figures in the case of one nurse are for eight months only and in the case of two others for five and six months respectively.

The work is steadily growing, and the Department appreciates the difficulties under which much of this work is carried out. The year has had peculiar difficulties in that in many districts floods have been severe and several of the staff have been in the unpleasant position of having their homes flooded out and having to vacate the premises for a term.

The North Auckland District has given a great deal of time and thought to the development of health work by means of the Maori Women's Institutes. They have been helped in this phase of their work by gifts of demonstration material from several of the large institutes in the Auckland Province which has made possible an extension of subjects.

In February a most excellent exhibition of the work done during the year was held at Pukepoto in the Kaitiaki district. Every Maori Institute in the North Auckland district was represented, and the varied nature of the exhibits was very wonderful. Handwork of all kinds, including clothing, knitting, and box furniture; Maori arts and crafts; cooking—including bread, cakes, jams, preserved fruit, &c.—vegetables and plants for the garden, were exhibited. This very practical teaching must slowly and inevitably influence the lives of the Maori women to take a wider interest in their homes and the welfare of their children. Just as in the case of any European home the success or failure of the family lies largely in the hands of the mother, so it is in the case of the Maori.

There is no doubt as to the value of extending health work along these lines because it forms a valuable link to the home, but as the Institute work requires regular supervision it is very difficult for the district nurse to include this, as she must, with her routine curative and preventive duties which are after all her function.

A further difficulty is that in a very large number of districts the areas to be covered are so large and scattered that a great deal of time is spent in travelling.

How to balance and develop new work is one of the problems of the future, and it would appear that not only are more district nurses required but also a new type of worker (preferably a Maori) with special training in home science and infant welfare who can work in conjunction with the district nurse, but concentrate on the problem of housecrafts in the home.

This year the district nurses' uniform has been standardized, and in future these uniforms will be obtained from one firm on order from a Medical Officer of Health. A certain amount of difficulty was found at first in regard to fitting, but it is hoped that this has now been overcome.