

The machinery was thus set in motion for the formation of the National Federation of Health Camps. This marks an important era in the development of the movement in New Zealand, and it is felt that, with the establishment of the Central Councils, where members may exchange ideas of mutual assistance, fresh impetus is being given to the work.

The various associations are to be congratulated upon the outcome of the conference, the satisfactory conclusion of which was only possible by the efforts of all concerned.

Owing to the outbreak of poliomyelitis in Dunedin in December, it was reluctantly decided to cancel arrangements for the holding of health camps throughout the Dominion this summer. The Wellington Children's Health Camp Association, however, offered the facilities at the Otaki Health Camp to the authorities of orphanages in Wellington, and several groups of children from these Homes were given the chance of a holiday at the seaside. When the restrictions were lifted, the Community Sunshine Association opened their camp at Motuihi; also the Dunedin Health Camp Association ran a short camp of four weeks at Waikouaiti; and twenty children from Gisborne and the coast went into residence at Gisborne under the auspices of the Gisborne Health Camp Committee.

TUBERCULOSIS CONTACTS.

The supervision of tuberculosis contacts has been done wherever possible, and the following reports are of interest as evidence of the work done in some of the centres:—

Summary of Tuberculosis Contacts in the Wellington District for Year ending December, 1936.

Total number of children on list (seen at least annually)	..	..	533
Children—			
Reporting—			
Six-monthly	..	..	15
Three-monthly	..	..	5
One-monthly	..	..	2
Referred to—			
Nose and Throat Department	..	..	35
X-ray	..	..	46
Orthopædic specialist	..	..	5
Ultra violet therapy	..	..	3
Out-patient, for observation	..	..	1
Out-patient, eye specialist	..	..	1
Out-patient, diet; remedial exercises	..	..	2
Dental Department	..	..	9
Hospital for observation	..	..	5
Admitted to—			
Otaki	..	..	1
Pukeora	..	..	1
Recommended for health camp	..	..	15
Tubercule inoculation	..	..	4

In addition, 52 children are under observation by a specialist at Lower Hutt.

The position in Christchurch appears to be adequately met by the clinic attached to the Christchurch Hospital, of which Dr. McLagan reports as follows: "The tuberculosis clinic in Christchurch is extremely efficient. Dr. Macintyre is most interested and most approachable. It is his practice to keep in touch with the children of all his patients at present in the sanatorium, and of those parents who have been discharged or who are attending the dispensary. These children visit him periodically for examination. The T.B. Dispensary sends in long lists every year of children it recommends for admission to health camps, and there is also the 'Preventorium' or Fresh Air Home attached to the Cashmere Sanatorium, where Dr. Macintyre takes children of T.B. parents and gives them preventive treatment for a year or more. As far as I know, this is the only such preventorium in Australasia."

In Southland, Dr. Irwin reports that there are 485 contacts kept under review.

In Otago, Dr. Stevenson states that 334 tuberculosis contacts were kept under observation, 130 of whom resided in the Dunedin City area, and 204 in other Otago districts.

Dr. Heycock reports the establishment of a tuberculosis clinic at the Cook, Wairoa, Opotiki, and Whakatane Hospitals, together with the three-monthly visits of Dr. Hugh Short. In Gisborne there is close co-operation between officers of the Health Department and the Cook Hospital regarding these cases. The same remarks apply to the west coast of the North Island, where Dr. R. S. Francis, of the Otaki Sanatorium, has clinics in Palmerston North, Wanganui, Hawera, and New Plymouth.

OPEN-AIR SCHOOLS.

The open-air day school for delicate and undernourished children controlled by the Community Sunshine Association in Auckland still continues to do good work, and Dr. Stevenson reports that at the Dunedin Open-air School at Kew there is general improvement in the nutrition and well-being of the children attending.

MENTALLY BACKWARD CHILDREN.

School Medical Officers continue to work in co-operation with officers of the Mental Hospitals and Education Departments in the examination of various groups of backward children. One or two School Medical Officers, however, mentioned the problem of the mentally backward child, especially in the out-of-way areas. It is felt that while the special class in the cities to some extent meet the case of the high-grade feeble-minded child, the question as to the best method of assisting the backward child in the country district and the child with low-intelligence quotient which will not