

It will be noted that the Maori rates generally compare unfavourably with the European. The position is realized by the leaders of the Maori people, and the following account by Dr. Turbott of the formation of a rural Maori health unit at Tokaanu shows what can be done by the Maoris to help themselves :—

“ At Tokaanu, in the Taupo County, in 1937, a reasonably complete rural Maori health unit was put into effective practice with the co-operation of the Tuwharetoa Trust Board. At their annual meeting the Board followed the advice of Dr. Turbott, Medical Officer of Health, and budgeted about one-third of their income for health purposes as follows :—

“ Base hospital provision, £200. Securing free hospital treatment at Rotorua or Taumarunui Hospital for area members.

“ District nursing provision, £300. £150 towards existing nurse at Tokaanu ; £150 towards providing a second nurse at Taupo.

“ Dental clinic provision, £200. The capital required to further an application for establishment of a clinic in the area.

“ Urgent dental work (children), £100.

“ With this financial co-operation went the good will of the Board and its secretary. As a consequence the following results have accrued in this area :—

“ Hospital treatment provision is limited to those approved as necessary by the district nurse, who calls in the local Taupo medical practitioner for advice in difficulties in diagnosis.

“ Home treatment of sickness is supervised by the district nurse, with the doctor's assistance as required.

“ Infant-welfare is thoroughly provided for. Every baby in the area is under the district nurse's care, either on breast feeding or artificial feeding. Baby is weighed regularly and records kept and the artificially fed ones have the special additional supervision of the School Medical Officer who gives the district nurse regular advisory help.

“ School welfare has been given thorough attention through medical examinations and regular district nurse visits to schools. In addition, dried milk with cod-liver oil or artificial vitamin has been given school-children daily in an attempt to overcome home dietary deficiencies. Anti-typhoid inoculation of scholars was effected.

“ Dental work, urgent, in children was contracted for through the co-operation of a Napier dentist. The work was limited to extractions. The operations were performed at the respective schools under considerable working difficulties, 288 children had 698 extractions performed. The total fees charged were £83 10s., slightly under 2s. 6d. per extraction. Transport of the dentist between the schools was provided by the district nurse.

“ Ante-natal work was organized. All expectant mothers of the area come under the district nurse's care. The local man sees every mother once before delivery, and advises which cases may be left for home delivery and which hospitalized. The district nurse has a bi-monthly doctor's ante-natal clinic, thus minimizing travelling for the doctor. In between she attends to routine ante-natal care.

“ Sanitation work has been kept before the people, through co-operation of the local Health Inspector. Septic-tank installation was provided at the school. Water-supply proposals for Tokaanu are having investigation. Trust Board are pushing new housing for their people as fast as possible.

“ Health education work has been intensified by the nurse giving personal home instruction in the home itself. Having a limited district (population approximately 1,000 Maoris), the nurse is able to visit every home ; the need for formal lectures is reduced, therefore, though these have been supplied on several occasions by the School Medical Officer on infant welfare to gatherings of adults of both sexes. The district nurse gives formal lectures to school-children, and these are to be turned in 1938 to practical issues—the practice of baby welfare for bigger girls, cooking for invalids, baby sewing and clothes, &c.”

A scheme for the better treatment and control of Maori cases of pulmonary tuberculosis in the Waiapu County was initiated by Dr. Turbott, Medical Officer of Health. The objective of the scheme is to facilitate the partial segregation and, therefore, the convenient nursing and oversight of these cases and their education in hygienic precautions and at the same time to facilitate measures to improve the economic and industrial position of the bread-winners.

Approval was received for a supply of suitable hutments, and these are being constructed by the Public Works Department. The cases segregated in these hutments will be under the supervision of the Medical Officer of Health and his nurses. This step represents an advance toward combating the spreading of tuberculosis among the Maori people of this district. If this scheme is successful in the Waiapu County, then it will readily allow of adoption for other Maoris all over New Zealand.

GENERAL.

Milk-in-schools Scheme.—The Milk-in-schools Scheme came into active operation in March, 1937. It progressed to the point where one year after its inception milk was available to approximately 157,000 children, or 55 per cent. of the total school population of the Dominion. Contracts are now in train which should result in the milk being made available to an additional 18,000 children.

The scheme provides for the supply, free of cost, of high-grade pasteurized milk in half-pint bottles to children attending all schools—public, private, or denominational. Where pasteurized milk is not available two alternatives are offered—

- (1) Dried malted milk ; and
- (2) Milk for cocoa-making.