

Dr. Mulholland writes : “ Unless the periods for physical education result in better physical development, better posture, and development they are of little value. In general, the posture is poor. I do not think that one period of drill a day will do much for improving posture, but I do think that better results would be obtained if the exercise had some interest for the child.”

With the formation of the Council above mentioned, we can look ahead to a forward movement in this subject.

INFANTILE PARALYSIS.

The school period was interrupted last year by the epidemic of poliomyelitis which, starting in Dunedin in December, 1936, gradually spread throughout the Dominion with varying intensity. In Otago, where the disease was most virulent, from 1st December, 1936, to 30th November, 1937, some 192 cases occurred, 110 of which were between the ages of five and fifteen. In all, during the twelve months mentioned, 845 cases were notified throughout New Zealand, 452 being between the ages of five and fifteen. In addition, 16 cases were notified among the Maori population between these ages.

This necessitated the closing of schools in the different districts as cases were reported, and School Medical Officers are to be congratulated upon the fact that so much school-work was carried out in the time at their disposal.

HEALTH CAMPS.

The King George V Memorial Fund Appeal for health camps was an undoubted success. The public realized the value of health-camp treatment, and the appeal met with ready response. Provision for the disposal of the fund will be made when Parliament assembles, and in the meantime the Associations in the various districts are carrying out their usual programmes. Reports received all record the valuable work done by these Associations and the benefits gained by the children in the ordered regime of the camps.

The task of examining and arranging for the admission of children to health camps is no light one, and School Medical Officers and nurses perform an increasing volume of this work each year in an efficient manner.

MILK-IN-SCHOOLS SCHEME.

Development of the Milk-in-schools Scheme has taken place, and the half-pint ration is now available to some 157,000 children. School Medical Officers and teachers comment favourably on the increased vitality and alertness displayed by the children. The distribution of the ration throughout the class-rooms entails a certain amount of extra work on the part of the teachers, and they are to be commended on the satisfactory arrangements they are making in this connection. There are a small number of children who say they cannot take milk, but the percentage is not great, while on the other hand many children who have never drunk milk before now take it at school with marked benefit.

The following are extracts from some reports on the scheme :—

Dr. Platts Mills.—“ The supply of milk free to the schools was instituted in Palmerston North and in Wanganui during the year, and the results have undoubtedly been very good . . . Good results have been apparent in quite unexpected quarters. In one case a child who had suffered all his life from infantile eczema of a severe type was, after six months of extra milk, better than he had been in his life. This opinion was expressed very definitely by the boy, his teacher, and his parents.”

Dr. Boyd.—“ The beneficial effects of the milk ration in the schools are beyond question. Apart from confirmatory evidence of weights and heights, the increased alertness and vitality of the children is particularly noticeable in some of the schools in the poorer areas. In some other schools where the children have been more fortunate in domestic nourishment the improvement is not so plainly apparent.”

Dr. Deem.—“ The year has seen the introduction of the Milk-in-schools Scheme to the schools in the Hamilton Borough and to the Te Aroha School, and a Dried-milk Scheme has been introduced into four schools in the Taupo District.”

Dr. Moir.—“ The standardized ration of milk is supplied to the town schools of Nelson and for a short distance around. Nearly all the children take the milk, though the consumption varies at times and falls during the winter months, when some children refuse the cold milk.”

CONVENT SCHOOLS.

With an increase in staff it is hoped to include these schools in the annual medical inspection. It has been the practice in Hawke's Bay and Nelson districts to carry out medical inspection of convent schools. In Hawke's Bay, owing to a shorter working-year, this work was subject to some modification. Dr. Champtaloup, in reporting on the examination of convent schools, states : “ In Wellington during the year an assessment was made of the convent schools ; some were inspected, and it is noteworthy that this service was welcomed. Treatment of defects notified was in the majority of cases remarkably prompt.”