

case, and a further £3 3s. to the doctor for his attendance if required by the midwife during labour.

The more thickly populated areas of the district are therefore well provided with maternity facilities.

The chief complaints with regard to the provision for the Europeans in such places as Raglan (thirty-four miles), Te Uka, Te Mata, Te Akau, Ngaroma (twenty-five miles), are the lack of transport facilities and telephones. The transport facilities provided by the Board are four ambulances, one each at Hamilton and Rotorua, and subsidized St. John ambulances at Te Aroha and Cambridge, also private ambulances at Mokai and Pukemiro, the Board paying a total of £600 a year in costs and subsidies. Actually, for the most part, patients depend on their own cars or neighbours with cars for transport when in labour. There is, however, an undoubted difficulty for the country women in getting transport for ante-natal attention, and this difficulty is added to in some of the towns which they have to visit by the lack of rest-rooms or other places where they can remain between the time of their arrival and departure.

Summary and Recommendations.

(1) The Committee is of opinion that in the near future increased accommodation will have to be provided at the Campbell-Johnstone Ward.

(2) Taupo, situated sixty miles from Rotorua, and Tokaanu, sixty-three miles from Taumarunui, are particularly lacking in facilities for the European population, and undoubtedly the facilities available for the Natives are not as extensive as is desirable, though it is understood from the Medical Officer of Health that improvements will be made in this direction as soon as more district nurses to Natives are available.

The Committee recommends that a maternity hospital should be established at Taupo, as the distance to Rotorua and Hamilton for those who have to be confined is too far unless they can stay in town. The European population of this district is, however, under six hundred, and there are considerable doubts as to how the necessary facilities could best be provided. Whatever facilities were provided would undoubtedly centre on Rotorua.

The problem of providing better maternity facilities for the Maori population will be considered in a separate report.

THE MAORI PROBLEM.

There are 14,710 Maoris residing within the Waikato Hospital Board's district, an increase of 3,847 in the last decennial period.

They are, except in the Rotorua district, scattered over wide areas and are chiefly occupied in farming or as labourers.

The Maori population of each county is as follows :—

Waikato	..	..	1,004	Rotorua	..	..	2,801
Raglan	..	..	2,198	Otorohanga	..	..	1,198
Waipu	..	..	1,225	Kawhia	..	..	999
Piako	..	..	731	Waitomo	..	..	1,934
Matamata	..	..	1,084	Taupo	..	..	1,536

At the public hospitals and clinics attached thereto, and at some private hospitals, the same facilities are available to Europeans and Maoris alike. For the latter a special visiting nursing service is provided by seven district nurses to Natives in the employment of the Health Department, whose work is directed and supervised by the Medical Officer of Health for the South Auckland district, resident at Hamilton.

These nurses are located as follows : Two at Hamilton, and one each at Morrinsville, Te Kuiti, Kawhia, Rotorua, and Tokaanu.

All are provided with means of transport and constantly travel throughout their district, visiting the residents in their pas and in their homes.

Their duties are not limited to maternity services. As they are largely occupied in the education of the Maoris in hygiene and attending to minor ailments, the maternity services rendered are principally ante-natal and post-natal attendance and advice. Attendance during labour is limited to cases in which the Maori "midwife" finds herself or himself (the midwife is frequently a man and is usually a relative of the husband or wife) in difficulties.

The Maoris provide most limited facilities for bathing, and the housing conditions are in the majority of cases deplorable, the whares being usually earth-floored hovels, often without windows and almost completely lacking in furniture, water-supply, and sanitary conveniences. The consequence is that in these districts the nurses are working under conditions in which it is almost impossible to maintain asepsis.

Except at Rotorua, the majority of women are delivered in their own homes.

Rotorua is an exception to this rule. Due to the instructions given them by the district nurse and the Sister in charge of the Rotorua Hospital maternity ward—both of whom are exceedingly sympathetic and understand Native psychology—the Maoris have come to realize the benefit of hospital attendance, and the majority of them now are confined in the Rotorua maternity ward to their great benefit.