

and chloral are sedatives used at the discretion of the Superintendent, and all patients receive chloroform at the end of labour. A number of patients come from a distance, but means of transport do not seem to constitute a problem.

Private-hospital Facilities.—Private accommodation is to be found in two homes, one a converted medical and surgical hospital and the other a new building of six beds. The charge is £5 5s. per week. A small home of three beds serves the Kaiti suburb at charges of £3 3s. to £4 4s. per week.

Intermediate Facilities.—The Salvation Army Maternity Home affords private accommodation at a charge of £6 6s. for two weeks, £1 1s. extra being charged if no doctor is engaged. Though old, and in some respects inconvenient, the home is efficiently run, cheerful, and attractive.

Provision for Abnormal Cases.—The public hospital and its annexe provide adequate facilities for the treatment of abnormal cases.

Ante-natal Care.—Apart from private services, ante-natal care is given at the public hospital annexe, where a clinic is run by the Sister in charge. The Superintendent of the annexe attends the ante-natal clinic once a week, or oftener if necessary. Owing to its distance from town this clinic is not availed of as much as would be the case were it more centrally situated.

Provision for Unmarried Mothers.—Unmarried mothers are admitted to the hospital annexe on the same terms as married women, but special provisions are made for them at the Salvation Army Home. Girls are admitted to the latter institution some time before confinement, and adequate ante-natal care is given.

District Services.—There is only one district nurse in this area, and her work is entirely among Maoris. It was stated that, owing to the large Maori population, the services of more than one nurse would be appreciated.

Maori Conditions.—The total Maori population of the district is 2,718. There is an increasing tendency for Maori women to come in to hospital for confinement, and they are admitted without reserve to both the Cook Hospital annexe and the Tolaga Bay Hospital. Their usual stay in hospital is three to four days, and only rarely can they be persuaded to stay for more than a week. The younger women are beginning to appreciate the value of ante-natal care. A number of patients are still confined in their own homes in Native fashion. Housing conditions are excellent in some 30 per cent. of cases, but many of the poorer Maoris still live under deplorable hygienic conditions.

TOLAGA BAY.

The cottage hospital is controlled by the Cook Hospital Board and contains nine beds. Between forty and fifty cases per year are admitted, and the hospital also admits a few medical cases. The patients are mostly Maoris, European women for the most part preferring to go to Gisborne.

Maternity services in this area are on an extremely unsatisfactory footing owing to an unfortunate lack of co-operation between the one local doctor and the Hospital Board. An arrangement which previously existed to ensure medical attendance at the hospital was terminated in 1929, and it has not been found possible to renew it in any form. Though the doctor does not refuse to attend emergency cases when requested to do so by the Sister in charge, the majority of patients receive no medical attention whatever. The Sister sees patients ante-natally, and is in the habit of giving a small quantity of chloroform at the end of labour, a practice which, though prompted by kindness and sympathy, cannot be commended in view of the fact that the patients have not been medically examined. The staffing of the hospital is inadequate, as the Sister is the only trained person available. Provision for relieving her is not made, and she gets insufficient time for rest and recreation.

Summary and Recommendations.

In the opinion of the Committee public and private hospital facilities are adequate in the Town of Gisborne. In the outlying districts the facilities for an efficient hospital service to both Maori and white patients exist, but are prejudiced by certain problems of staffing, which require immediate attention. Ante-natal work among both the Maoris and Europeans would benefit greatly from an extension of the district nursing scheme.

20. WAIROA HOSPITAL BOARD DISTRICT.

This district, of which the limits coincide with those of the county of the same name, has the coast for its eastern boundary, including some sixty miles of the broad sweep of Hawke's Bay, the Mahia Peninsula, and a stretch of coast some ten miles north of the latter. The long northern boundary extends inland for a distance of eighty miles, running first north-west for a distance of twenty miles from the coast, and then due west. The southern boundary corresponds to the northern boundary of the Hawke's Bay district, and the western is formed by a line some twenty miles long adjoining the extremities of the northern and southern boundaries. The Town of Wairoa, with 2,524 inhabitants, the only centre of any size, showed an increase in population of 8.15 per cent. during the last intercensal period, and