is provision made for married women of limited means. The service has been considerably developed during the last few years largely on account of the inadequacy of St. Helens Hospital to deal with all such cases.

The fee is £5 10s. for the two weeks, but this is subject to adjustment.

The hospital is a closed one, and is conducted in much the same manner as St. Helens in that there is a part-time Medical Superintendent who exercises general supervision of the hospital and ante-natal clinic and attends all abnormal cases, while normal cases are attended by the midwife staff.

There is this difference, however, that at the present time the Essex Home is not a training-school, and is therefore staffed entirely by registered midwives and maternity nurses.

The hospital has its own ante-natal clinic. The unmarried mothers are accommodated in the home for some months before confinement and for varying periods afterwards.

Sedatives are not extensively used, and chloroform is given by the Murphy inhaler in "no-doctor" cases.

The buildings are old and in an unattractive environment, and, although excellent work is done there, the accommodation, as at St. Helens, falls considerably short of what is now considered satisfactory maternity provision.

The institution receives an income of about £500 per annum from the Twigger endowments.

Provision for Abnormal Cases.—On account of the absence of facilities elsewhere for dealing with them, a number of complicated and emergency midwifery cases have to be admitted to the Christchurch Public Hospital. No labour ward is provided, and, apart from the Sister in charge of the gynæcological ward in which these cases are nursed, there is frequently no trained maternity staff. The babies have to be accommodated in the children's ward. The conditions under which these abnormal cases have to be treated are therefore far from satisfactory. They constitute a risk to the patients and are a cause of great anxiety to the medical and nursing staff.

"Intermediate" Facilities.—It cannot be said that any modern "intermediate" facilities exist in Christchurch. The Grace Home, conducted by the Salvation Army, in addition to its service to unmarried mothers, does help to a certain extent by admitting at a moderate fee women who desire the services of a private doctor, but this side of the work in Christchurch has not been developed to the same extent as in Wellington.

The Committee understands that some consideration is being given to such an extension.

The home at present deals with about forty unmarried women per year and gives accommodation before and after confinement in such cases. The hospital fee is £6 6s. for the confinement and the lying-in period of two weeks.

Ante-natal supervision is given to the unmarried women by the nursing staff, and these cases are seen by the honorary medical officer at least once and are referred to him more frequently if necessary.

Sedatives are used only occasionally, and chloroform is given by the Murphy inhaler method in "no-doctor" cases.

That there is a definite need for intermediate provision in Christchurch is quite clear; the absence of it is unquestionably the reason why so many small, poorly-equipped maternity homes have persisted in this city, while in some other centres they have been superseded. There are about twenty one-bed maternity homes in Christchurch.

Private Hospitals.—Christchurch has one private maternity hospital of sixteen beds and several smaller hospitals taking from two to eight patients.

In all, eighty-three beds are available in these private hospitals.

The general opinion, with which the Committee agrees, is that this accommodation is not sufficient and that, speaking generally, there is a big need for more modern private hospital facilities.

Ante-natal Care.—Through various channels a very complete ante-natal service is available in Christchurch. St. Helens Hospital and the Essex Home both provide ante-natal care for their patients. The Plunket Society has a large clinic which gives excellent assistance to those patients and those doctors who desire its co-operation.

A considerable number of doctors, especially those who are developing midwifery as a specialty, prefer to take the full personal responsibility of the ante-natal supervision of their private patients.

A certain number of patients with limited means in the outlying suburbs find the cost of making frequent visits to the clinic a burden. The Committee is of the opinion that a system of branch clinics might be of assistance.

District Service.—The St. Helens domiciliary service is still the largest in the Dominion, but even here the number of cases attended in the district has fallen from 156 in 1931 to 77 in 1936. It is quite probable that this relatively large number is due to the inadequacy of the in-patient accommodation.

Any other domiciliary service is of very small proportions.

Provision for Unmarried Mothers.—With two maternity homes—the Essex Home and the Grace Home—taking unmarried women and caring for them both before and after