

RESEARCH.

The Committee has drawn attention to the possibilities of research into the special obstetric problems of the Dominion and has recommended the establishment of an obstetric research committee whose work would be correlated with that of the recently appointed Medical Research Committee.

THE MAORI PROBLEM.

The Committee had the opportunity of discussing the special problems of Maori maternity attendance with those most closely associated with this work in the various parts of the Dominion. A very prevalent idea that confinement amongst Native women is safe and easy is not borne out by the facts; on the contrary, the risks of maternity amongst the Maori women at the present time are twice as great as amongst white women, and the incidence of sepsis is particularly high.

The various factors involved have been considered, and the Committee is of the opinion that the unsatisfactory position of the Maoris is due partly to an inability on the part of the Native attendants to deal with urgent complications, such as hæmorrhage, but mainly to unhygienic living conditions and a departure from the simpler but more wholesome diet of the past leading to dental, throat, skin, and general infections which are a menace to safe maternity. The Committee considers that much good could be done by an augmented staff of district nurses to Natives giving ante-natal supervision to the Maori women in their homes (in co-operation with the hospital clinics).

Through the same agency general hygienic instruction could be given to all those living in the Native settlements.

The urgent need for improving the housing conditions in many of these settlements is fully recognized by those in touch with Maori life; the Committee can only emphasize it.

The Committee does not believe that the position can be met by an attempt to introduce European methods of confinement attendance into the Maori homes, but strongly recommends the provision of hospital accommodation for Maori women in the public maternity hospitals in all districts where Maoris are resident.

The Committee does not favour special Maori hospitals, but agrees that the establishment of separate wards is desirable.

SOCIAL ASPECTS.

Several difficulties of a social nature which added to the burden of maternity were brought very prominently before the Committee. The chief of these was undoubtedly *the lack of domestic assistance*—a problem of town and country alike. This matter has been fully discussed in the report of the Abortion Committee, and the remarks and suggestions therein made are fully endorsed. The Committee can only emphasize the seriousness of the position and commend all efforts to make domestic service more congenial, and all organized efforts, such as those of the Women's Division of the Farmers' Union, the Women's National Reserve, and the residential and day nurseries to assist those in greatest need.

Difficulties of transport to and from clinic and hospital were found to constitute a hardship in a number of the more isolated country districts. To assist the position the Committee has recommended the establishment of small maternity hospitals in some districts which are not at present provided with such facilities, the greater use of district nurses to assist the doctors and clinics by giving ante-natal supervision in the homes of country mothers, and, in some cases, the provision of suitable waiting accommodation near the maternity hospitals to obviate the necessity for difficult last-minute journeys.

Some complaints of *inadequate telephone facilities* were made. The Committee found that, on the whole, the telephone service was very complete. In a few instances public telephones are needed to bring the residents within reasonable distance of this channel of communication, and the difficulties occasioned by the night and holiday closing of certain rural exchanges might be met by better arrangements for emergency calls.

The Committee investigated *the facilities available for the care of unmarried mothers*, and considers that very satisfactory provision is made throughout the Dominion. The work is mainly in the hands of the Salvation Army and certain other charitable organizations whose institutions, in addition to caring for these women at confinement, provide accommodation for a period before and after. There can be no doubt that in the majority of cases arrangements of this type are highly desirable. A hospital for married women has also been developed in connection with a number of these homes, and a very high standard of maternity attention is shared by married and unmarried mothers alike. A commendable feature is that in the majority of these hospitals the same measures of pain-relief are also used.