

1903.

NEW ZEALAND

DEPARTMENT OF PUBLIC HEALTH

(REPORT OF THE), BY THE CHIEF HEALTH OFFICER.

Presented to both Houses of the General Assembly by Command of His Excellency.

The Hon. the MINISTER OF PUBLIC HEALTH to His Excellency the GOVERNOR.
 MY LORD,— Public Health Office, Wellington, 1st October, 1903.

I have the honour to submit to Your Excellency the report of the Public Health Department for the year 1902-3.

I have, &c.,

J. G. WARD,

Minister of Public Health.

His Excellency the Governor of New Zealand.

The CHIEF HEALTH OFFICER to the Hon. the MINISTER OF PUBLIC HEALTH.

SIR,— Department of Public Health, Wellington, 1st October, 1903.

There is an old Indian proverb which says "We must come to June by way of March." Nothing is more true than this with respect to matters affecting public health. It is not difficult to lay down a standard of absolute good, but there are factors in the equation which practically prohibit such a standard being insisted upon.

First and foremost is the question of ways and means. Every expenditure making for healthful surroundings and the combating of preventible disease must like all others be carefully examined from what may be termed the economic aspect. The moral obligation which modern civilisation has cast upon a community to care for and support its weaker members is quite distinct from the duty which attaches to those in authority to conserve the general standard of health and physical fitness of a people. Whether it is wise to prolong by every aid which modern science affords the life of the absolutely and irrevocably unfit is a matter which pertains more to the domain of the moralist than the sanitarian. "Spare no expense, doctor," is one of the most common adjurations which a medical attendant receives in the course of his ministration to the sick; but the danger over, or the patient dead, he not infrequently finds it difficult to reawaken the wife or the husband to this apparently liberal frame of mind. As with individuals so with municipalities, in their times of safety they are apt to forget, nay, sometimes repudiate, obligations into which they readily entered when danger was imminent. Money expended upon sanitary works, hospitals, &c., may fairly be regarded in much the same light as insurance premiums, and, just as it is possible to conceive that the premium charged the individual may be so high as to economically entitle him to refuse to enter into the contract, so a municipality or a nation may decide to take the risk rather than pay the premiums required to insure their freedom from preventable diseases. There are, of course, many sanitary works which cannot be regarded in this light, because the very existence of the community depends upon the measures being taken. It matters not how rich a country may be in natural resources, such as coal or iron, for instance, if its people degenerate or die through the use of an impure water-supply or a faulty drainage system; but a local authority may rightly (from an economic point of view) decide not to erect, say, an

INFECTIOUS DISEASES HOSPITAL,

if it could be shown that it would cost more to establish and maintain such an institution than it would to treat such diseases outside.

Now, it is well known that at least 70 per cent. of the householders in this colony are unable through want of room to properly isolate a case of infectious disease; thus, even if it could be shown to be cheaper to treat the patient in his own home than in a hospital, it would in most instances be impossible. This is so apparently obvious that you would doubtless wonder why I trouble to state it but for your knowledge of the opposition which