I had hoped that this year would have seen us able to answer in the affirmative the petition to you by the "cured" women patients. If the lot of the man suffering from consumption is hard, truly the path of the woman is often awful in its hopelessness. I speak of those who are poor, and have few friends. A housemaid or a dressmaker, perhaps dependent entirely upon her earnings, falls sick. Grant that she has been able to get early admission to a sanatorium, and that she recovers, where can she go to earn a livelihood? It has only to be mentioned that she has come from a sanatorium and her way is barred to her former occupation. Some one, either the central authority or the several Hospital Boards, should provide a farm where such poor souls could work. If a place and shelters were provided by the Government, the various Boards would, I am sure, contribute. The Nelson Board has already affirmed its willingness to do so. Until suitable work is provided—such as beekeeping, poultry-raising, early flower-growing, &c.—for the "cured" woman, much of the good done in the sanatoria and annexes will be wasted.

New Zealand has done much to check the enemy, but she or her wealthy philanthropists must do more. The Secretary of every Hospital Board could supply arguments in favour of what I am urging which would wring the hearts of any who listened. As I have pointed out in previous reports, it pays a country, even when accounts are reckoned in the language of the ledger and the stock exchange, to look after its sick. It is difficult, however, to persuade the man in the street that when one part of a machine saves generally, its savings should be shown clearly as credits in the machine accounts. The clear duty of the sanitarian is to keep on urging the reforms which scientific argument and the experience of other countries show to be good. He may fail if he does indicate the better way, but most assuredly he will have failed absolutely and irrevocably if he hesitate to do what he considers his duty. We have a chance in a small country like this to effectually stamp out consumption if we continue our efforts, but the campaign, like all others worthy of engagement, entails self-sacrifice.

I would like to take this my last official opportunity of recording my high appreciation of the great work which Dr. Roberts, Miss Rochefort, and the staff have carried out at Te Waikato.

MELBOURNE CONFERENCE.

I have had the honour of representing the Government at many important scientific Conferences, but without doubt the one held in Melbourne in October of last year was the greatest. The high honour done in appointing me President of the Public Health Section was a tribute to the value of the pioneer work which has been done in New Zealand. A detailed account of the work done will be found in the Transactions of the Conference published by the Victorian Government. If the resolutions passed affecting public health be ever carried out great good will result. I append a copy of my presidential address.

DISTRICT REPORTS.

These have not all come to hand as I write, but in them you will find the full details of the special works which have been carried out by the various officers.

VITAL STATISTICS.

I regret to say that the valuable data supplied by the Registrar-General is usually not available till late in the year. In consequence of my appointment to the staff of the High Commissioner in London, I will be unable to deal with and analyse them.

I wish to express my thanks to all the officers for the good work done during the last year.

I have, &c.,

J. M. Mason, M.D., F.C.S., D.P.H.Camb., Chief Health Officer for New Zealand.

The Hon. Minister of Public Health, Wellington.