

schools, besides giving lectures to them on hygienic matters. If the Tasmanian idea was carried out, and we had lady doctors to do this work, it would prove of great benefit not only to the children, but to the race as a whole. Though I feel diffident in suggesting that the school-teacher should take the chest-measurements of all his scholars, because of his multitudinous duties, yet I think the exercises which he gives would be more profitable if this were done. He could then find out the weaklings, and so keep a special eye on them during exercise, and make them develop those points which are specially weak.

On the whole, we have found the children fairly free from neurotic and eye diseases. The general complaints were those of *hakihaki*—a disease where soap and water would be the principal remedy required. Some pakehas have an idea that “Maori itch” is peculiar to the Maori, and consequently we hear a great deal of nonsense from certain quarters, especially where the pakeha and Maori children attend the same school. In several schools I examined I found that the pakeha children were equally suffering from scabies, or “Maori itch” as it is called; and in one school I found the Maori children were free while several of the pakeha children had it.

NURSING.

Ever since we have existed as a Department we have urged the extreme necessity of training our girls in the hospitals, and sending them back to their people. Our scheme of having Maori district nurses in the charge of a pakeha nurse has not yet been tried. The good that would result from such a scheme has been pointed out too often for me to reiterate. The Churches have started to do this in several districts, and practical Christianity is what will appeal to any man in pain. It has succeeded beyond all expectations.

THE STAFF.

Ever since we have had the Maori Sanitary Inspectors added to our staff a great deal of good work has resulted. I cannot speak too highly concerning the services of these men. They have accomplished in a few short years what I thought would take at least a quarter of a century. There is no doubt the personal element has had a lot to do with their success, for they are all chiefs by birth. During the last two years we have had two meetings of the entire staff. Lectures and practical demonstrations were given on sanitary and public-health matters. These short courses of training have added greatly to the efficiency of the staff, and have proved of inestimable value to the race.

We regret greatly the loss of Dr. Buck's services, and I have to place on record the appreciation which we feel for the very valuable assistance he gave us during his three years' engagement.

The forty-six subsidised medical men have also done very good work. No one but a medical man can appreciate the difficulties which these men have to contend against in treating Maori patients; but no doubt as time goes on the Maoris will learn the lessons of a sick-bedside, and so lessen the disadvantages of a medical practitioner for the Maoris.

I append statistics* of diseases among the Maoris during the last seven years.

Dr. J. M. Mason, Chief Health Officer, Wellington.

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MAUI POMARE, M.D., &c.

* A summary of these statistics is given on page 36 of the general report.