

Their cooking is done under a separate roof, and the principal diet is vegetarian, which is well cooked, but their meat is merely superficially charred.

The domestic animal of the islands is the pig, many of which were found in every village, but are now being confined behind pig-fences. They are fed, but they also root in the garbage. Dogs are very numerous in most districts; practically every *fale* has at least one dog, and frequently more. These dogs roam through the villages in a semi-wild state for the most part, and sometimes become savage, but so far we have had no evidence of there being any rabies amongst them.

The Natives of Samoa are accustomed to make long journeys and visits from home, and consequently to spread round all sorts of infectious diseases.

PART II.—PUBLIC HEALTH ACTIVITY.

1. *History of Public Health in Samoa.*

Up to 1920 there was no definite department devoted to public-health activities apart from the clinical activities of the regular Medical Department. At the end of 1920, as a result of a preliminary survey, it was decided to form a Division of Public Hygiene in addition to the Division of Clinical Medicine. In February, 1921, a Medical Officer of Health was appointed, and sent to Queensland to study the Rockefeller Foundation methods of hookworm control. Till 1923 the attention of the Medical Officer of Health was devoted to the sanitation of Apia, the studying of Native conditions and customs, and the preparation of necessary public-health legislation. In 1923 the offices of Chief Medical Officer and the Medical Officer of Health were combined in the appointment of Dr. T. Russell Ritchie, the present incumbent.

In 1921 the Samoan Health Ordinance, based on the New Zealand Health Act, 1920, but modified to suit local conditions, was passed by the Legislative Council.

2. *Public Health Organizations.*

The Department of Health of Western Samoa is headed by the Chief Medical Officer, who is also the Medical Officer of Health. He has a staff of six qualified medical practitioners, two Health Inspectors, one of whom is a registered plumber with qualifications in sanitary science, a Matron and eight other qualified European nurses, nine Samoan nurses trained and graduated from the Apia Hospital, eighteen Samoan nurses in training, one European dispenser, with one Native assistant, and eleven medical assistants and medical cadets in training. Apia is situated in the most populous part of the Territory. There is a hospital in Apia which is modern and which will accommodate fourteen Europeans, sixty Chinese, and one hundred Samoans. This is staffed by four Medical Officers, the Matron and eight European nurses, and the nurses and cadets in training. Two of the Medical Officers take care of the hospital, one attends to the outside calls of Apia and district (there are no private practitioners in Samoa), and the fourth one spends most of his time visiting out-districts. The Matron and one nurse, at least, must be qualified maternity nurses. At the eastern end of Upolu, in the Aleipata district, and in the Faasaleleaga district of Savai'i, there are district hospitals, each under the control of a European Medical Officer, who is assisted by a Native medical assistant and two trained Samoan nurses. At four populous centres there are four trained Samoan nurses, who centre at mission stations and act as dispensers, and at one such centre there is a Native medical assistant who acts as dispenser. At one centre there is an unqualified European dispenser, who from years of training is competent to deal with minor ailments. Four other mission stations are provided with free drugs. As trained nurses become available they will be allotted to these stations.

3. *Appropriations for Public Health.*

The amount appropriated each year is £25,000. In addition there is about £3,000 debited against the Department of Health each year for travelling-expenses of officers of the Department and for interest and sinking fund on capital expenditure incurred by the Department. The £25,000 is made up in the following way: The New Zealand Government subsidy to the Department of £14,000; an average of from £3,000 to £4,000 revenue from Europeans and Chinese labourers; and £8,000 a year contributed by the Natives. This £8,000 is a voluntary tax of £1 per adult male, first imposed on the Natives at their own suggestion in return for free medical attention by the Administration.

4. *Municipal Sanitation.*

There is at present no municipality. The sanitation of Apia is governed by the regulations passed by the Administration during the past two years concerning buildings, drainage, privies, mosquito-control, and rubbish and garbage disposal. These are all of a modern and comprehensive nature, and are fully enforced, with the exception of mosquito-control, which is at present the subject of experiment in one selected area.

5. *Enforcement of Health Laws.*

Health laws are enforced by the Department of Health. No laws have been passed by Western Samoa till the Administration felt that it was in a position to strictly enforce them.

6. *Transmissible Diseases.*

There is a list of thirty-three transmissible diseases which are notifiable: Anthrax, cerebro-spinal fever, cholera, dengue, diphtheria, erysipelas, enteric fever (typhoid and paratyphoid), leprosy, plague, puerperal fever, smallpox, typhus, scarlet fever, yellow fever, chicken-pox, encephalitis lethargica, influenza, measles, German measles, mumps, ophthalmia neonatorum, acute primary pneumonia, acute