

Some districts have been particularly successful in this type of work, the principal problem being demonstration material. Maori funds are very limited, and it has often meant the district nurses buying material and equipment themselves, which is not fair. An appeal has been made to the Provincial Federations of the Women's Institutes for help in this matter.

Young married Maori women make excellent students, they are conscious of the need in their own homes, and at this stage appreciate help more than at an earlier age in their lives when what they are being taught is not being put into immediate practice.

An endeavour has also been made to introduce lessons in infant welfare to the older girls in the primary and secondary schools. A pamphlet printed in English and Maori has been published this year, and provides an excellent text from which these lessons can be taught. In some instances the lessons are given by the senior women school-teacher, and the class is examined by the district nurse; in other instances the classes are taught and examined by the district nurses.

In future the infant death-rate is to be compiled in health districts, and, if possible, in individual nurses' areas, with the object of seeing whether staffing affects the position.

The regulations governing the registration of Maori deaths has been altered, and in future it is required that all registrations of births and deaths must take place within fourteen days in the North Island, and within three days in a borough, and seven days not in a borough in the South Island. Further, district nurses are required to notify a death and give a possible cause. It is hoped by the tightening of these regulations to acquire more accurate information.

The record of the work carried out throughout the year has been very encouraging. Increased facilities for transport have made it possible for each nurse to be more effective.

Total number of nurses	..	..	..	..	25	
					European.	Maori.
Total number of individuals treated	..	..	..	..	884	30,023
Total number of treatments given	..	..	..	..	1,369	41,733
Maternity cases—						
Confinements	..	..	..	..	..	255
During puerperium	..	..	..	..	..	483
Complicated maternity cases	..	..	..	..	..	49
Maternal deaths	..	..	..	..	..	5
Ante-natal and post-natal—						
Number of ante-natal cases	..	..	..	..	..	1,782
Number of post-natal cases	..	..	..	..	..	1,924
Infant welfare—						
Number of infants seen	..	..	..	..	..	5,404
Number of attendances	..	..	..	..	..	7,318
Number of pas visited	..	..	..	..	..	5,445
Schools visited—					European.	Maori.
With doctor	..	..	..	..	248	43
Without doctor	..	..	..	..	943	633

*Post-graduate Course.*—The 1934 class comprised seventeen nurses—ten taking hospital administration and teaching of nurses, and seven taking public-health nursing. Unfortunately, during the second term Miss Moore, who is in charge of the course, became seriously ill. She was relieved by Miss Lea and myself. It is very necessary to have some assistance for the teaching of this course, and this year it has been arranged that Miss Comrie, one of the Nurse Inspectors, should give some part-time assistance.

An analysis of the course provides an excellent record. Since 1928 some eighty nurses have taken this course. Of this number—15 are matrons, 4 are assistant matrons, 12 are tutor sisters, 20 are ward sisters, and 17 are in the Public Health Service. Several have married, and a few, owing to home circumstances, have relinquished active professional work.

In practically every instance these nurses take an active and leading part in the affairs of their profession, and it is very gratifying to those who struggled so hard to establish this course to see the excellent work that is being done.

*Unemployment.*—Unemployment amongst nurses as it was known two years ago in New Zealand is practically over. It is true that there is the problem of the older women, whom it is not easy to absorb, and there are always some nurses who, on account perhaps of temperament, find it difficult to find their niche.

The scheme adopted in Wellington to provide a visiting nursing service to the homes of relief workers has proved of invaluable assistance both to the patients and to the nursing profession, and is to be highly commended to other centres. The patients are attended on a visiting basis, the nurses being expected to do light housework (for heavy work help is given) and are paid on the same basis as the unemployed teachers, free transport being granted.

*For the Future.*—There are still several aspects of hospital work where New Zealand lags behind the older countries. We have reached a stage in our development when attention must be given, and if the nursing profession is not prepared with the necessary qualifications it will be found that others have specialized.

*The Dietitian.*—For several years our hospitals have been reluctant to employ dietitians who are university graduates and who are not registered nurses largely because these women have not had the long experience the ward sister has in handling and controlling people.