HEALTH EDUCATION.

Since co-operation with parents is essential, every opportunity is given for them to attend the medical examination of school-children. It is satisfactory to note that a considerable number avail themselves of this. Last year the number of parents personally interviewed by School Medical Officers approximated twelve thousand. School nurses paid last year over fifteen thousand visits to homes. This closer association between parents and health officials is mutually helpful and assists in inculcating in the minds of the public a knowledge of the principles of good nurture.

It is satisfactory to note that the syllabus issued last year by the Education Department lays stress on the need for health instruction in the schools, and places particular emphasis on the necessity for the school environment and regime to exemplify to the utmost possible the laws of hygiene. Health education, therefore, occupies a firmer position in the school syllabus. Many teachers show considerable energy and enthusiasm in this direction. The regular cleanliness survey for younger pupils, frequent health talks, the establishment of an organized lunch, and the insistence upon cleanliness (to which beauty and order may be added) in the school surroundings are some of the means by which improvement is gained.

HEALTH EXHIBITS.

During the year health exhibits were established under the auspices of the Department at the agricultural shows held at Hamilton, Palmerston, and Wellington. In the School Medical Section special emphasis was placed upon nutrition (sample diets being exhibited), posture, and clothing (including footwear). Considerable interest was shown by the visiting public, the school nurse in charge being fully engaged in demonstrating various features of the exhibit. Pamphlets giving simple advice on various health topics were widely distributed.

NUTRITION.

To say in these days that good nutrition is fundamental to healthy development, whether individual or racial, is to utter a platitude. Nevertheless, as is indicated above, it is recognition of this fact which is responsible for many of our activities.

The number of children suffering from subnormal nutrition is approximately 7 per cent. It is this group that requires special attention.

Health Camps.—The annual health camp at Turakina took place again this year, there being in attendance at camp 111 children for a period of five weeks. The success of the camp was, as always, beyond dispute. Special appreciation is due to Mr. Lethbridge, on whose estate the camp is held, his generosity being the chief factor in making the establishment of the camp possible and in ensuring its success each year.

The health camp was again held at Levin for mentally backward children attending the special classes in Wellington City. For this group the educational value of such camps is great, giving opportunity, as they do, for practical instruction in health habits and behaviour generally. Those in charge of the camp state that at the end of a month of camp life there is evident to a greater degree not only good health, but that capacity for social co-ordination which is so often lacking in children of this type.

Nutrition Classes.—In a few centres children suffering from malnutrition are given a special curriculum, involving more rest and greater supervision of the diet, including a special milk ration at school. Among these are the health class at the Auckland Normal School, the "milk" classes in Wanganui, and the open-air school at Kew, Dunedin.

POSTURE.

Considerable attention has been paid this year to the question of posture. It is recognized that a large group of children do not conform to the standard of correct posture as described by certain authorities—e.g., see U.S.A. Department of Labour, Children's Bureau, publications. We do not feel certain that we are able to give correctly the answer to the question, "What is the correct standing-posture for New Zealand children at various ages?"

With the object of obtaining more exact information on the subject, a survey was carried out last year by Dr. Helen Bakewell, School Medical Officer, Wellington, and Miss Blackburne, Physical Instructress under the Education Department. The result of this will be found in the Appendix to this report.

Two findings demand attention because of their practical importance: (1) The young New Zealand child of school age is apparently of a loose-limbed elastic type which responds readily to environmental influences, particularly such influences as habitual posture, exercise, and rest; (2) the high incidence of postural defect in the 7–8-year-old group.

It must be remembered that at this age period, which is one of rapid growth, instability of posture may tend naturally to be increased; but we must consider also whether the great percentage of postural defect found in the 7–8-year-old group is not a result of a school curriculum which makes too great a demand upon the sensitive and immature body of the entrant child.