

School nurses have also given assistance in demonstrating health exhibits displayed at various shows throughout the North Island during the year. These include Wanganui, Palmerston North, Hamilton, Wellington, Masterton; and form a practical method of health education.

In Taranaki the system of co-operation with the Red Cross Society continues to be successful. Dr. Mecredy states:—

“The year was notable by its being the first completed in co-operation with the Red Cross Society’s nurses. As a result of the success of this scheme, it was possible to recommend its continuance for another year on the same terms.

“The two Red Cross nurses were able to do very valuable work in visiting country schools, by removing children for treatment to hospitals, re-examining children with defects, the organization of Junior Red Cross Circles, by lecturing on various aspects of hygiene, the supervision of infectious skin-diseases, and advising mothers as to simple treatments required by their children. This very extensive field was only covered with the help of the cars which the society supplies to its officers.

“Practically every school in the two districts allotted to the Red Cross nurses was revisited by them at least once in addition to their visit in company with the School Medical Officer. As a result of the work, there is undoubtedly a great interest in matters of hygiene and public health growing up in the country districts concerned. Lectures to parents in several districts on first aid and home nursing drew large and well-attended classes of mothers. There is no doubt that this is a most valuable achievement, and the close contact established between these Red Cross nurses and the parents concerned enlisted the co-operation of the latter in getting their children treated where necessary. I have to thank both Sisters Ingles and Corkill for their enthusiastic acceptance of this experiment, and for their co-operation in carrying it out successfully.”

In Taranaki Miss Wise, Nurse Inspector, also exercises supervision over a group of schools, and has done excellent work in her talks to the children, re-examinations, and in the investigations of outbreaks of skin-disease, &c., where a personal visit by the School Medical Officer was not possible.

#### NATIVE SCHOOLS.

The number of Native schools examined increases annually. In the East Cape district especially, where Dr. Turbott has acted as Medical Officer of Health and School Medical Officer for the past two years, this work has been greatly extended, twenty-eight Native schools being examined in the last year. In this area the district nurses act as school nurses, preparing the school beforehand and following up after the medical inspection. In addition, these nurses make monthly independent visits to Native schools, inspecting for and treating verminous conditions, common skin-diseases, &c. The home conditions of the pupils nullify much effort on their behalf. The scheme of utilizing the services of district nurses has proved especially satisfactory in that more intensive work has been possible in this scattered health district. This result is readily realized from the following: Number of notified defects followed up, 96.1 per cent.; number treated (Native schools), 74 per cent.

It is with regard to preventive tuberculosis work that special difficulty is met. Maori tuberculosis is to a great extent not under medical supervision, and hence is not notified. The community life at the pa, with its attendant evils of overcrowding and poor ventilation of living-quarters, makes impracticable any attempt at segregation of sufferers from tuberculosis. Dr. Turbott has continued his interesting study, “Maori and Pakeha” (see last year’s report); further details of which will be found in the appendix of this report.

#### THE PRE-SCHOOL CHILD.

The School Medical Service now undertakes the medical examination of children attending the free kindergartens throughout the Dominion. This means that a considerable body of pre-school children is given consideration. The percentage of defects found does not differ greatly from that of children entering the primary schools, the balance being somewhat in favour of the kindergarten children.

In St. Andrew’s Kindergarten, Christchurch, a departure was made from the usual procedure by instituting sun-bathing for the children. This has proved to be a very popular feature of the daily programme, its inauguration being primarily due to Miss Cora Wilding, a Christchurch resident, who had observed sunshine treatment under Rollier, Leysin, and Sir Henry Gauvain, England, while Dr. Phillipps acts in the capacity of supervisor.

In the Wanganui district Dr. Elizabeth Gunn has continued the system of examining pre-school children when opportunity offers. During the year five such clinics were held, the response on the part of parents being very good. The findings resulting from the examination of pre-school children afford strong evidence as to the necessity of this age group also being under regular medical supervision.

#### TUBERCULOSIS.

The percentage of children found suffering from tuberculosis in routine examination equals 0.08. The percentage of children found suffering from subnormal nutrition equals 7.06, which group, it must be recognized, includes a number affected by latent tuberculosis. In establishing preventive measures special consideration has to be given to children who are known to have been exposed to infection as by the presence in their own homes of a tuberculosis patient. School Medical Officers are notified of contact cases by the Medical Officer of Health for the district. During the past year approximately 1,200 contacts (children) have been kept under supervision. In the main centres these children are seen regularly by the school nurse, who keeps a record of the height, weight, and age-ratio, and refers cases making unsatisfactory progress to the School Medical Officer; the School