

During the year an investigation was carried out by Dr. Mary Champstaloup, School Medical Officer, upon approximately one thousand children attending Auckland schools. Its object was to form an estimate of physical condition, postural deformities, and the effect of remedial treatment. The first section of the report is to be found in the appendix. This deals with observations on (1) the incidence of postural deformities; (2) nutrition and posture; (3) angle of pelvic inclination and lordosis; and (4) respiratory excursion.

The schools selected were four large city schools, a school with a roll number of one hundred in a small community outside Auckland, and a junior high school in Auckland itself. The children concerned are therefore largely Auckland city children. The latter half of the report (which is not appended) deals with the effect of various types of drill in correcting faulty posture.

In Taranaki Dr. McCreedy reports as follows:—

“Exercise and Physical Training.—Swimming formed part of the physical training in forty-two of the country schools and eight of the town schools. In the latter the presence of public baths facilitated this teaching. Of course, proficiency of the pupils depended on the skill of the teacher in this art, and therefore varied very considerably. In general it may be said that swimming was enjoyed everywhere a river could be dammed to form a pool in reasonable proximity to the school.

“Folk-dancing continues to form a large proportion of the physical training in forty-one country schools, and apparently to a lesser extent in six of the town schools. In the country schools it is the rule for both boys and girls to form joint classes for this valuable form of exercise. In the town and larger schools, the boys are only infrequently taught, the pastime apparently being considered one for girls only. I regard this distinction as unfortunate and unwarranted in view of the benefits which have been found to obtain from boys and girls dancing together in the country schools. Lepperton and Okau list eurythmics in their programme of physical training. Problems of physical training are frequently discussed with Miss Blackie, Physical Instructress at Taranaki, who has always extended the maximum of co-operation to our officers.”

GOITRE.

Statistics from the routine examinations gave the incidence of goitre as follows: All degrees, 13.9; incipient, 11.33; small, 2.38; medium, 0.23; large, 0.03.

The system of recommending the use of iodized salt for all cases found on medical inspection has been followed. All degrees of goitre but the incipient are further referred for medical advice. Dr. McLaglan in Canterbury, comparing recent findings with those of 1920, draws the following conclusions: “(1) the total number of *normal* thyroids has in Christchurch, Timaru, and Ashburton increased (13 per cent. to 25 per cent.); on the West Coast it is practically stationary; (2) the improvement manifested in the Canterbury figures is due to an all-round improvement, but is chiefly manifest in the small, medium, and large goitres—that is, in the more serious types—whereas on the West Coast the figures throughout are curiously the same as in 1920, leaving its preponderance largely to the more serious types of goitre.” It is too early to draw definite conclusions from these findings, but it appears probable that the intensive propaganda carried out in Canterbury for the past ten years, resulting not only in earlier remedial but in general preventive measures, such as a wide use of iodized salt, is now beginning to show benefit. The efforts of Dr. McLaglan in this respect merit special recognition.

MEDICAL EXAMINATION OF TEACHERS.

In view of inquiries received on the subject, it may be stated here that the ultimate selection of successful candidates to the teaching profession is the business of the local Education Board, but the Education Board is guided in its choice by the recommendations of the Senior Inspector of Schools, and its selection is limited to those candidates found physically fit by School Medical Officers. An unsuccessful candidate is not always an ineligible one. All that can be said is that when the applications are considered, the Board, on the advice of the Senior Inspector and Medical Officer, selects those applicants best qualified in all respects. A strict examination is made, and, apart from mere absence of any special defect, candidates should show positive evidence of good physique, physical appearance, and personality.

A questionnaire was again this year submitted to all applicants for entrance into the teaching profession in order to obtain information regarding the physical and mental demand made by school life. It is again apparent that in many cases excessive study is carried on out of school hours. A return given for 258 applicants from various parts of New Zealand shows that seventy-one of their number spent three hours and over daily outside school in study. With regard to the physical condition of those appointed, approximately 28 per cent. are classified as excellent, 55 per cent. as good, and 24 per cent. as fair. Several School Medical Officers remark that they have found an improvement in the general health and physique of applicants this year. It is to be noted, however, that 14 per cent. suffer from defective eyesight.

Reasons for Rejection.—In a return with regard to twenty-three candidates for entrance into the teaching profession rejected as physically unfit the reasons given are as follows: Poor physique and personality, defective eyesight, general debility, deafness, neglected and septic teeth, goitre, history of pleurisy, poor physique with nervous temperament.

As in previous years, an opportunity was given to secondary-school pupils wishing to take up teaching to come up for medical examination a year previous to the termination of their school career. This privilege is freely utilized in some educational districts, but in others the Principals of secondary schools do not appear to recognize the arrangement as a standing one, and require a notification of it annually. It is disappointing moreover to find candidates coming up for the second examination without having secured treatment for defects pointed out to them at the preliminary examination. This should, and often does, prejudice the applicant's chance of success.