

## ANALYSIS OF 69,173 COMPLETE EXAMINATIONS.

Total number of children examined .. 69,173	Percentage of children, &c.— <i>continued</i> .
Percentage found to have defects .. 73.54	Nose and throat—
Percentage with defects other than dental .. .. . 49.47	Nasal obstruction .. .. 3.41
Percentage of children showing evidence of—	Enlarged tonsils .. .. 14.76
Subnormal nutrition .. .. 6.68	Enlarged glands .. .. 7.54
Pediculosis .. .. 1.02	Goitre—
Uncleanliness .. .. 1.01	All degrees .. .. 11.27
Skin—	Incipient .. .. 9.01
Impetigo .. .. 1.65	Small .. .. 1.95
Scabies .. .. 1.98	Medium .. .. 0.27
Ringworm .. .. 0.15	Large .. .. 0.04
Other skin-diseases .. .. 0.82	Eye—
Non-vaccination .. .. 78.54	External eye-disease .. .. 1.59
Heart—	Defective vision (total) .. .. 3.83
Organic disease .. .. 0.54	Corrected .. .. 2.15
Functional disturbance .. .. 1.07	Uncorrected .. .. 1.68
Respiratory disease .. .. 0.62	Ear—
Total deformities of trunk and chest 11.77	Otorrhœa .. .. 0.28
Mouth—	Defective hearing .. .. 0.28
Deformity of jaw or palate, including irregularity .. .. 3.06	Defective speech .. .. 0.89
Dental caries .. .. 40.32	Mental—
Extractions of permanent teeth .. 6.83	Feeble-mindedness .. .. 0.41
Fillings .. .. 36.70	Epilepsy .. .. 0.05
Perfect sets of teeth .. .. 3.92	Other nervous defects .. .. 0.47
	Tuberculosis—
	Total .. .. 0.04
	Pulmonary .. .. 0.01
	Other tissues .. .. 0.03
	Notifications to parents .. .. 37.83

These findings show no great variation from those of previous years. In spite of diminution of staff, the number of children examined has slightly increased, though the number of schools inspected is somewhat below that of the previous year.

Satisfactory features observed in the primary-school population of recent years are a decrease in verminous conditions and dirt diseases, and a decrease in remediable and neglected physical defect. Largely owing, no doubt, to better health supervision, school absenteeism has decreased 5 per cent. since 1920. (Average attendance, 1920, 87 per cent.; 1930, 92.2 per cent.) The mortality-rate of children of school age is declining (see "New Zealand Official Year-Book").

There is undoubtedly a widely increased public knowledge of the essentials for right living for which the health instruction and supervision provided in the schools during the last twenty years is to a great extent responsible. Evidence of wider interest is shown in the greatly increased number of parents who attend the medical examination of children (13,883 in 1931 as against 6,659 in 1923). The hygiene of the school itself has improved; credit for this must be shared with the Education Department.

## NUTRITION.

The percentage of subnormal nutrition shows a slight rise from the previous year, 6.68 per cent. from 6.3 per cent. This increase would not in itself be noteworthy, but for the fact that School Medical Officers report, especially during the examination of city schools, increased evidence of the clinical signs of subnormal nutrition. In the poorer districts an increased number of children are too pale, lacking in muscular tone, and in general vitality. This is attributable to the widespread unemployment and the inability of the best-directed efforts of social organizations to deal adequately with the problem. Apart from the general economic question involving rate of wages, housing conditions, &c., the value of domestic management, including especially good cooking, becomes more than ever apparent. One woman feeds her children well, where another (possibly at greater cost) leaves hers undernourished. During the present crisis, though the general nutrition of the children is well maintained, it has been found necessary in certain city areas to make special arrangements for supplementary feeding. A simple and effective procedure has been the allowance of an extra pint of milk a day at school for necessitous children. The average daily consumption of milk per head of New Zealand population is calculated as being approximately three-eighths of a pint, so that, allowing for its lesser use by adults, it appears that the use of milk in the dietary of children falls short of our recommendation—*i.e.*, from 1 pint to 1½ pints per day per child. In New Zealand, with its many sources of supply, milk, butter, fresh fruit, vegetables, &c., should be available at low-enough prices to meet the needs of the average household.

## HEALTH CAMPS.

The health-camp movement in New Zealand shows steady progress. During the year the Auckland Community Sunshine Association (the well-known voluntary organization) held two camps—one at Motuhi Island in Auckland Harbour in the Quarantine Station lent by the Health Department, where approximately 100 children were in residence for six weeks. This association also held another camp at Waiheke Island for thirty delicate children belonging to the Sunshine School. Assistance was given in staffing these camps from the School Nursing Service. Following on these efforts, the