The typhoid fever death-rate of 2.53 per 10,000 showed a distinct rise on the previous year's rate of 1.36. The maternal-mortality rate was 7.38, which represents an increase over the figure for 1934 which was 6.04 per 1,000 live births. Dr. Paget in his section of this report has some comments on the problem of maternal mortality amongst Maoris.

For some time the Department has felt the need for inaugurating a better health educational service amonst the Maoris, supplementing the work of the Maori Women's Institutes in this connection, and giving particular attention to the hygiene of the home. The sympathy of the Carnegie Foundation was enlisted, and a grant was made by the Foundation for a scholarship to enable a selected Maori nurse to receive training at the Domestic Science School, Otago University. The nurse selected for the scholarship was Miss E. Kaa, of Rotorua Hospital. At the completion of the course of her training, Miss Kaa was appointed to the Department's staff and stationed in the North Auckland District. Reference to her work and also to the activities of the Maori Women's Institutes is contained in the report of the Director, Division of Nursing.

Dr. Cook, Whangarei, in commenting on the health of the Maoris in the North Auckland Health District, states:--

"Apart from skin diseases, tuberculosis and other respiratory diseases remain the scourge of the Maori, and despite all our efforts, it sometimes appears that the amount of tuberculosis is increasing, but I am sure that this is not so.

"As a result of our educational efforts the Maori is becoming more conscious of his various ailments, and associated with this is the more easy access to the far back settlements. These factors alone account for the apparent increase in tuberculosis. This explanation does not, however, alleviate the distressing condition in any way, and tuberculosis is still the worst side of the Maori health problem.

in any way, and tuberculosis is still the worst side of the Maori health problem. "It appears so easy to say that we ought to do something for this, but I am convinced that real improvement can come only as a result of the efforts of the Maoris themselves, associated with better housing, clothing, and feeding. This is one of the most depressing parts of a Health Officer's work, because it appears so difficult to do anything for these people who do not seem to be able to understand the most elementary ideas of hygiene and sanitation. Accustomed as most of them have been to their present conditions from birth, these conditions have now become part and parcel of their nature, and any sudden improvements that we may introduce only make them feel uncomfortable, with a tendency towards reversion to their primitive conditions. Thus a new house will be of no use without a new mentality to go with it. A great part of our duties, therefore, will be to create this new mentality, which all are endeavouring to do, finding, however a difficulty in making ourselves comprehensible by theoretical teaching.

"The Institute work among the women, of which there was a demonstration at Pukepoto in February last, opens up a new field to this work. Its possibilities are very far reaching, and it is pleasing to relate that our nurses are very interested in this work and endeavouring to further it to the utmost of their power."

Dr. B. Wyn Irwin, Gisborne, in reporting on Maori Hygiene in the East Coast Health District, states:---

"This problem, the prime consideration in this district, was this year chiefly attacked through the nine district nurses, virtually "Native health nurses and visitors," who, by their continual home, pa, and school visits for treatment, supervision, inoculations, health talks and demonstrations, keep the Department's activities and powers in the Maori eye. They are aided by inspectors who not only deal with infectious diseases but supervise tangis and tribal meetings, see to improvements in the kaingas and meeting-houses, and generally augment the nurses' authority when required."

GENERAL.

New Health District.—The South Auckland Health District was constituted and placed in charge of a Medical Officer of Health stationed at Hamilton. This new district comprises the Waikato and Taumarunui Hospital Districts. This step was taken in pursuance of the policy of breaking up the larger districts, especially where there is a fairly large Maori population, in order that more intensive attention may be given to public health matters.

National Health Insurance.—All political parties at last general election were in agreement as to the need for a national health insurance system for New Zealand. The present Government has indicated its intention to hold an inquiry at an early date into this question, at which all parties concerned will be given an opportunity of submitting evidence. It is understood that the New Zealand Branch of the British Medical Association, the Pharmaceutical Society, the Registered Nurses' Association, and other organizations are taking special steps to assemble their views on the various phases of the proposal.