

HEALTH CAMPS.

The Health Camp Movement shows vigorous progress; public interest and support being more widely manifest each year. The proceeds from the sale of health stamps (1935-36 holiday season) reached the sum of approximately £5,000, which, together with the donations raised concurrently, gave a total of over £11,000, and the various health-camp organizations accordingly received substantial benefit in proportion to local contributions. This excellent result must be attributed to the efficient organization of the Post and Telegraph Department, and to the whole-hearted efforts of voluntary workers and organizations, including especially the Rotary Club. Health camps during the year were held by the following organizations: Wellington Children's Health Camp Association; Community Sunshine Association, Auckland; Waikato Children's Health Camp League; Sunlight League of New Zealand, Christchurch; Otago Health Camp Association, Dunedin; Nelson Health Camp Association; South Canterbury Health Camp Association, Timaru; Southland Health Camp Association, Invercargill; Marlborough Health Camp Association, Blenheim.

A great deal of work was carried out by School Medical Officers and nurses in regard to the selection and medical examination of children; also in practical assistance and advice *re* camp arrangements. One or more School Nurses were in residence in six camps, their work being greatly appreciated by camp organizers. Some 2,350 children in all benefited from these camps, the period of stay varying from three weeks to six weeks or (at Otaki) even longer.

The duration of most camps varied from one to two months. The Community Sunshine Association camps were in operation approximately half the year, the Wellington Children's Health Camp at Otaki being permanently open. Undoubtedly the best advertisement for the various health camps is the obvious benefit they confer upon the health and happiness of their inmates.

It is now recognized that, to ensure the best results from the generous support and widespread enthusiasm on the part of the public, the time has come for the Health Camp Scheme to be placed on a Dominion basis, and for the various organizations to be joined into a National Federation of Health Camps. This question is therefore receiving consideration, care being taken to ensure the integrity and independence of action (within desirable limits) of the various associations.

TUBERCULOSIS.

The percentage of tuberculosis found on routine examination is approximately the same as last year (0.06 for European children and 0.46 for Maori, as against 0.07 European and 0.6 Maori last year). The work of supervision of tuberculosis contacts has been continued, exact records being available for over one thousand children. Co-operation is maintained with tuberculosis specialists attached to sanatoria and hospitals to ensure periodic expert examination. The value of this work is demonstrated by the opportunity it gives, not only for early and appropriate treatment when required, but also more generally by measures for improving health and nutrition, thus preventing the onset of disease.

The Sunshine School, Auckland, under the auspices of the Community Sunshine Association, continues to give excellent service in the interest of delicate and under-nourished children.

Similar good work is carried on by the Kew Open-air School, Dunedin, valued co-operation being received from the Home Science School, Otago University, in the provision of an adequate mid-day meal.

KINDERGARTENS.

The routine medical examination of kindergartens was carried out in Auckland, Wellington, and Dunedin, as well as in one or two smaller towns. The result of the examination of 496 kindergarten children is as follows:—

Number of children examined, 496. Percentage found to have defects, 85.69. Percentage with defects other than dental, 66.53. Percentage of children showing evidence of—Subnormal nutrition, 4.03; pediculosis, 1.21; uncleanness, 5.24. Skin—Impetigo, 3.23; scabies, 0.6; ringworm, 0.2; other skin diseases, 4.64. Heart—Organic disease, 0.2; Respiratory disease, 2.42. Total deformities of trunk and chest, 13.19. Mouth—Deformity of jaw or palate, including irregularity, 0.81; dental caries, 55.44; fillings, 3.02; perfect sets of teeth, 25.4. Nasal obstruction, 2.42. Enlarged tonsils, 29.84. Enlarged glands, 16.94. Goitre—All degrees, 3.63. Eye—Total defective vision, 2.86; corrected, 1.01; uncorrected, 0.4. Ear—Otorrhœa, 0.2; defective hearing, nil. Defective speech, 0.6. Notifications to parents, 55.65.

School Medical Officers and nurses pay tribute to the wisdom and devotion of kindergarten teachers. The kindergarten school functions not only as an educational centre for its pupils, but as a social centre for parents who learn to co-operate cheerfully in measures for the welfare of their children.

NATIVE SCHOOLS.

In regard to Native schools the work of Medical Officers of Health and District Nurses is being carried out with interest and energy. The system of utilizing the Junior Red Cross as a medium for health education is proving successful. The result of the medical examination of some 4,396 Maori children shows, as in previous reports, that the Maori