

view of this state of affairs I advised some of the headmasters to distribute the milk an hour earlier, and where this has been done no further complaints have been made. The beneficial effects of milk are reflected, especially in members of large families and those in the poorer districts, by general improvement in health, clearer complexion, and general alertness. In some of the better districts where an adequate amount of milk is being taken at home parents have stopped their children from taking milk at school owing to the excessive increase in weight."

Dr. McLagan.—"School milk has undoubtedly done much good. The trend of the times, the frequent discussions in the newspapers, the obvious improvement in pupils' physique, and the provision of school milk have all stimulated the teachers' interest in the physical well-being of their pupils. This interest should be fostered."

Dr. Deem.—"I have found that at schools where the teachers are genuinely interested in the physical well-being of the children they can do a great deal towards making the children drink the milk, and the percentage of children taking milk at these schools is markedly higher than at the other schools. At the schools where malted milk is being given practically all the children take the milk. The malted-milk scheme has now been in progress for eighteen months, and the teachers and children manage it without any difficulty."

Dr. Dawson.—"During the winter months some little difficulty was experienced in getting children at some of the schools to take the milk on account of its coldness, but this was soon adjusted, in some cases by placing the boxes containing the milk on the hot pipes or by using the milk to make cocoa."

HEALTH CAMPS.

Health camps continue to play a large part in the care of delicate and debilitated children, last year over two thousand children receiving the benefit of treatment in the many camps held. The medical inspection of these children before they can be admitted to camp entails much preparation and hard work. Most of these examinations are carried out by the School Medical Officers, but in some districts the work is voluntarily carried out by the local medical practitioners.

Camps were held throughout the Dominion, and the various organizations responsible for their conduct are to be congratulated upon the excellent results obtained. It is by the efforts of these disinterested people that this work has been carried on so successfully in the past, and it is to be hoped that their future efforts will meet with the same response. We look to the public, therefore, to support these organizations, without which the health-camp movement would cease to exist.

The plain, well-cooked food, with plenty of milk, plenty of rest and sunshine, and the orderly and disciplined routine of a health camp improves the children not only by an increase in their height and weight (which is attained by almost all the children), but in their happier and more sensible outlook, by the companionship of other children, the giving and taking. Spoilt only children discover there are other children in the world and become good campers. The rests after meals, the sun-bathing, the jobs about camp, the routine of regular meal-hours and regular hours of sleep in well-ventilated open-air sleeping-quarters with no wireless should illustrate to parents, teachers, and the public what children do under such conditions. Every New Zealand home could be a health camp. The children get in camp nothing that the average home in New Zealand cannot provide—rest, sunshine, good food, plenty of milk, long hours of sleep at night in well-ventilated and quiet rooms.

DENTAL CARIES.

All School Medical Officers comment on the excellent work done by the dental clinics in the preservation of the teeth of the younger children, but they all regret that although most of the children in the Fifth and Sixth Standards have had the benefit of continuous attention at dental clinics there is a great amount of dental caries amongst them. It should be incumbent upon parents to see that their children follow up this treatment when they are no longer eligible for attention at a dental clinic. It is a great pity that it is not possible to demand from parents that if their children have the advantage of dental-clinic treatment in the earlier years of their life they should follow up this treatment when the children are older. Parents should realize that when children leave the dental clinic as dentally fit constant attention by a dentist, say every six months, would mean very little expense in a year, whereas if they leave the child for two or three years, when dental caries has become firmly established, the cost of treatment becomes a serious matter and in many cases children of fifteen or sixteen are recommended to have all their teeth extracted.

In discussing this subject, *Dr. Phillipps* states:—

"The shocking state of the teeth in New Zealand is hardly realized except by those who, like school doctors and dental nurses, see children in the bulk. The ordinary citizen is aware that A and B have very bad teeth, but he looks on them in a detached way, almost regarding them as isolated cases, and does not realize that they are in reality specimens of the general population. How many young adults have lost all their teeth and been fitted with artificial dentures—there are no statistics."

DIPHTHERIA IMMUNIZATION.

Diphtheria immunization was carried out in a more extensive manner than previously, and it is hoped that at least all the younger children in New Zealand will ultimately be protected against this disease. *Dr. Catherine Anderson* continued her campaign in Hawke's Bay, and *Dr. Platts Mills* spent some weeks in Taranaki inoculating children in eight schools. *Dr. Turbott* and *Dr. Deem*, in the South Auckland district, spent considerable time immunizing children in this area, and a detailed account of their work will be found in the appendix to this report.