

and the first anxiety of the Ministry was to secure the country from invasion by them.

In regard to tuberculosis, in no disease was it easier to spend money unwisely than in combating tubercle. A large number of people went into sanatoria, were maintained there at great expense for a long time, and went back to home surroundings where they became re-infected, and who then tried to enter the competitive labour market and broke down. The result was a disappointment to them, loss of public money, and sorrow to all concerned. We now had a dispensary system developed to a certain extent, but no dispensary system would be successful in preventing tubercle, and no sanatoria would wipe out the disease, whilst people had to live crowded in unhealthy dwellings. We had to bring the conditions of the home within the scheme, otherwise it was quite useless to expect the eradication of the disease.

It was also essential to provide training centres in connection with the sanatoria, and as it was useless to expect the patients when trained to enter into competition in the ordinary labour market, to establish village colonies. Dr. Addison gave two instances of such colonies where the men work at trade union rates and very largely support themselves.

#### VENEREAL DISEASES.

Another set of diseases, of an exceedingly lamentable character with which the Ministry was dealing energetically was venereal diseases. There was no branch of service in which it was more necessary than in this to have a trained personnel. It was not enough simply to have centres for the treatment of venereal disease, and it was in order that the Ministry might keep abreast of progress in this matter that he asked Colonel Harrison, who did brilliant work during the War, to join his staff, with others, and to help to organise this Service. There had been a substantial increase in the persons attending venereal centres. The total had gone up from 460,000 to 843,000. It meant that people were beginning to realise the necessity of going to the centres early. The scheme was, so far, only at the beginning.

There was a tendency amongst certain protagonists to fall upon one another in regard to the method of dealing with this disease. He exhorted them to fall upon the disease.

#### THE EARLY TREATMENT OF MENTAL DISORDERS.

The war had shown that properly directed efforts could cut short a great number of cases that otherwise would develop into mental deficiency of a permanent kind. It was necessary, and the Ministry was working out plans clearly to provide, that in any future arrangements the authorities should be able to deal with mental cases while they were at an early stage, to avoid their being labelled lunatics. The war had shown conclusively that this could be done with conspicuous success, and it was the Ministry's

business, now that it was dealing with matters affecting the Lunacy Board of Control, to try to secure the development of a system designed for the early treatment of mental disorders.

#### THE NECESSITY FOR TRAINED NURSES AND MIDWIVES.

In no matter was it more important to have a trained personnel than in questions affecting the charge of mothers. Hence the importance of maternity and infant welfare homes. Early in the year the Minister said it was clear to him that the thing necessary for success was to have trained personnel at their command in the way of nurses, midwives, &c. Therefore, it was arranged with the Board of Education to have additional grants for training for health visitors, midwives, &c. They had been taken up very extensively. At present there were 700 midwives under training under the scheme, and the number of centres where this supervisory work was carried on had increased from 1,400 to 1,600.

The development of these services throughout the country, in nursing, midwifery, and other facilities, and the combination of the whole big effort had been able to reduce the infant mortality in 20 years from 151 to 78 per thousand. It was a striking performance.

But this was only an index figure. It was to the good not to lose so many, but the point was that those who survived were better nourished and more likely to be useful members of the community hereafter. The fall in the child death-rate had been continuous, and it was still falling.

#### THE MEDICAL EXAMINATION OF SCHOOL CHILDREN.

This improvement had not yet made itself sufficiently felt in the children who go to school. Although the Ministry was developing the medical service as energetically as possible, of the first 750,000 children examined in our schools last year, 40 per cent. were still found to be physically defective. That would drop as the diminished infant mortality rate made itself felt. But it was an appalling figure that nearly 50 per cent. of the children aged five were physically defective. We saw the expression of it in adult life during the war. It was all one continuous process, and this was where they had to begin.

#### A SYSTEM OF PREVENTIVE SERVICE.

The Minister said further that the Ministry had passed through the House measures affecting Nurses' Registration, &c., and they had now before them various other matters which had given the Department a lot of work, but were all part of the scheme to promote a system of preventive service, which it was essential to get—well paid nurses, for example—before they could expect to meet the needs of the masses of the people in this matter. That was why the Nurses' Registration Act, and the Dentists' Bill were essential ingredients in any health scheme.

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