I find that I have had very good co-operation from medical men and hospitals in their treatment of the aborigines.

It has been found necessary, however, in most cases to segregate them from other patients in the hospitals; the reason being that most aboriginal patients are filthy in their habits generally. I have had reports of cases where they expectorate on the floor near their beds and also one case (who was not mental, either) where a woman constantly got out of bed and performed her excretions on the floor.

How can people who persist in behaviour such as this expect to be treated as equals by the white community.?

Employment is becoming more difficult to obtain. This applies in all centres, and every effort should be made by the aboriginal people to establish themselves in one district so that they can become known and will then obtain work when it is offering.

Where individual aborigines show a desire to go in for agricultural work, every effort should be made to start them on old Reserves or pieces of available Crown Lands. There are indications that in most cases they do well in these pursuits, especially in market gardens and banana growing. In conclusion, I would like to add that I consider the Board's building programme to be the most important uplift for the aboriginal people. I would, however, like to see, where possible, homes built for some of the better types away from Stations and Reserves. I consider it is essential, even to the point of reducing accommodation, to provide laundry and bathroom facilities. Without this encouragement to cleanliness and personal hygiene, much of the advantages of better housing will be lost.



The Gum Leaf band at the recent La Perouse Convention From left to right—C. Edwards, J. Longbottom, T. Williams, W. Stewart and Roy Simms.

