# Report on the sanitary condition and vital statistics during the year 1909 together with the report of the Chief Sanitary Inspector.

#### **Contributors**

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#### THE

# Metropolitan Borough of Bethnal Green.

REPORT ON THE

# SANITARY CONDITION

AND

## VITAL STATISTICS

DURING THE YEAR 1909.

TOGETHER WITH THE

Report of the Chief Sanitary Inspector.

BY

### GEORGE PADDOCK BATE, M.D.

Fellow of the Royal College of Surgeons and Licentiate of the Royal, College of Physicians of Edinburgh; Fellow of the Royal Society of Medicine; Fellow of the Royal Microscopical Society; Fellow of the Royal Institute of Public Health; Vice-President (past President) of the Incorporated Society of Medical Officers of Health; Examiner in Sanitary Science, &c., to His Majesty's Civil Service Commissioners; Honorary Consulting Physician to Queen Adelaide's Dispensary; J.P. for the County of London; and Medical Officer of Health for the Borough of Bethnal Green.

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1910.



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### London and the Metropolitan Boroughs.

Births and Deaths of Persons belonging to London and the Metropolitan Boroughs during the 52 Weeks of 1909\*

	d to					Des	aths	fron	1					r of
Boroughs.	Population estimated the middle of 1909.	Births,		Prinoipal Epidemic Diseases.	Small-pox.	Measles.	Scarlet Fever.	Diphtheria.	Whooping-cough.	Enteric Fever	Pyrexia; (Origin uncertain),	Diarrhea	Phthisis.	Deaths under 1 year Age.
COUNTY OF LONDON	4,833,938	116,559	67632	6285	2	2324	383	605	1246	146	2	1577	6337	12582
West.  PADDINGTON KENSINGTON HAMMERSMITH FULHAM CHELSEA CITY OF WESTMINSTER	151,955 183,683 125,704 176,406 75,249 168,883	3120 3362 2995 4307 1391 2730	1956 2440 1791 2113 1084 2212	136 183 210 276 75 104		36 58 80 74 24 25	14 9 11 10 6 18	10 19 23 40 15 18	36 40 47 49 13 19	4 8 5 4 2 7		36 49 44 99 15 16	164 176 137 205 109 225	312 379 360 466 149 260
North.  ST. MARYLEBONE HAMPSTEAD ST. PANCRAS ISLINGTON STOKE NEWINGTON HACKNEY  Central.	126,027 94,185 237,422 351,202 54,423 237,601	2595 1328 5609 8320 1025 5416	1836 839 3510 4913 612 2988	105 50 230 423 34 220		33 14 105 199 10 57	8 4 17 26 3 10	9 5 27 30 2 19	25 18 30 86 14 51	5 6		29 4 45 69 4 77	170 57 382 430 45 289	258 99 570 843 82 550
Holborn Finsbury City of London	53,802 95,289 18,193	976 2810 247	836 1829 368	45 224 13		14 85 6		3 14 	15 51 4	3		9 60 2		100 367 28
SHOREDITCH	114,809 131,316 312,525 171,965	3632 4132 9506 5192	2178 2201 4759 2787	328 260 526 405	1	130 79 236 156	25 26	17 51	40 69	4 6	**	89 95 137 109	202 521	510 535 1130 669
South.  Southwark Bermondsky Lambeth Battersea Wandsworth Camberwell Deptford Greenwich Lewisham Woolwich	211,125 127,569 324,188 186,026 297,646 283,022 118,583 111,014 160,749 133,374	5969 4104 7578 4447 7005 6689 3117 2481 3529 2947	3528 2388 4544 2416 3524 3776 1611 1350 1656 1587	350 348 387 239 286 306 179 114 93 137		127 200 104 90 111 105 67 38 6 55	27 8 14 17 12 9 15	9 58 22 27 43 15 7 21	57 55 85 63 69 52 47 20 20 15	9 7 6 5 6 4 2	ï ï ï 	113 67 103 49 58 84 31 36 29 19	227 455 227 275 337 148 110 128	711 567 823 477 601 666 317 249 262 242

<sup>\*</sup> The Births in this Table have been corrected by distributing those which occurred in the chief Institutions treating Ma'ernity cases to the boroughs in which the mothers had resided previous to admission. In 988 cases the residence was outside the County of London, and these cases have been excluded from this Table. With regard to Deaths, all those of persons in, or on the way to, Hospitals or other Public Institutions, as well as those of persons under treatment in surgical homes, or dying by accident or otherwise in the streets, have been distributed, as far as practicable, to the boroughs in which the deceased had previously resided. The deaths of 2528 London residents who died outside the County of London in Metropolitan Workhouses, Hospitals, and Lunatic and Imbecile Asylums have been similarly distributed. Of the deaths registered in London, the previous residence was outside the County in 3162 cases and these have been excluded from the above Table.

‡ Called Simple Continued Fever previous to 1901.

### London and the Metropolitan Boroughs.

Birth-rates based upon births registered in each Borough, and Death-rates after distribution of Deaths in Public Institutions, of Persons belonging to London and the Metropolitan Boroughs during the 52 Weeks of 1909.\*

					PE	R 1000	PERS	ons Li	VING.					1000
		Deaths from							r to					
Boroughs,	Births	All Cansos		Principal Epidemic Diseases,	Small-pox.	Measles.	Scarlet Fever.	Diphtheria,	Whooping-cough.	Enteric Fever,	Pyrexia† (Origin uncertain),	Diarrhea,	Phthisis,	Deaths under 1 year Births,
COUNTY OF LONDON	24.2	Crude 14.0	Cor- rected. 147	1:31		0.48	0.08	0.13	0.26	0.03	0.00	0.33	1'31	108
West.  Paddington	20.6 18.4 23.9 24.5 18.5 16.2	12·9 13·3 14·3 12·0 14·4 13·1	13·8 14·4 14·9 12·6 15·0 14·7	0.91 1.00 1.67 1.57 1.00 0.63	0.01	0°24 0°32 0°64 0°42 0°32 0°15	0.09 0.05 0.09 0.06 0.08 0.11	0.07 0.10 0.18 0.23 0.20 0.11	0°24 0°22 0°37 0°28 0°17 0°11	0°03 0°04 0°04 0°02 0°03 0°04		0°24 0°27 9°35 0°56 0°20 0°10	1'08 0'96 1'09 1'17 1'45 1'34	100 113 120 108 107 95
North.  St. Marylebone Hampstead St. Pancras Islington Stoke Newington Hackney	23.8	14·6 8·9 14·8 14·0 11·3 12·6	15.6 10.1 15.5 14.6 11.8 13.1	0°83 0°52 0°97 1°22 0°63 0°93		0°26 0°15 0°44 0°57 0°18 0°24	0°06 0°04 0°07 0°07 0.06 0.04	0°07 0 05 0°11 0°09 0°04 0°08	0°20 0°19 0°13 0°25 0°26 0°22	0°01 0°05 0°03 0°04 0°02 0°03		0°23 0°04 0°19 0°20 0°07 0°32	1°35 0°61 1°61 1°23 0°83 1°22	99 75 102 101 80 102
Central.  HOLBORN FINSBURY CITY OF LONDON	18·2 29·6 13.6	15.6 19.2 20.3	16·8 19·9 22·3	0°85 2°36 0°72		0.26 0.89 0.33	0°06 0°12 	0.06 0.15 	0°28 0°54 0°22	0°02 0°03 0°06		0°17 0°63 0°11	2:05 2:22 2:15	102 131 113
East. SHOREDITCH BETHNAL GREEN Stepney POPLAR	31.7 31.6 30.5 30.3	19.0 16.8 15.3 16.3	20°0 17°0 16°0 16°8	2:87 1:99 1:68 2:37	0.30	1°14 0°60 0°76 0°91	0.08 0.13 0.08 0.13	0 19 0*13 0*16 0*12	0.63 6.31 0.22 0.49	0.05 0.03 0.02 0.08		1.78 0.73 0.44 0.64	1.75 1.54 1.67 1.29	140 129 119 129
South.  SOUTHWARK BERMONDSEY LAMBETH BATTERSEA WANDSWORTH CAMBERWELL, DEPTFORD GREENWICH LEWISHAM WOOLWICH	28°3 32°3 23°4 24°0 23°7 26°4 22°4 22°0 22°2	16°8 18°8 14°1 13°0 11°9 15°4 13°6 12°2 10°3 11°9	17·5 19·2 14·5 14·0 12·5 13·9 14·3 12·4 10·8 12·8	1.67 2.74 1.19 1.29 0.96 1.08 1.51 1.03 0.57 1.02		0.60 1.57 0.32 0.49 0.37 0.37 0.57 0.34 0.04	0°07 0°12 0°08 0°04 0°05 0°06 0°10 0°08 0°09 0°14	0°16 0°07 0°18 0°12 0°09 0°15 0°13 0°06 0°13 0°20	0°27 0°43 0°26 0°34 0°23 0°18 0°18 0°12 0°11	0°03 0°02 0°03 0°04 0°02 0°02 0°05 0°04 0°01 0°02	0.00	0°54 0°53 0°32 0°26 0°20 0°30 0°26 0°33 0°18 0°14	1·79 1·78 1·41 1·22 0·93 1·19 1·25 0·99 0·80 1·20	119 138 109 107 86 100 102 100 74 82

In this Table 0.00 indicates that the deaths were too few to give a rate of 0.005; where no death occurred, ... is inserted, † Called Simple Continued Fever previous to 1901,

### SUMMARY.

	1908	1909
Estimated Population of Bethnal Green-	131,006	131,316
Young Children, under 5 years	17,900	17,930
Old People, over 65 years	57,250	57,300
Area—755 Acres. Number of Inhabited		
Houses	14,888	14,829
Rateable Value	£549,991	£548,182
Average number of Persons to each		
House	8.8	8.8
(1901 London Census 9·2)		
Average number of Persons to each Acre	173.5	173.9
(1901 London Census 170·8)		
Total number of Deaths in the year	2,275	2,197
Total number of Births in the year	4,341	4,132
Total number of Marriages	927	912
Marriage Rate—Bethnal Green	14.15	13.9
Marriage Rate—London	15.9	
Death Rate—Bethnal Green	17.10	16.73
Death Rate—London	13.80	14.00
Birth Rate—Bethnal Green	32.64	31.47
Birth RateLondon	25.20	24.40
Infantile Death Rate (on Births) Bethnal	404.00	400.05
Green	131.80	129-25
Infantile Death Rate (on Births) London	113.00	108.00
Young Children's Death Rate (on esti- mated number of Young Children)	50.5	46.3
Old People's Death Rate (on estimated		100
number of Old People	75.9	88.6
Zymotic Death Rate-Bethnal Green	2.46	1.93
Zymotic Death Rate-London	1.35	1.31
Inquest Cases	277	275
Uncertified Deaths (no Inquest held)	0	2

Metropolitan Borough of Bethnal Green.

# REPORT

To the Mayor, Aldermen, and Councillors of the Metropolitan Borough of Bethnal Green.

SIR AND GENTLEMEN,

I beg to submit for your consideration my thirty-fourth Annual Report on the vital statistics and sanitary condition of the Borough of Bethnal Green. The report covers exactly fifty-two weeks, as the Registration year commenced on January 3rd, 1909, and terminated on Saturday, January 1st, 1910.

### POPULATION.

The official estimate of the population of the Borough in the middle of the year 1909, is 131,316 persons, an increase of 250 over the previous year. This figure is arrived at by assuming that the rate of increase during the last nine years has been identical with that of the decennium immediately preceding the year 1901 when the actual figure was found by the census enumeration to be 129,680.

To arrive at the number of the inhabitants of a Borough situated as is Bethnal Green, requires the consideration of such a variety of factors that exact accuracy in estimating is impossible. A fresh census is to be taken on Sunday, the 2nd of April, 1911, and when the results of this enumeration are published we shall have, for one year at least, a solid basis upon which to calculate our statistics.

In the interests of truth it is much to be regretted that census enumerations are so infrequent.

TABLE A.

		1908.	1909.
Estimated population in the middle of the year		131,006	131,316
Total Births		4,341	4,132
Total Deaths		2,275	2,197
Total Deaths		2,275	
xcess of Births over Deaths, shewing the natu increase of the population	ral	2,066	1,935

### BIRTHS.

The total number of births registered during the year was 3,999; but in addition to these I have received information of 133 infants born of Bethnal Green mothers who were temporarily inmates of lying-in institutions in other Metropolitan Boroughs. The single institution of this nature in Bethnal Green is the Workhouse, and as only persons chargeable to the

rates are admitted to the lying-in wards, no compensating deduction from the registered births is required. The whole number of 133 must therefore be added, by which the total is raised to 4132.

Localities of these births are given in the following table:—

Births r	egistered in Beth	nnal G	reen		3,999
mothe in ot	ers in lying-in her Metropolitan	institu	itions		
as un	der:				
	Finsbury			20	
	Holborn			I	
	Poplar			2	
	St. Marylebone			3	
	Shoreditch			4	
	Stepney			71	
	Various			32	133

The addition of these 133 births in institutions to those registered in the Borough gives a total of 4,132, a number which is 209 fewer than the births of the registration year 1908, which year however included fifty-three weeks. The births exceeded the deaths by 1935.

Total .... ....

4,132

### DEATHS.

The total number of deaths registered in the Borough during the year was 2243, shewing a crude death rate on the estimated population of 17.0. This rate is

subject to correction inasmuch as the registered deaths include those of 435 non-residents, all of whom were under treatment and died whilst inmates of one or other of the various Public Institutions situated in Bethnal Green. Eight other persons also non-residents died sudden or violent deaths or were found dead within the boundaries of the Borough. They were:—

- 1. A broker's man, aged 67, from High Street, Walthamstow, died in Bethnal Green Road, from Syncope; he was suffering from acute Pneumonia.
- 2. A tailor's widow aged 42, of Pope's Head Court, Spitalfields, died in Little York Street, from Syncope; she had aortic disease of the heart.
- 3. A cigar maker's widow aged 57, of Devonshire Street, Mile End, died of Syncope, in Finnis Street; she had concussion of the brain from falling.
- 4. A chair maker of Moye Street, Shoreditch, aged 37, died in Columbia Road, from Hæmoptysis; he had tubercular phthisis.
- 5. The son, aged 16, of a cabinet maker from Leyton, committed suicide on the Great Eastern Railway, near Devonshire Street Station.
- 6. The child, aged twenty-one months, of a woman living at Kensal Rise, died from Broncho-pneumonia, at Driffield Road.
- 7. A chairmaker, aged 61, of Ford Street, Poplar, died from heart disease on Victory Bridge.
- 8. A ropemaker, aged 56, from Bow, was found drowned in the Regent's Canal.

The statistical department at Somerset House, to which the returns of the local registrars are forwarded, acts as a clearing house for London and distributes all Institutional and sudden deaths to the various Metropolitan Boroughs in which the deceased persons resided when alive; by this arrangement I receive monthly, lists of Bethnal Green residents who have died in various parts of London. The lists of 1908 contain particulars of 385 deaths in Institutions, and also of twelve Bethnal Green people who died sudden or violent deaths whilst temporarily absent from home and upon whom Coroner's Inquests were held. These were:—

- 1. A silversmith, aged 66, from Allas Road, was found dead in Devonshire Street, Mile End; he had heart disease.
- 2. A boy, aged 8, from New Tyssen Street, was found drowned in the Regent's Canal.
- 3. A shoemaker's widow, aged 73, from Gretton Houses, died in Goldsmith's Row, from broken ribs and ruptured lung; she had been run over by a horse and cart.
- 4. A night watchman, aged 57, from Helen's Place, Green Street, died at Lewis Trust Buildings, Islington, from heart disease.
- 5. A baby, aged four months, from Selby Street, died from Infective Enteritis, at Ashenden Road, Hackney.
- 6. Another baby, aged three months (a premature twin), from Diss Street, died from convulsions at the Baby's Home, Brunswick Street, Shoreditch.

- 7. A printer's labourer, aged 36, from 105, Old Bethnal Green Road, was found drowned in the River Lea.
- 8. A French polisher, aged 50, from Sweet Apple Square, died at Hill Street, Finsbury, from Hæmoptysis and phthisis.
- 9. The fourteen months old male child of a telephone operator died at Glassford Street, Streatham, from Congenital syphilis.
- 10. A clerk, aged 32, of Scott Street, died in City Road, from Hœmoptysis and phthisis.
- 11. A carman, aged 18, hanged himself at Wormwood Scrubbs Prison.
- 12. A watchmaker, aged 66, from Bonner Road, was found dead in the Poplar portion of Victoria Park. He had heart disease.

Total registered deaths Sudden deaths outside Borough  Deaths in Institutions outside Borough	12	2,640
Non-residents:—		
Sudden deaths of strangers	8	
Deaths of strangers in Institutions	435	443
Net total		2,197

The deaths of twelve persons ordinarily resident in Bethnal Green together with the 385 deaths in Institutions make a total of 397; and after adding these to the number actually registered in the Borough and subtracting the 443 non-residents there remains a net total of 2,197.

### TABLE B.

Public Institutions situated outside the Borough into which Bethnal Green residents have been received and where they subsequently died.

Banstead Asylum			 8
Bromley Sick Asylum			 1
Cancer Hospital, Chelsea			 2
Charing Cross Hospital			 1
Children's Hospital, Carsha	alton		 8
Children's Hospita, Gt. O.	rmond St	reet	 6
City of London Lying-in I	Hospital		 1
Claybury Asylum			 10
Colney Hatch Asylum			 15
Darenth Asylum			 7
Dartford Heath Asylum			 2
Eastern Hospital, Homerto	on		 12
East London Hospital, Sha	adwell		 8
French Hospital, Victoria	Park		 1
German Hospital			 3
Great Northern Hospital			 1
Guy's Hospital			 2
Hackney Infirmary			 2
Hampstead General Hospi	tal		 1
Hanwell Asylum			 4
Horton Asylum			 4
King's College Hospital			 1
Leavesden Asylum			 7
London Hospital	.,,		 192

Long Grove Asylum, Epsom			2
Metropolitan Ear, Nose, and Throa	at Hospit	al,	
St. Pancras			1
Metropolitan Hospital, Kingsland			2
Middlesex Hospital			1
Mile End Infirmary			4
Mount Vernon Hospital			1
North Eastern Hospital, Tottenham			5
Poplar Workhouse			3
Royal Chest Hospital, City Road			3
St. Ann's House, Stoke Newington			1
St. Bart's Hospital			17
St. George's Hospital			1
St. Joseph's Hospice, Hackney			1
St. Peter's Hospital			1
St. Thomas's Hospital			1
South Eastern Hospital			25
Shoreditch Infirmary			6
Tooting Bec Asylum			7
Whitechapel Infirmary			4
			205
			385

TABLE C.

Public Institutions in Bethnal Green.

BEDS AVAILABLE.	IN-PATIENTS TREATED.	DEATHS, RESIDENTS.	DEATHS, NON- RESIDENTS.	OUT-PATIENTS TREATED,
 164	934	7	53	9,242
 134	1,941	122	291	33,616
 50	564	22	25	11,918
 300			82	
 669	3,290	604	29	
 310				
	164 184 50 300 669	164 934 134 1,941 50 564 300 669 3,290	164 934 7 134 1,941 122 50 564 22 300 669 3,290 604	164 934 7 53 134 1,941 122 291 50 564 22 25 300 32 669 3,290 604 29

TABLE D.

DEATHS IN SUB-DISTRICTS.

DISTRICT		DEATHS.	Population.
North-East	 	 1,081	66,003
South-West	 	 1,083	65,313
Previous Residence unknown	 	 33	_
	Total	 2,197	131,316

Amongst the residents in the North East sub-district 1,081 deaths occurred and 1,083 amongst those of the South West. Thirty-three persons who had no fixed home died in the Workhouse or in the Infirmary, although these deaths are taken into consideration in the general mortality of the Borough it is of course impossible to allocate them to the sub-districts.

### DEATH RATE.

We shew a mortality for the year 1908 of 16.73; this is .37 below the corrected death-rate of the previous year. Our relation to the general Metropolitan death-rate remains almost unchanged as Bethnal Green is still nearly three (2.73) points per thousand above the rate for the whole of London which is 14.0.

### MORTALITY RATES IN SUB-DISTRICTS.

On the basis of the estimated populations in the sub-districts I calculate a mortality rate of 16.3 for

the North East and of 16.5 for the South West. These rates do not include the deaths of homeless paupers.

The next table shews the mortality rates for Bethnal Green and for London compared by months, the rainfall and the mean temperature are also shewn for each period.

TABLE E.

Month.			London Death Rate	Bethnal Green Death Rate.	Mean Temperature	Rainfall (inches)	
January			17.0	22.8	38.3	0.71	
February			19.2	21.4	37.0	0.50	
March			22.I	22.9	39.8	2.85	
April			15.5	15.7	50.2	1.90	
May			13.6	14.7	54-4	1.80	
June			11.7	13.4	56.2	3.79	
July			10.7	13.9	61.8	3-49	
August			11.2	12.6	63-4	1.46	
September			12.2	15.4	56.1	2.56	
October			11.9	13.7	53-5	4.16	
November			14.4	16.6	41.7	0.75	
December	***		15.6	17.8	40.3	2.79	
Ave	rage		14.6	16.7	49-4	Total Rainfal 26.76	

### TABLE F.

The following table compares the death rates for Bethnal Green and for London by Quarters:—

Quar	ter er	nding.	London.	Bethnal Green	
April 3rd, 1909				19.0	22.3
July 3rd, 1909				 12.8	14.5
October 2nd, 1909				 10.8	14.1
January 1st, 1910				 13.5	16.2
Yearly Average				 14.1-	16.7

### BIRTH RATE.

The births actually registered during the year numbered 3,999, but as previously mentioned I have received information of 133 infants born of Bethnal Green mothers in Maternity Institutions in various parts of London.

These births raise the total to 4,132, equal to a rate of 31.47 per thousand population. This rate is slightly below that of the previous year which was 32.61.

The general Metropolitan birth rate continues to decrease and stands at 24.4, the lowest on record.

In the registration sub-districts of the Borough the birth rates were as under. For purposes of comparison, the death rate of each district is also shewn.

TABLE G.

Su	b-district	Birth Rate.	Death Rate.	
North East		 	30.6	16.3
South West		 	32.2	16.5

### TABLE H.

#### MARRIAGES.

First Quarter		 		140
Second Quarter		 		244
Third Quarter				241
Fourth Quarter		 		287
	Total	 		912

These figures indicate a marriage rate of 13.9 to every thousand persons, as against 14.6 in the County of London.

### DEATHS OF INFANTS.

Nearly one fourth of the total deaths at all ages were those of infants under one year. These numbered 534, and form an infantile death rate of 129.25 per

thousand births. Although we continue to shew some slight improvement over previous years we are still twenty-one per thousand over the general Metropolitan rate. This has fallen to 108 as against 113 for the previous year. Undoubtedly there is much room for improvement here, and if the Notification of Births Act, which was put in force last December, is to produce the good effects its promoters expect and desire, this black figure of 129 should shew considerable shrinkage in the near future.

In the first quarter of the year the deaths were at the rate of 134 per thousand births; in the Summer quarter they were 107; in the Autumn they rose to 151 and in the last quarter they fell to 145. The heavy mortality of the September quarter was due to the prevalence of diarrhœa.

The fatal period of infancy is the first week of life; most infants prematurely born, or so deformed or feeble as to be incapable of prolonged separate existence, usually succumb within seven days of birth. Of the total infantile deaths 93, a proportion of 17.4 per cent. occurred during this fatal first week, and, including these, 143 (26.8 per cent.) during the first four weeks. In the second month twelve per cent. and in the third nine per cent. of the total infantile deaths were registered.

### SPECIAL CAUSES OF INFANTILE DEATHS.

The usual tables prepared in accordance with the instructions of the Local Government Board will be found in the appendix.

In the list below the principal causes of infantile deaths are tabulated so as to shew the mortality attributable to each, compared with the total number of births:—

Premature birth	and					
congenital del	fects	 120	equals	29.2	per 1000	births
Diarrhœal Disea	ases	 108	,,	26.9	,,	,,
Respiratory Disc	eases	 99	"	24.1	"	"
Wasting Disease	es	 52	,,	12.6	"	,,
Common Infection	ous					
Diseases		 35	,,	8.5	,,	,,
Tubercular Dise	eases	 27	"	6.6	,,	,,
Suffocation		 25	"	6.1	,,	,,
Convulsive Dise	ases	 25	,,	6.1	,,,	,,

As is usually the case, deaths from premature birth and congenital defects head the list, and 22.5 per cent. of the total infantile mortality is due to these antenatal causes. I was at one time of opinion that the employment in factories of prospective mothers was responsible for the conditions which result in the birth of premature or deformed children, but investigation and experience do not confirm this view; unsuitable home-work, domestic or otherwise, and the carrying of heavy loads to and from warehouses by pregnant women are much more probable causes.\*\*

Diarrhœal diseases come next in order of fatality with 108 deaths, a proportion of 20.2 on the whole number, seventy-three of these deaths were due to acute or infective diarrhœa and thirty-five to subacute

<sup>\*</sup> Report made to Chief Inspector of Factories re Employment of Married Women, Appendix Page 71.

forms of intestinal trouble variously described as Enteritis, Muco-enteritis and Gastro-enteritis. Ninety-two of the homes of the sufferers from these diseases were visited by Miss Harris, Sanitary Inspector, and as a result of her enquiries it was found that of the seventy-three who died from acute diarrhæa, thirteen were entirely breast fed and fifteen others partly so. Thirty-five were hand fed and five others, who died in hospital, were breast fed until admission. In four instances no information could be obtained as the parents could not be traced.

Ten infants (all over nine months of age) had been having much the same diet as the remainder of the family. The bowel trouble in one instance followed a meal of fried fish, and in another of sheep's brains. Eight of the hand fed infants had been fed exclusively upon condensed milk, and sixteen had cow's milk.

Nineteen of the enteritis cases were visited, three were breast fed, and one other partly so; four had cow's milk and one condensed; particulars of the remainder could not be obtained as the parents were not found at the address given. In only one instance was a feeding bottle with a long tube acknowledged.

Fifteen of the mothers were found to go out to work, mostly to casual employments, such as charing and street hawking. Five were out-workers and did box-making, tailoring and nursery shoe-making at home. The sanitary condition of most of the houses was fairly good; notices were served where defects were found.

### INFANTILE TUBERCULAR DISEASE.

Various forms of Tuberculosis caused twenty-eight deaths, a mortality of nearly seven per thousand births. There were ten deaths from tabes mesenterica. All these together with some of the other tubercular deaths were visited by Miss Harris, and as to sixteen of these she reports that four were entirely breast fed, five had cows' milk, four condensed and three patent foods. The father of one infant was phthisical and four of the mothers were similarly diseased. In three instances there was a family history of tuberculosis.

### SUFFOCATION.

The deaths from suffocation (overlaying) numbered thirty-five, one in excess of the previous year.

### REPORT OF THE WORK

DONE BY THE

# Woman Sanitary Inspector,

DURING THE YEAR 1909.

Public Health Department,

Bethnal Green.

To the Medical Officer of Health.

SIR,

I beg to present to you some account of the work done by me in this Borough during the year 1909.

The visits paid were as follows: -

FFS				
To Workshops				 226
After Births				 649
Re-inspections				 548
After Deaths.	****			 253
School notificat	ions,	etc.		 1,037
Special				 207
			Total	 2,920
				(September 1997)

At the beginning of the year there were 143 womens' workshops on my list, but seven of these have since been closed, owing to the continued severe industrial depression. As a rule the workshops are kept in a fair condition, but it was necessary in the early summer to stop the work in one shop while the owner carried out a "spring cleaning." This one shop gives trouble, and needs constant supervision. Overcrowding to a serious extent was found in three other workshops, but was abated on request. Indeed the employers are generally ready to meet the wishes of the Sanitary Authority, and when nuisances exist they are dealt with as they are discovered. The greatest difficulty is the ventilation, and here the employers cannot always be blamed; they see that the means are provided, and do what they can to ensure proper use; but fresh air is often considered "a draught," and windows, etc., are closed as soon as the employer's back is turned. Gas is lighted, too, very often, to warm the room whenever the temperature is below a comfortable degree, thus seriously increasing the impurity of the air. The number of unventilated gas stoves for heating irons continues to decrease, as it is required that flues be provided when they are so found.

### Births.

The number of births notified fell off considerably the year through, until it became known that the Notification of Births Act was to be put in force, when they came in in large numbers. As this was at the beginning of December, however, and about 14 days after the birth are allowed to elapse before the mother is visited, not much work was done in this connection in 1909. Another circumstance had a somewhat unfortunate effect—and this was the very wet weather. It is a common experience that in inclement weather it is difficult to obtain admission; for the recently confined woman is often alone, and probably not feeling very strong is disinclined to open the door to strangers. Whether this was the reason, or not, certainly the number of mothers called on but never found, was exceptionally large.

The visitation of infants disclosed a large amount of poverty and distress; discloses too how very brave and patient many of these poor mothers are. One could fill pages with accounts of their sufferings caused by want of food, and necessary comforts, unemployed husbands, large families, and overwork; and I am quite certain that much suffering, and even fatal results, have been averted by the timely help afforded through this department. When brought face to face with cases of this kind practical help must be the first consideration; for no one in a state of semi-starvation could be expected to listen to and act upon advice. I feel sure that continuously underfed mothers seriously increase infantile ill-health and mortality.

It is not of course meant to imply that every mother visited is so desperately poor, nor that all of them do every thing they should do. Some are careless, some lazy and will not take trouble. But it is exceptional to find a really dirty baby of only two or three weeks old. The mothers seem to start well—but undoubtedly many need keeping up to the mark.

They are, I think, anxious to learn; and that fact, with maybe some lack of confidence in their own methods, makes them so ready to ask advice from neighbours, or from any one who in their opinion, should *know*. If a woman who has had a large family offers advice or opinions, it is eagerly accepted and acted upon—even when such advice has had fatal results to the informant's own children.

There have been only two cases in the year where it was obvious that the mother drank to excess. As a rule there is no indication of anything of the kind. It is an old-fashioned idea that some stimulant is necessary for a nursing mother; but many now profess not to believe this, and many are not able to afford it.

The large majority of the newly-born babies are breast fed; and if statements made by the mothers are trustworthy, it is safe to conclude that they are anxious to nurse their babies, and that very few would be weaned till a year old, were it not that the mothers are unable to nourish their children. The reason nearly always given for hand feeding a baby is that "it was not satisfied," or "the milk failed." Of the infants visited a few days after birth—

318 were found to be breast fed entirely.

I was partly breast fed.

15 were hand fed.

There were also 15 about whom no information could be obtained. The presumption concerning most of these is that they would be hand fed—for nine mothers were in Hospital or Infirmary, two died, and one went to work, leaving the baby with friends at Stepney.

The partly hand fed child had cows' milk, and was being fed with a feeding bottle which had a rubber tube. The mother did not appear to be a particularly clean or careful person, but she *did* appear to love her baby, and realized the dangers of that method of feeding when they were pointed out to her. She promised to obtain a boat-shaped bottle, and to be very careful about its cleanliness. Unfortunately, however, the householder unexpectedly moved, and the mother had to go too, and could not afterwards be traced.

Feeding bottles with rubber tubes were in use for four of the hand fed babies. In each case the mother promised to procure others of an improved shape, and two actually did so. One baby died, and the other was taken by its mother into the Workhouse, and thus lost sight of.

One of our hand fed infants has been a most interesting case. The child was visited at the end of June last, and found to be almost dying. The mother had been visited before, for the two children born previously to this one had died—"wasting." This time, the mother went into the London Hospital for her confinement; and as she was so starved she was not allowed to attempt breast feeding. After my visit milk was obtained for this baby, and in three days the child was perceptibly filling out. Through the generosity of the staff milk was allowed free thence forward till the child was 10 months old, and she grew—though she has never reached the proper standard either of size or weight for her age. Early in October she had a slight attack of Diarrhœa and lost weight. It was

then suggested that if she could have Virol she would get on. Buying Virol at its ordinary price was out of the question—but I wrote to the Virol Company, explaining the need, and asking if the food could be supplied at a rate cheaper than usual. By return of post came, not a price list, but a large jar of Virol (the 2/11 size) free of charge, and the generous offer of more Virol if required for this child, and other supplies for similar cases. Needless to say, it was most gratefully accepted. Three large jars in all were sent for this baby; and I am happy to say that now, though still small, she appears perfectly healthy, and there is no reason why she should not get on. She was visited weekly, and weighed every fortnight, so that she was kept thoroughly under observation.

It was found that two of the newly born babies were being fed on oatmeal, while a fifteen day old child was given a piece of pork to suck, as its mother thought it was hungry.

Condensed milk was used for five of these infants—but in only one case was the use of a cheap brand admitted. Many people seem to think condensed milk more digestible than cows' milk—hence its use.

### Infantile Deaths.

The deaths of 210 infants were referred to me by you for investigation. Visits were paid to the addresses given, and the information obtained was as follows:—

The homes of 92 infants who died from various Diarrhœal diseases, 74 from Diarrhœa and 18 from Enteritis, etc., were visited, and enquiries made as to the method of feeding adopted. The use of feeding bottles with long rubber tubes appears to be decreasing; only five mothers admitted their use.

Of the 74 who died from Diarrhæa, 13 were entirely breast fed; 15 were partly breast fed; 35 were hand fed; 5 who died in hospital were breast fed till they went there; and in 5 instances no information could be obtained, as the mother could not be found.

Ten babies (all over nine months old) had been having much the same food as the rest of the family—one of them was thought to have been upset by fish. Another had been given sheep's brains. One had been fed by the doctor's advice, on patent foods. Eight had lived entirely upon condensed milk (not a cheap brand in any case), and 16 had had cows' milk.

Of those dying from Enteritis and other forms of this disease,

3 were breast fed;
1 partly so—also had oatmeal;
4 lived on cows' milk;
1 had condensed milk;
2 same food as rest of family;

and in 6 cases no information could be obtained—
I family was in the Workhouse, and 2 mothers were away in Asylums. Two of the children had been in the Infirmary for some time suffering from wasting diseases, and one mother was never found at home.

In only one of these cases had a feeding bottle with a rubber tube been used.

Fifteen of these mothers were found to go out to work, most of them only occasionally, as charwomen, hawkers and the like. One had helped her husband manage a public house, and one had a laundry—she and her husband doing all the work, (the husband does the washing). Five of them took work in to do at home, box-making, tailoring, and nursery shoes.

The homes were found on the whole to be in fair condition—some of them surprisingly clean and well kept. Where necessary, notices were served for the abatement of nuisances existing on the premises.

Infantile deaths from Tuberculous diseases referred to me for investigation numbered 16.

3 entirely breast fed till death;

i ,, till it went to Hospital (3 months before death);

5 had cows' milk;

4 " condensed milk;

3 " Patent foods.

Four mothers were consumptive and one father, while in three families other members suffered from Phthisis. One mother was epileptic.

There were two deaths under one year from Rickets. Both infants were hand fed from a few weeks old, condensed milk and patent food were used in both cases.

Two deaths from Hydrocephalus were enquired into; one child was hand fed, and the other breast fed. The mother of this latter child was terribly anaemic.

Enquiries regarding the deaths of three infants from Meningitis shewed that one was breast fed, one had cows' milk and one condensed. The mother of one child had been working as a machinist at a factory before its birth; the mothers of the other two were not industrially employed.

Of the deaths of the other infants no information could be obtained in 10 cases. One mother was in the Infirmary, and two entire families were in the Workhouse.

41 babies were said to have been entirely breast fed.

8 ,, ,, , , partly ,, 9 ,, ,, had cows' milk 5 ,, ,, , had condensed milk 1 baby had both cows' and condensed milk.

There is little to be said about the cases of Measles and Chicken-pox notified from the schools. Incorrect addresses were often given and caused much waste of time. Disinfection was usually declined, and nuisances were dealt with as discovered.

The "special visits" were to cases of Puerperal Fever, notifications sent voluntarily from Brompton Hospital of Tuberculosis patients, and of children at school with that disease, etc.

The inspections of the Sanitary conveniences at the railway stations have been continued. On each occasion these have been found in reasonably good order. They are flushed at intervals by the officials.

The "Cards of Advice" continue to be distributed, and are usually received with an appreciative remark; but they are not kept. Many people hang them on their wall at first, but after a time they disappear, and when enquired after later cannot be accounted for. There is, however, little doubt that they do help to impress the advice given upon the minds of the mothers.

I am, Sir,
Yours faithfully,
A. K. HARRIS.

### DEATHS OF YOUNG CHILDREN.

The deaths of young children aged less than five years numbered 830 and form 37.7 per cent. of the deaths from all causes. This is equivalent to a rate of 46.3 per thousand estimated population of young children.

## ELDERLY PERSONS DEATH RATE.

The number of persons aged over sixty-five who died during the year numbered 508 a proportion of twenty-three per cent. of the total deaths at all ages. This gives a death rate calculated upon the estimated population of elderly persons of 88.6.

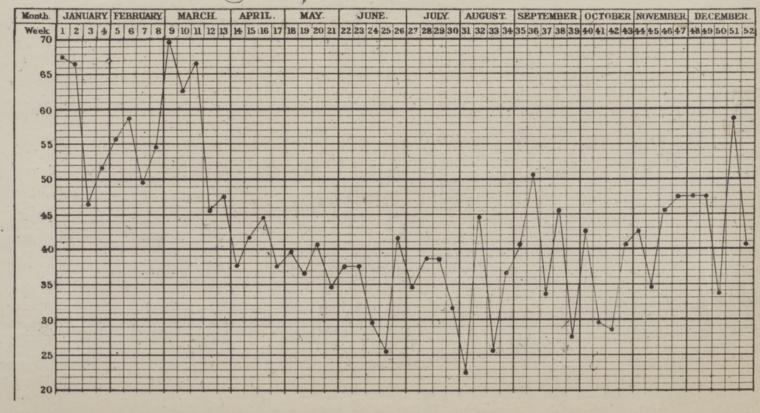
# WEEKLY MORTALITY.

The usual chart shewing the numbers of deaths week by week in the Borough, will be found on the next page. The figures are corrected for deaths in institutions.

# QUARTERLY AND ANNUAL DEATHS AND MORTALITY RATES.

Tables J and K overleaf shew in addition to actual numbers of deaths, quarterly and annual rates of births and deaths and also mortalities from the principal zymotic diseases and from phthisis.

Deaths from all causes.



#### TABLES

					1			Num	ber of De	saths.			
1909		Estimated Population in the middle of 1900.	Births	Deaths. All canses.	Small Pox.	Measles	Scarlet Fever.	Diphtheria.	Whooping Cough.	Typhus.	Enteric Fever.	Pyrexin.	Diarrhosa,
BOROUGH OF BETHNAL GRI	EN:	1	2	3	4	5	6	7	8	9	10	11	12
April 3rd		131,316	1,023	780		49	8	6	10	-	1	-	6
July 3rd	***	131,316	1,014	476	-	12	1	5	16	-	2		6
October 2nd	***	131,316	955	463	-	6	10	1	9	-	-	-	68
Jan. 1st 1910		131,316	977	532	-	12	6	5	5	-	1	-	15
		131,316	4,132	2201	-	79	25	17	40	-	4	-	95
COUNTY OF LONDO	N:-												
April 3rd		4,833,938	30,493	22,873	1	1147	109	230	364	_	59	-	174
July 3rd		4,833,938	80,043	15,479	-	887	109	135	420	-	25	1	142
October 2nd	-	4.833,938	28.861	13,009	-	201	79	110	223	_	26	1	957
Jan. 1st 1910	***	4,833,938	28,150	16,271	1	136	86	131	289	_	36		304
		4 ,833938	117,547	67,682	2	2,324	378	606	1,246	_	146	2	1,577

## J. & K.

							Death R	ates.					
Phthisis	Deaths of Infants under 1 year of age.	All causes,	Principal Epidemic diseases.	Small Pox.	Mensles.	Searlet Fever.	Diphtheria.	Whooping Cough.	Typhus	Enteric Ferer.	Pyrexia.	Diarrhen.	Phthisis,
13	14	15	16	17	18	19	20	21	22	23	24	25	26
71	187	22.3	2.44	-	1.50	0 24	0.18	0.31	-	0.03	-	0-18	2-1
44	112	14.5	1.28	-	0.37	0.03	0.15	0 49	_	0.06	-	0.18	1.3
39	144	14-1	2.87	-	0.18	0-31	0.08	0-27	-	-	-	2.08	1.11
48	142	16-2	1:34	-	0.37	0.18	0.15	0.15	-	0.03	-	0.46	147
202	585	16.8	1.98	-	0.60	0:19	0.13	0.30	-	0.03	-	0.22	1:54
		0											
1,992	3,416	19-0	1.72	0.00	0.95	0-09	0.19	0:30		0.05		0:14	1.65
1.450	2,778	12.8	1.38	-	0.69	0-09	0.11	0.85	_	0.02	0.00	0.12	1 20
1,276	3,137	10.8	1.83	-	0.17	0 07	0-09	0-19		0.02	0.00	0.79	1 06
1,619	3,256	13:5	0.77	0.00	0-11	0 07	0.11	0.20	-	0-03		0.25	1:34
6,337	1,2582	14:0	1.30	0.00	0.48	0.08	0.12	0.26		0.03	0.00	0.32	1.31

# THE PRINCIPAL ZYMOTIC DISEASES.

The deaths recorded as from the diseases included in this group and upon which the zymotic mortality is calculated, numbered 254 against 330 in 1908, a decrease of 76; nearly all the fever and diphtheria deaths occurred in hospitals as will be seen from the following table:—

TABLE L

	Disea	ise.		Deaths at Home.	Deaths in Hospital.	Total.
Small Pox			 ***			
Scarlet Fever			 	***	25	25
Diphtheria		***	 	-4	16	20
Enteric Fever			 	1	3	4
Erysipelas			 	6	3	9
Puerperal Fe	ver				1	1
Measles			 	72	6	78
Diarrhœa			 	67	23	90

This decrease of seventy-six in the total number of zymotic deaths for the year 1909 is also seventy-six below the decennial average of the ten years 1899 to 1908. Table VI in the appendix shews this average to be 330.

The next table M compares the deaths from each of the Zymotic Diseases in the two years 1908 and 1909, from this it will be seen that the decrease in the zymotic mortality is fairly evenly distributed throughout the group:—

TABLE M.

		Dis	ease.		1908.	1909.
Measles				 	 105	78
Scarlet Fever				 	 89	25
Diphtheria				 	 29	20
Whooping Cou	igh			 	 42	37
Enteric Fever				 	 13	4
Diarrhœa				 	 102	90
		-				
		Т	otals	 	 330	254

The death rate from these Zymotic diseases is 1.93 for 1909 against 2'46 for the previous year. The corresponding Metropolitan rates are 1'35 and 1'31.

Table N shews the percentage of deaths from each disease on the total number of zymotic deaths.

Measles	caused	78	deaths,	30.7	per cent.,	or	1 in 3.2	deaths
Scarlet Fever	"	25		9.8		,,	10.1	,,
Diphtheria	"	20	,,	7.8	,,	,,	12.7	,,
Whooping Cou	igh,,	37	"	14.5	,,	,,	6.8	,,
Enteric Fever	"	4	,,	1.6	"	,,	63.5	,,
Diarrhœa	"	90	,,	35.4	"	"	2.8	"

The following figures extracted from the last published report of the Metropolitan Asylums Board will be read with interest although they are a year old. This table shews the total number of patients admitted into the Metropolitan Asylums Board Hospitals from all parts of London during 1908, with the diseases from which they were suffering, and the percentage mortality in respect of each disease.—

Disease.	Admissions	Discharges	Deaths.	Mortality per cent.
Scarlet Fever	19,629	20,468	520	2.56
Diphtheria	5,230	4,679	507	9.73
Enteric Fever	509	394	80	16.28
Typhus Fever	2	2		
Cerebro-spinal Meningitis	3	1	1	40.00
Other diseases (cases of mistaken diagnosis)	2,594	2,437	147	5.68
Total admissions	27,967	27,981	1,255	
1907	32,169	29,502	1,405	

# NOTIFICATION OF INFECTIOUS DISEASE.

The total number of notification certificates received at the office was 1,036, three of these referred to addresses outside Bethnal Green and were of course forwarded to the proper Sanitary Authority. Seventy-six (7.3 per cent.) were duplicates, so that the actual number of cases of infectious disease reported and

dealt with was 960, a rate of 7.3 per thousand on the estimated population. Table III in the appendix indicates the number of persons suffering from each disease; it also shews the sub-district in which such persons resided, and the number (732) of those removed to hospital.

In the early part of March the London County Council made an order with reference to cerebrospinal fever further extending the period during which this disease is notifiable from the 13th of March, 1909, to the corresponding date in 1910. This disease has now been notifiable since March, 1907. On April 20th the London County Council issued another order, duly approved by the Local Government Board, applying the notification clauses of the Public Health (London) Act, 1891, to the diseases:—Glanders, Hydrophobia and Anthrax in man.

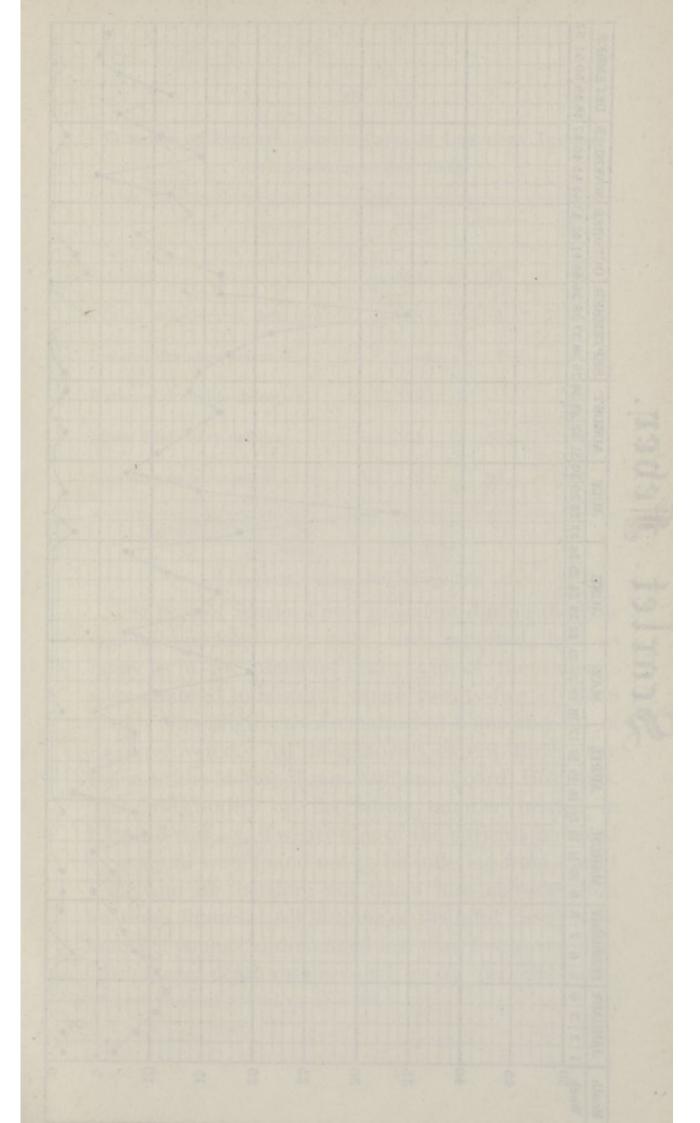
In fourty-four instances information was received from one of the Medical Superintendents of the Metropolitan Asylums Board Hospitals, to the effect that the diagnosis as stated on the notification certificate was incorrect, a proportion of six per cent. on the whole. This figure of error is about the average for all the Metropolitan Boroughs.

Table O gives full details of all the notifications.

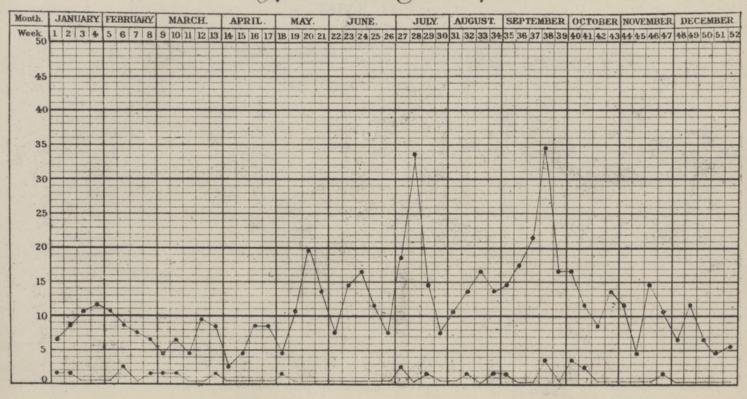
TABLE O.

Nata	are of	Disease,		No. of certificates received.	Duplicate certificates received.	Actual number of cases reported.	Treated at Home.	Removed to the M.A.B. Hospitals.	Treated at other Hospitals and Infirmary.	Diagnosis incorrect.
Small Pox				 1	_	1	-	1	_	
Diphtheria				 176	2	174	8	160	6	15
Membranous Co	roup			 9	-	9	2	5	2	_
Scarlet Fever				 578	13	565	9	553	3	29
Γyphus do.			9	 -	- 3	-	-	_	_	_
Enteric do.				 87	4	33	2	13	18	
Continued do.				 1	-	1	-	-	1	_
Relapsing do.				 -	-	-	-	-	-	_
uerperal do.	***			 7	-	7	-	-	7	_
Erysipelas	***			 221	57	164	_	_	_	_
Cerebro Spinal	Meni	ngitis		 5		5	1	_	4	_
Anthrax		•••		 1	-	1	-	-	1	6-
Tot	als			 1,036	76	960	22	732	42	44

44



1909 Scarlet Feven.



Condition of Premises wherein Cases of Infectious Disease have occurred during 1909.

	Scarlet Fever.	Diptheria.	Enteric Fever.
Satisfactory	322	93	5
W.C.'s or apparatus defective	28	6	-
Internal drainage defective	-	1	
External drainage defective	12	-	-
Minor Insanitary defects	171	52	7
Single room tenements	42	23	1

#### SCARLET FEVER.

Death 25. (Decennial average 25).

The type of Scarlet Fever prevalent during the year was mild and only 565 cases were reported, half as many as in the previous year; 556 of the sufferers were removed to hospital where twenty-five of them died. Nine slight cases remained at home and all of them recovered. All the removals except three were taken to the Metropolitan Asylums Board Hospitals. The case fatality on the whole number treated in hospital was 4.5. Twenty nine of the patients removed to hospital were found not to be suffering from scarlet fever, and are therefore not taken into consideration in these figures. All but one of the fatal cases were amongst young children aged less than five years. The scarlet fever death rate is equal to 0.2 per thousand, whilst that of London is 0.08.

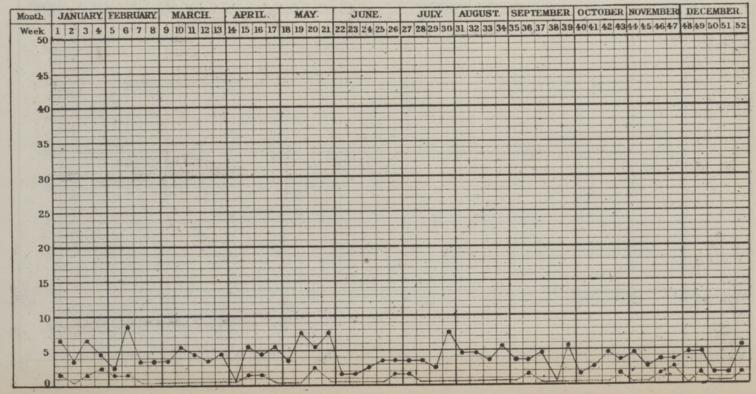
From the North-East sub-district 260 cases were reported and 350 from the South-West. The Inspectors report that the homes of 322 of the patients were in a fairly satisfactory condition, but in twenty-eight instances the W.C. or the apparatus connected therewith, was found to be defective. The drainage was leaky in twelve instances and minor insanitary defects were noted in seventeen. Forty-two persons were removed from single room tenements.

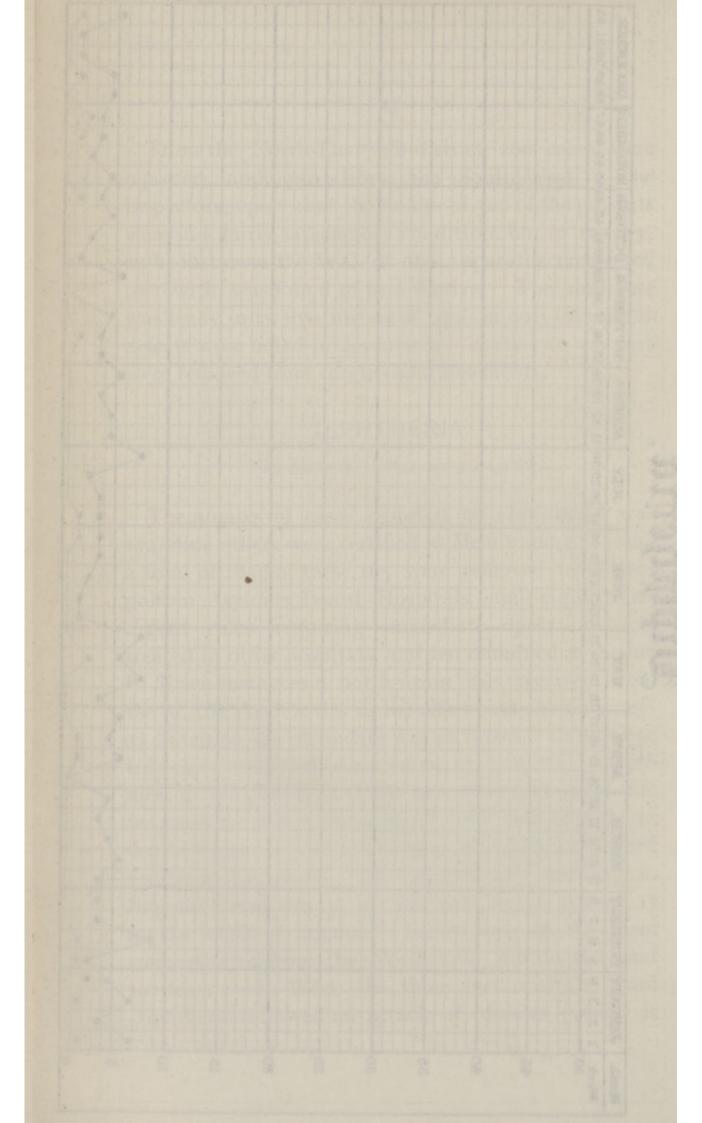
#### DIPHTHERIA.

Total deaths 20. (Decennial average 39).

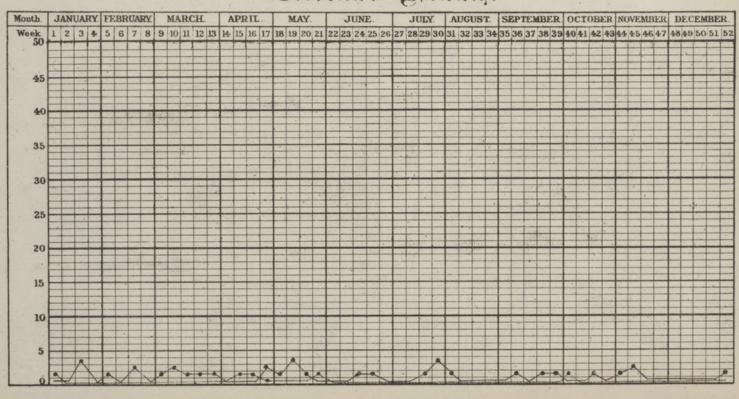
The number of cases reported as Diphtheria was 174, nine others were certified as Membranous Croup, a total of 183; of these 165 were removed to Metropolitan Asylums Board Hospitals, and eight other urgent cases requiring immediate operation were treated in other hospitals, and ten remained at home. In fifteen instances a notification was received from the M.A.B. Authorities to the effect that the diagnosis as stated on the certificate was incorrect. Of the 158 true cases of Diphtheria treated in hospital, sixteen died, a case mortality of ten per cent. Four of the ten cases treated at home died. All the Diphtheria deaths except two were amongst young children aged less than five years. The Diphtheria mortality in Bethnal Green was .15 per thousand living against .13 for the whole of London. Eighty-two of the cases were reported from the North-East sub-district and 101 from South-West. In three instances the fatal Diphtheria followed an attack of Measles (which is

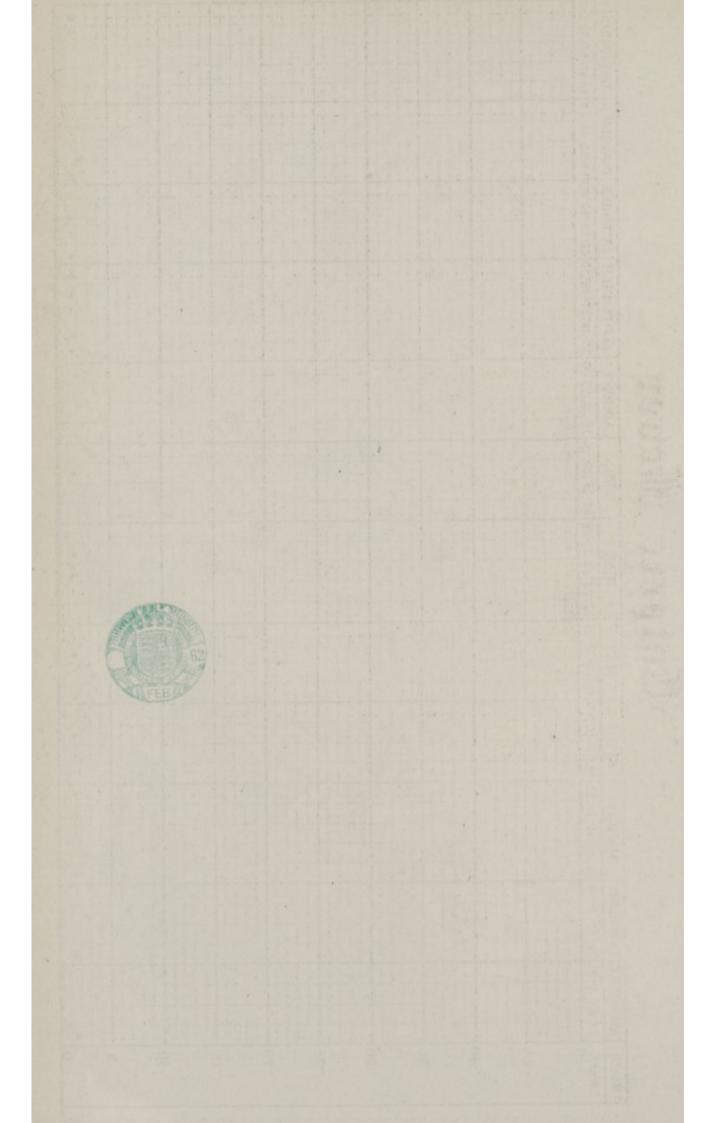
# 1909 Diphthenia.





1909 Enteric Feven.





not a notifiable disease) all three cases however were quite properly reported to me, as required by Sec. 55 of the Public Health (London) Act, 1891, I therefore classified the deaths under the heading of the notifiable disease.

The Inspectors report that in ninety-three instances the sanitary condition of the patient's residence was satisfactory, in twenty-eight the W.C. or the fittings thereof were out of order, and minor insanitary conditions necessitating notice were found in fifty-two. Twenty-three patients were removed from single room tenements. Throat swabs from twenty-three patients were submitted to the Clinical Research Association at the request of medical practitioners. In eight instances the characteristic organism was found, but in fifteen the result was negative.

### ENTERIC FEVER.

Deaths 4. (Decennial average 15).

Thirty-three persons were notified as suffering from Enteric Fever and one other as continued fever. Thirteen of these patients were removed to M.A.B. Hospitals, eighteen were treated in general hospitals and two remained at home where one of them died; three of the hospital patients also died, a case mortality on the admissions of 9.67 per cent., against 11.8 for the whole of London.

The sanitary condition of the houses of nearly all the Enteric Fever patients was remarkably good, notices for even minor defects were requisite in seven cases only. One patient was removed from a single room tenement. The blood of thirteen patients was examined at the request of medical practitioners; in eight instances a positive result was obtained, but in the other five the reaction was negative.

Six of the patients had eaten fried fish prior to the onset of the illness, two had partaken of shell fish, and two others of watercress.

#### SMALL POX.

No death (decennial average 7).

One patient was certified as suffering from smallpox and was removed to hospital, but as it was found that he had chicken-pox he was promptly sent home again.

### WHOOPING COUGH.

Deaths 37 (decennial average 56).

All these deaths except one were amongst young children aged less than five years, a mortality on the estimated population of young children of 2.0.

# DIARRHŒAL DISEASES.

Deaths 90 (decennial average 113).

Various forms of acute or infective diarrhœa caused ninety deaths, all with the exception of 20 amongst young infants; as these have been dealt with under the heading of infantile mortality they call for no further remark. Eighteen of the deaths were amongst young children aged between one and five, but only two adults died from diarrhœa.

The death-rate on the whole population is 0.68 against 0.33 for the County of London.

#### MEASLES.

Deaths 78. (Decennial average 75).

In eighty-one instances Measles was certified as the primary cause of death, in three of these the disease was followed or complicated by Diphtheria which proved fatal; in two other instances children had been under treatment for some form of Tuberculosis before they contracted measles. I have preferred to classify all these five deaths under the heading of the more serious disease.

Altogether 599 cases of Measles were reported from schools, but forty-five of the addresses given were found to be incorrect. In 137 cases no doctor was in attendance, so that it is possible that the children had some disease other than measles. Disinfection was invariably offered, but was allowed in fourteen instances only. One school (Mowlem Street, Class Room A, Infants), was closed owing to the prevalence of measles, and was disinfected at the request of the Managers.

# CHICKEN POX.

Two-hundred-and-thirty-five children were reported from various schools to be suffering from Chicken Pox, the disease was very mild and calls for no special remark.

# DISEASES OF PARTURITION.

Seven cases of Puerperal Fever were notified; all the sufferers were removed to hospital where six of them recovered. Twelve women died from one or other of the diseases or accidents incidental to or associated with childbirth; two of these had heart disease, one Phthisis and another Pneumonia. Three women had Placenta Prævia with hæmorrhage before the birth of the child and two hæmorrhage afterwards. One woman had rupture of the uterus, one convulsions and two died from exhaustion—one of them after a miscarriage.

#### ERYSIPELAS.

The actual certificates received numbered 221, but fifty-seven of them were duplicates. This large number is accounted for by the fact that many of the sufferers were removed to the Infirmary on the certificate of the district medical officer and re-certified by the medical superintendent. Erysipelas cases are not accepted by the Metropolitan Asylums Board Hospitals, and general hospitals object to receive them on account of their infectivity to operation cases or open wounds. Seven of the 164 Erysipelas cases died in the Infirmary, two in the London Hospital, and one at home.

# TUBERCULOSIS.

The various forms of disease associated with the presence of the tubercle bacillus caused 272 deaths, over twelve (12.38) per cent. of the total mortality from all causes and equal to a rate of 2.07 per thousand population at all ages.

The deaths from Phthisis or consumption of the lungs numbered 195, and are equal to a rate of 1.48 per thousand population at all ages, as against 1.31 for the whole of London.

Fifty-eight of the seventy-seven deaths from other forms of tuberculous disease were amongst young children aged less than five years, a mortality on the estimated population of young children of 3.2 per thousand living.

Of the infants under one year, eight died from tubercular meningitis, ten from tubercular peritonitis and nine from tuberculous affections of bones and joints.

Ten samples of sputum were examined at the request of medical practitioners, but in only one instance was a positive result obtained

# NOTIFICATION OF TUBERCULOSIS.

In April a letter was received from the London County Council with reference to the voluntary notification of phthisis now in operation in nineteen of the Metropolitan Boroughs and in the City of London. Enquiry was made as to whether the Council would invite voluntary notification of Phthisis in persons other than paupers in extension of the recent regulations made by the Local Government Board requiring the notification of cases of pulmonary tuberculosis in Poor Law Institutions, etc.

This question had been before the Committee on several occasions previously, but the matter was again fully discussed and I presented a report on the matter. Judged by the average results attained in the nineteen Boroughs referred to in the letter of the London County Council the practical utility of any system of voluntary notification is so problematical, that the Committee recommended the Council to inform the County Council that in their opinion the only satisfactory method of notification of phthisis must be based on a compulsory system embracing the whole County of London. The Council adopted this recommendation.

In November a letter was received from the Stepney Borough Council with reference to the Public Health (Tuberculosis) Regulations, 1908, and to a suggestion of the Local Government Board that the Council should adopt a general system of voluntary notification of Pulmonary Tuberculosis. The Stepney Council expressed the opinion that if sanatorium treatment were available, the adoption of voluntary notification could be successfully carried out, and sought the support of this Council to representations that had been made to the Local Government Board to allow the Metropolitan Asylums Board to use their vacant isolation hospitals for the reception of consumptive persons for sanatorium treatment.

The Committee however was still of opinion that compulsory notification of Phthisis was properly the first step to be taken in the treatment of the disease from the public health standpoint and the Stepney Borough Council was informed accordingly.

From the date of the coming into force of the Public Health (Pulmonary Tuberculosis) Regulations, 1908,

it had been felt that some printed form of advice should be issued to sufferers both for their personal welfare and for the protection of the healthy; to this end a draft notice was prepared and presented to the Committee on the 10th March, and was approved by them, for printing and circulation throughout the Borough. The notice reads as follows:—

METROPOLITAN BOROUGH OF BETHNAL GREEN.
PUBLIC HEALTH COMMITTEE.

#### PREVENTION OF THE SPREAD OF CONSUMPTION.

Consumption is infectious, but if proper precautions are taken, the risk of communicating the disease to healthy persons is very small.

The mucus or phlegm coughed up by the patient contains the germ of the disease and the greatest care must be taken that this is disinfected or destroyed. This phlegm is not harmful so long as it is moist, but if allowed to become dry it gets blown about as dust and finds its way into articles of food or may get drawn with the breath into the lungs.

For this reason persons suffering from consumption should be most careful not to spit on floors or places where other people walk. A special spitting cup should be provided either lined with paper or containing water. This spitting cup should be emptied into a clear fire or down the W.C. Out of doors a pocket handkerchief may be used, but all handkerchiefs so soiled should be boiled for at least five minutes before being washed.

The room in which a consumptive patient lives should be well ventilated, thick curtains should be avoided and as much fresh air and sunlight as possible admitted. An open window day and night is beneficial. The floors should be kept clean and all dust and flue carefully removed. If possible consumptive persons should sleep in rooms by themselves; mothers who are consumptive should not suckle their children.

A room which has been recently occupied by a consumptive person will be disinfected free of charge on application to The Public Health Offices, 2, Paradise Row.

By order of the Public Health Committee, GEORGE PADDOCK BATE, M.D., Medical Officer of Health.

The notice was also printed in the form of an unobtrusive pocket card, that sufferers might conveniently carry with them.

In April the London County Council made a request to be supplied with a weekly list of the cases notified under the Public Health (Tuberculosis) Regulations, 1908, and this has been done.

# NOTIFICATION OF TUBERCULOSIS BY POOR LAW OFFICERS.

The following notes on the Inspectors' reports of cases of Tuberculosis visited by them are from the pen of Dr. Edgar Taunton, Deputy Medical Officer of Health for the Borough:—

During the year 1909 there were 297 cases notified as Pulmonary Tuberculosis.

241 from the Bethnal Green Infirmary and Workhouse.

44 from their homes.

12 from other Institutions.

297

17 of the 44 cases of home notifications have since been removed to the Infirmary. 258 cases were under treatment in the Infirmary during the year.

One of the 297 cases notified proved on post-mortem examination to be not a case of Tubercle but Lobar Pneumonia, so it is excluded from the following figures.

Of the 296 cases of Pulmonary Tuberculosis 105 (35%) have since died. Of the 257 Infirmary cases 97 (37%) have also died. (92 died in the Infirmary; 5 would not stay in the Infirmary and died at home). Of the 27 cases that remained at home 7 (38%) have since died. Also one girl of 6 years died in another Institution.

Of the 257 Infirmary cases 112 (43%) left the Infirmary once or more than once. 41 were admitted twice or a greater number of times.

34 cases were admitted to the Infirmary twice.

5	,,	,,	"	,,	three times.
1	"	,,	,,	,,	four times.
1	,,	,,	,,	,,	five times.

Among the cases that left the Infirmary were 14 that were transferred to other Institutions for treatment. Three cases were admitted to the Infirmary from other Institutions.

Four of the 296 cases were girls, three being six years of age and one being 13 years of age. 64 were undergoing treatment at other Institutions.

The notified cases belonged to the following trades:-

Barmaids		 2	Caretaker		1
Barmen		 3	Carmen		4
Bon-bon maker		 1	Cats meat seller		1
Book-folders		 2	Chair makers		3
Boot and shoe wo	rkers	 18	Charwoman		1
Box makers		 11	Clerks		2
Brass finisher		 1	Coachman		1
Brush worker		 1	Coalheaver		1
Bus conductor		 1	Cooper		1
Butcher		 1	Dealers		2
Cabinet makers		 7	Domestic servants		4
Cab drivers		 2	Fancy feather worker	s	1

Fireman			1	Rag sorters			4
Fish curer			1	Railway porter			1
Fish porters			2	Road sweeper			1
French polishers			4	Shoemaker			1
Gilders			2	Sieve maker			1
Glass beveller			1	Stick makers			2
Hairdresser			1	Stone mason			1
Hawkers			6	Tailoring			. 10
Hosier			1	Tinsmith			1
House wives			13	Toy maker			1
Labourers			11	Umbrella maker			1
Lamplighter			1	Waitress			1
Leather case mal	ker	*	1	Waterproof make	er		1
Orderly boy			1	Wood carvers an	d turi	ners	5
Packers			3	Wood choppers			2
Painter			1	*No information			136
Paperer			1				
Porter			1				297
Printers			4			-	

#### SEX DISTRIBUTION.

	No.	of Cases.	Percentage of Deaths.
Males		205	36.6%
Females		92 .	32.6%

At the time of their admission to the Infirmary about 44 per cent. of the cases were in such an advanced stage that no permanent benefit could be hoped for from any kind of treatment whatever.

Of the 112 cases that left the Infirmary 80 per cent. had derived improvement, 14 cases had considerably improved, 12 per cent. were in the same state as on admission, and in 8 per cent. the signs had advanced.

<sup>\*</sup> Most of these were in the Infirmary at the coming into operation of the Order, and we have no information as to occupation.

I am indebted to the Medical Superintendent of the Infirmary, Dr. Potts, for his courtesy in allowing me access to the records of his cases for the purpose of this report.

Taking into consideration the large number of patients who, at the time of their admission to the Infirmary for treatment were beyond all hope of permanent improvement from any kind of treatment whatever, the proportion of 43 per cent. who developed a restless tendency and left the Infirmary-together with the fact that a similar percentage of the 14 cases transferred to other Institutions for treatment may have shown a similar tendency—indicates the wellknown fact of the marked propensity of cases of Pulmonary Tuberculosis to discontent and frequent change. This tendency is liable to considerably diminish the benefit derivable from treatment in Institutions such as Sanatoria, Hospitals and Infirmaries; nevertheless the educational advantage of even a temporary residence in such in Institution may prove of great value both during the patient's stay and after departure from it, to himself and his family. No amount of verbal instruction given to a patient can ever teach the necessary rules of Hygiene so thoroughly as a practical demonstration of these rules in a well-administered Institution.

If notification is to be valuable from a Public Health point of view it is of the utmost importance that the cases of Pulmonary Tuberculosis shall be diagnosed in the very early stage of the disease. Some steps might then be taken to induce the patients to secure

immediate admission to a suitable Institution where they would receive both treatment and instruction. Only by prompt treatment of early cases and by diffusion of knowledge of the means of preventing its spread can real progress be made in dealing with such a ubiquitous disease.

Early cases are curable in a very large percentage of instances. When one examines great numbers of cases post-mortem one is struck by the considerable percentage that present signs of old healed tubercle. At an Institution for the treatment of mental diseases where almost all of the patients came from an unhealthy manufacturing district, about 50 per cent. of the cases on admission presented recognisable signs of either active or obsolescent tubercle of the lungs. When a census was taken of the patients after six months treatment under very favourable conditions, less than 10 per cent. had signs of active tubercle. Both facts were verified post-mortem, for while upwards of 50 per cent. presented cicatrices of healed pulmonary tubercle, less than 10 per cent. had signs of tubercle in the lungs of such a nature that one would have been justified in registering Pulmonary Phthisis as the cause of death.

With a view to securing diagnosis of early cases the Public Health Committee provide for the gratuitous examination of the sputum of suspects. It is highly desirable that this provision should be generally remembered by the medical profession in Bethnal Green and especially in the case of the poorer class of patients, who not only would be unable to pay a fee for a bacteriological examination but are particularly liable to

contract the disease as the result of malnutrition, the less efficient ventilation of their rooms, the more limited circulation of air about their dwellings, etc.

Even if no immediate benefit should be derived from the notification of poor-law patients the statistics that will be collected and information that will be thus obtained, will undoubtedly prove valuable, and it is desirable as soon as possible to ascertain the percentage of the notified cases that could be either permanently or for a long time restored to strength and useful work, by prompt treatment in a suitable Institution.

Whenever any far reaching scheme of Poor Law reform may be under discussion, and also at any time when concerted action may be proposed by Public Health Authorities, an approximate estimate of the number of probably recoverable cases would be of considerable value.

In the meantime appreciable good might be done in inducing the sufferers from Pulmonary Tuberculosis, diagnosed during its earliest stages, to undergo immediate treatment, preferably in an Institution. This could be done either by the gratuitous efforts of a non-official committee working in conjunction with the Sanitary Authority, or by Officers of the Sanitary Authority or of the Guardians. The members of such committee or such officers could bring to the knowledge of the patient suitable Institutions for his treatment, advise and assist him to secure his admission thereto and meanwhile instruct the patient and spread information among his relatives as to the means of securing the

most favourable mode of life to himself and of diminishing the risk of infection of his relatives to the lowest possible point, while the Sanitary Authority would disinfect the rooms and take all such preventive and remedial steps as lie in its power.

The notification however of Poor Law patients only is quite insufficient. Not until the compulsory notification of Pulmonary Tuberculosis shall have been made general, and suitably equipped institutions for its treatment rendered available to all recoverable cases will adequate steps be practicable for checking the disease effectually.

So long as slums exist, and the homes of the poor are overcrowded, and a large percentage of working people are insufficiently remunerated to enable them to obtain sustenance necessary for themselves and their families—so long will all attempts to eradicate the disease certainly and utterly fail.

EDGAR TAUNTON, M.B.,

Deputy Medical Officer of Health
for Bethnal Green.

# CANCER.

The various forms of cancerous disease caused 119 deaths, all the sufferers except two were over 25 years of age. The estimated number of adults over this age living in Bethnal Green is 57,300, on this number the cancer mortality is at the rate of 2.0 per thousand.

The following list shews the organs and parts of the body chiefly affected by malignant disease:—

Tongue and Mouth	 	10
Larynx and Œsophagus	 	12
Stomach Liver and Pancreas	 	33
Intestines	 	12
Rectum	 	9
Female Organs of Generation	 	17
Female Breast	 	9
Prostate and Male Bladder	 	6

# INQUESTS.

The Coroner held 275 inquests at the Court in Church Row; eighty of these were on persons who had died as the result of accidents, in sixteen a verdict of suicide was returned and in three of homicide.

#### SUICIDES.

Five men and one woman hanged themselves. One man and one woman cut their throats. Three men and one woman took poison. Two men drowned themselves. A boy of sixteen had his head cut off on the railway near Devonshire Street Bridge, and another young fellow threw himself out of window.

### HOMICIDE.

Three verdicts of Manslaughter were returned:—A newly born infant was found in Regent's Canal, it had bleeding on the brain, the result of injury. A charwoman who was assaulted died from injuries to the head. A man who suffered from heart disease died suddenly; he was wounded in the face by another man in self defence,

# DEATHS AFTER THE ADMINISTRATION OF ANÆSTHETICS.

These numbered three:—A bricklayer, aged 63, upon whom the operation of Gastro-enterostomy was performed. A tubercular child aged nine who had an abscess in the neck opened. An infant aged seven months who was operated upon for the removal of a nævus.

## UNCERTIFIED DEATHS.

Two deaths were registered without medical certificates. They were:—The wife, aged 50, of a Hebrew teacher, she was said to have died from heart disease. The thirteen months old daughter of a firewood cutter, from measles.

# CUSTOMS AND INLAND REVENUE ACTS, 1890 to 1903.

Only two certificates were applied for; the premises were:—

Sutton Model Dwellings, James Street. Blocks A, B, C, D, E, F, G, H; each block contains 20 tenements, 160 in all. The certificate was granted.

Cambridge Buildings, Darling Row. Nos. 29 to 44; 17 tenements. Sanitary condition unsatisfactory. Certificate refused,

# NOTES ON THE HOUSING AND TOWN PLANNING ACT, 1909,

by Edgar Taunton, M.B., D.P.H., Barrister-at-Law, Deputy Medical Officer of Health.

Although this Act will not effect all that Sanitary Scientists could have desired, it contains provisions that may be useful.

Since confirmation of a reconstruction scheme and authority to purchase land compulsorily under section 24 will be effected by order of the Local Government Board without confirmation by Parliament, expedition may fairly be expected. An administrative department having technical experience in housing reform presumably representing the interests of public health, with knowledge of sanitary requirements, may prove more rapid and certain than a heterogeneous Parliament of prolix deliberations and representative of various interests. The termination of the application to the Courts of Summary Jurisdiction for Closing and Demolition Orders, which will follow upon sections 17 and 18, and the making of such Orders by the Local Authority will expedite procedure considerably. The right of the aggrieved owner to appeal is a necessity, and as the appeal is to be to the Local Government Board, it is presumable that there will be considerably less prospect of success upon technicalities than there would be before a Court of Summary Jurisdiction.

It is probable that public health will be the factor that will have the greatest weight with the Board. If this prove to be so, it may follow that appeals may not be lodged in a great percentage of cases, as soon as the attitude of the Board shall have been demonstrated.

#### PART I.

Section 1 puts in force throughout the whole country part 3 of the Housing Act of 1890, enabling local authorities to provide houses for the working classes.

Section 2 and Schedule I by empowering the local authority, with the confirmation of the Local Government Board to purchase land compulsorily, may lead to the execution of many schemes which would not have been carried into effect if a Provisional Order with confirmation by Parliament were still necessary.

Section 3. Loans may now be made for any period up to 80 years by the Public Works Loan Commissioners and by extending the burden over a longer period, together with a condition that only the lowest rate of interest allowed for the time being for loans out of the Local Loans Fund shall be payable, the number of schemes that will be practicable may be greater than under previous Acts.

Under Section 9, sums that have not been applied to the purposes for which they were bequeathed may be followed and brought into use.

Section 14. The raising of the rental to £40 in London, £26 in a Borough or Urban District with a population of 50,000 and £16 elsewhere, of a house to which the implied condition that on taking it the house is reasonably fit for human habitation shall attach, also (Section 15) that the landlord shall maintain it in this condition during the holding, will be valuable in association with the means of enforcing the condition on the part of the Local Authority by having the required work done in default of the landlord and recovering the expenses as a civil debt. Many houses may so be dealt with where it would be almost impossible to convince a Court of Summary Jurisdiction that the house is in such a state as to be injurious or dangerous to health and unfit for human habitation.

Now that by sub-section 7, landlord means any "letter" the Council will have a wider field to choose from in deciding as to which one is most worth powder and shot.

In order that the condition shall not be implied under Sections 14 and 15 the following three conditions must all be present:—

- (a). The house or part of a house is let for a term of 3 year or more than 3 years.
- (b). There is an expressed condition that the Lessee shall repair.
- (c). Neither party can terminate the contract before the expiry of three years.

Section 16. It is uncertain whether, in order to include owners, existing Bye-Laws will require amendment or not, before the Bye-Laws can impose any duty upon them.

Section 17 (3). The service of notice upon every Owner will involve considerable work of a nature not suited to the Health Department.

Section 21, restricts the power of a Court of Summary Jurisdiction to extend time.

\* Section 35, exempts from Inhabited House duty any house occupied solely for the purpose of letting lodgings to persons of the working classes at a charge not exceeding 6d. a night for each person, upon the production of a certificate to the effect that the house is solely constructed and used to afford suitable accommodation for the lodgers and that due provision is made for their sanitary requirements.

Section 38 provides for joint action by Local Authorities where the Local Government Board are satisfied that such joint action is expedient generally or in a special case, and the Board may by Order make provision for the purpose.

Section 39 by providing that on any appeal the Local Government Board may state a special case upon a point of law, and shall do so when ordered by the High Court, scarcely opens the door for frequent litigation, as the initiation will lie not with the litigants but

<sup>\*</sup> The meaning of Section 35 is somewhat obscure, a common result of legislation by reference. It is not quite clear what Medical Officer of Health is required to give the necessary certificate in London. The London County Council and their Officers have always supervised and regulated Common Lodging Houses in the Metropolis, and have resented any interference by Officers of the Borough Councils. The Inland Revenue Officers have decided to require the certificate of the Local Medical Officer of Health before granting relief of taxation. Several applications have been made to me, but in no instance have I been able to grant the certificate on first inspection. The fact that the London County Council Inspector is satisfied with the sanitary condition of the premises in no way influences my opinion and an informal notice has followed each application. I have no power to enforce my requirements, but I do not grant the certificate until they are complied with.—G.P.B.

with the High Court or the Local Government Board, and the provision in sub-section ?, that the Local Government Board may, before considering any appeal, require the deposit of such sum as the Board's rules may fix to cover the cost of the appeal, is a very useful safeguard.

Section 44, secures the saving of ancient sites and objects of archæological interest.

Section 49. The word "owner" for the purpose of part 4 of the Principal Act, includes lessees and mortgagees, except persons entitled to the rents under a lease—of which the original term was less than 21 years. This extended meaning of the word "owner" cannot be applied generally to the Act of 1909.

#### PART II. TOWN PLANNING.

By Section 54, a Town Planning Scheme of a Local Authority shall not have effect unless approved by the Local Government Board and when so approved shall have effect as if enacted.

A Town Planning Scheme may be prepared as respects land in course of development, also land likely to be used for building purposes.

All general provisions under Part 2 are to be laid before Parliament as soon as may be.

#### PART III.

This provides for the appointment of Medical Officers of Health and Public Health and Housing Committees for Counties. Among other things it provides that the Medical Officer of Health of a district shall give reasonable information to the County Medical Officer of Health and that if any difference arise between the Medical Officer of Health for the County and the Clerk or Medical Officer of Health of a District Council, it shall be referred to the Local Government Board, whose decision shall be binding and final.

The County Council is also empowered to promote and assist co-operative societies interested in the housing of the working classes.

#### PART IV.

This part provides inter alia that, when any scheme or order under the Housing Acts or Part 2 of this Act authorises the acquisition or appropriation of any common, open space or allotment, it shall be provisional only until confirmed by Parliament, except under certain specified conditions favourable to the public.

The striking feature of the Act is the great amount of authority with which it invests the Local Government Board. The Board becomes the final Court of Appeal for the purposes of the Act, with the exception of the provision in section 39.

Opinions may differ as to the desirability of placing an Administrative Department in such a position, but the difficulties which in practice beset the thorny path of the housing reformer no doubt justify extreme attempts to smooth the way.

As examples of the power delegated to the Local Government Board may be mentioned

- Section 2. The Board may authorise the compulsory acquisition of land.
- Section 5. Its decision as to payment and application of purchase money or compensation shall be final and conclusive.
- Section 10. It may enforce the exercise by a local authority of its powers after receiving complaint from certain Councils or four inhabitant householders.
- Section 11. It may order schemes to be carried out by the local authority.
- Section 14. It may sanction a re-construction scheme and authorise the compulsory purchase of land without confirmation by Parliament.
- Section 37. It may require the local authority to make a report on any crowded area.
- Section 41. It may prescribe forms and dispense with advertisements.
- Section 44. It may revoke bye-laws unreasonably impeding the erection of houses for the working classes.

The Board's decision shall be final under

Section 54, on the point whether land is likely to be used for building purposes.

Section 57, on the point whether a town planning scheme has been complied with or contravened.

The Board will decide appeals under

Section 17, for the determination of a Closing Order.

Section 18, against a Demolition Order.

It has power of entry under Section 36.

Under Section 61 the Local Government Board may make or execute a town planning scheme on default of a local authority.

It will be seen that the new Act may effect quite considerable advantages if the Local Government Board actually employs the powers of compulsion and initiation delegated to it, otherwise the results cannot be expected to reach very far in the direction of the extinction of slums, and the provision of sanitary homes for the working classes.

Section 17 does not go far enough towards the extinction of underground sleeping rooms. The prohibition of the erection of back to back houses in section 43 is good, but it seems a pity to pick out a few things for the ban, while the jerry builder, without contravening the London Building Act (1894), can still put together erections that violate the elementary principles of sanitation.

The Act does not extend to Ireland.

The Act is like a complicated puzzle of multitudinous references to previous enactments; it would have been much simpler to codify all the Statutes upon the subject of the housing of the working classes, re-enacting verbatim the desirable provisions, adding the amendments and new provisions in suitable order, finally repealing specifically all the previous statutes.

EDGAR TAUNTON,

Deputy Medical Officer of Health,

#### HEALTH VISITORS.

On the 4th of September the Local Government Board issued the Health Visitor's (London) Order, 1909, made under the County Council (General Powers) Act, 1908. This Order makes regulations as to the qualifications, mode of appointment, tenure of office, duties, etc., of Health Visitors, and was accompanied by an explanatory circular letter from the Board which, inter alia, states that the Board consider the salary paid the officer should not be less than £100 per annum.

## NOTIFICATION OF BIRTHS ACT, 1907.

On the 18th of October the Local Government Board compulsorily put in force this Act within this Borough and the Boroughs of Camberwell, Chelsea, Hackney, Hammersmith, Lewisham, and Wandsworth. The Act came into force in December last and will not be reported upon until next year.

#### SANITARY STAFF.

I have much pleasure in again placing upon record my warm appreciation of the good work accomplished by your Sanitary Staff; the Inspectors are capable and energetic, and they carry out their (sometimes disagreeable) duties courteously and with a minimum of friction. The Chief Inspector is an expert letter writer and manages to get his notices obeyed with very little help from Old Street Police Court. Full details of the work of the department will be found in Mr. Foot's report, a copy of which accompanies this.

I am happy to say that during the past year there has been less illness amongst the members of the Staff, but the Sanitary condition of the Paradise Row Offices does not improve, and we are all looking forward to healthier and more comfortable quarters in the new building, now approaching completion.

I have the honor to be
Sir and Gentlemen,
Your very obedient servant,
GEORGE PADDOCK BATE.

#### APPENDICES.

HOME OFFICE, 3rd January, 1910.

DEAR SIR,

EMPLOYMENT OF MARRIED WOMEN.

You will remember that it was arranged that the enquiry should extend to the births, etc., recorded in 1908, and hence that in order to complete the records of the first year of life it could not be concluded before the end of 1909.

In the Home Office circular letter of May 10th, 1907, an outline form of tables for summarising the results was given, and in the further letter of December 17th, 1907, it was stated that detailed tables amplifying that outline, might be suggested later.

The data collected will admit of endless permutations and and combinations, each yelding important results, and for the purposes of broad conclusions it is necessary to make a selection among them. The enclosed prints indicate the summary which would be of most importance from the point of view of the Home Office, and whatever other statistical treatment may be adopted, it is hoped that the tabulation of local data will as far as possible be such as to lend itself to the desired totals for the town as a whole. Further copies will be forwarded if desired.

With regard to the initial tabulation of the returns, and conclusions to be drawn from them, the following points may be noted:—

- 1. "Family at home" is intended to be exclusive of lodgers; the data as to lodgers being of moment only as affecting (a) the income of the household, and (b) the question of overcrowding. If lodgers have been included, this should be stated.
- The income may be difficult to ascertain, or to state with precision if ascertained; e.g., where the mother is employed in a factory for one or two days per week only, as occurs in the Potteries.

- 3. Rental will doubtless vary materially with locality and will be found to be higher in London than in other towns. This may not affect the conclusions as to local conditions, but for aggregate returns for the several towns a better indication will be obtained from the number of rooms and persons.
- 4. The number of rooms and persons is important, for the reasons stated above. The intention is that all "living rooms," and not merely sleeping rooms, should be included; but not of course sculleries, cellars, etc., which are not living rooms. If any different practice has been adopted, it is important that it should be explained by a note: and if there be any doubt, the individual investigators should be asked what they have included.
- 5. The reasons for return of mothers to industrial work will usually be recorded in the returns. It is important that the conclusions should be drawn for each town, with local knowledge. Thus it may be that depression of a local industry, depriving the father of his usual employment, may cause special and temporary need for the mother to earn money.
- 6. Industry should be distinguished, at all events to the extent of separating the principal branches for each town.
- 7. The distinction of primiparæ is of some importance, owing to the greater mortality among first-born children, and to the fact that industrial employment is often given up after the birth of the first child. The data with regard to first-born children, and also with regard to illegitimate children, would no doubt repay detailed analysis.
- 8. The summary does not provide for statistics on certain points, e.g., as to alien parents, which nevertheless may be of interest in towns where the numbers are large. In such cases special entries can be made in the working sheets.

9. As a preliminary to statistical analysis, it will be necessary to enter the individual results upon "working sheets" with columns for the several particulars to be distinguished statistically. Sample working sheets are enclosed, and further copies will be supplied if desired. It is suggested that in order to simplify the labour of totalling and analysis the investigators' reports should be divided into broad groups, e.g.,

Mother industrially employed at home
" " in factory or
workshop
" elsewhere
Mother not employed industrially

mother not employed at home
division of each
accordingly as
the child is living
or dead at the
end of the year,
and that each group of reports should be entered on
separate sheets.

As work in lead is of especial importance, it is further suggested that separate sets of sheets as above should be reserved for entry of cases where the mother's employment is of that kind.

Faithfully yours,

B. A. WHITELEGGE,

H.M. Chief Inspector of Factories.

To
The Medical Officer of Health,
Borough of Bethnal Green.

Public Health Offices, 2, Paradise Row, Bethnal Green, N.E. 12th January, 1910.

SIR.

Home Office enquiry as to the Industrial Employment of Women before and after child birth.

I have the honour to forward for your information the following particulars obtained in this Borough. I regret that I am unable to afford fuller information, as the original form of enquiry was somewhat inquisitorial and the questions asked gave rise to so much dissatisfaction that the use of the form was forbidden by the Public Health Committee.

The following particulars relate to enquiries made mostly upon information received from London County Council mid-wives and officials of Public Institutions who have forwarded addresses of confinements attended by them.

The period covered by the enquiry is the year 1908 and such infants as were then visited were kept under observation until they reached the age of twelve months.

The number of infants visited was 898, of these 271 were boys and 242 girls born alive and 207 boys and 178 girls notified after death.

In most instances the mother was living with her husband, but in five she was a widow and seven other women had been deserted by their husbands. No enquiry was made as to whether the mother was married, but information that she was unmarried, was volunteered in seven cases by relatives.

It is found in this Borough that the mothers of the young children are not industrially employed to any great extent, if they are so employed, total or partial unemployment of the husband is the cause. During the year under consideration 83 per cent. (745) were found to be employed only in their household and family affairs. Seventy two were homeworkers (see employment table) forty six went out to work or were regularly employed as charwomen, school and office cleaners. Seventeen were hawkers and street sellers and usually took the baby with them when out on business. Two mothers were in hospital and one in an asylum.

In the great majority of cases expectant mothers, going out to work, give up their work some time before confinement (one to two months usually). In some work-places there are rules that they shall do so; where they are allowed to do as they please and work is continued later, poverty is invariably the reason given. It is a usual pratice also to allow two or three months to elapse after confinement before returning to work. Where work is resumed earlier, poverty again is the alleged cause.

School and office cleaners return to their work at the expiration of a month after confinement if they wish to retain their situations as there is much demand for work of this description. The pay is better than can be earned in many other branches of women's labour, the work is regular and also it can be done in the mornings and evenings, leaving the women free during the day to attend to their own affairs.

The women working in the jam factories state that the work is very hard, the full legal number of hours are worked and they have to carry heavy weights.

The woman who prepares sausage skins, in a factory outside the Borough, states that it is very wet work, her hands are constantly in water and the floor is always wet, while it is impossible to avoid wetting her clothing.

For the boot machining the women interviewed use exclusively pedal machines. Wages in every case are low.

The women working at home often continue their work almost to the hour in which the baby is born, and women have been found doing boxmaking, brush drawing and sewing nursery shoes before they were able to leave their beds after such an event.

#### TABLES OF WOMENS' EMPLOYMENT.

A.				В.		
WORKING AT	HOME.			Working away fro	M HOME.	
Brushdrawing		19		French Polishing		3
Nursery shoes		12	1	Laundry work		3

Boxmaking	15	Tailoring		5
Tailoring	15	Boot machining		5
Silk puffs	5	Book folding		2
Ham frills	2	Jam factories		2
Toy gauze nets	1	Sausage skins		1
Silk weaving, (hand loom)	2	Charwomen, (Office a	and	
Book folding	1	school cleaners)		25
	72			46

The majority of babies when born were fine babies.

It was not possible to obtain accurate information as to the exact period of time during which a child was breast fed. The replies given were as a rule "Oh! about three months." "I really didn't notice." "About a month or so ago." Accuracy in making statements is not one of the most obvious virtues of the Bethnal Green woman.

It is quite a common practice for a woman to keep a baby at the breast as long as she possibly can—to two and even three years old.

On the other hand many of the mothers are very poor, and both underfed and overworked and when they get out again after confinement and begin to attend to their ordinary duties, the milk partially or entirely fails and must be either supplemented or superseded. Hence the great difference in the number of 2-3 and 3-4 months old breast fed infants. The reason given by the mothers for hand or partly hand feeding their infants under six months is almost always that the milk failed, or that the baby was not satisfied.

Enquiries after the death of infants shewed that the mothers of those children also were not employed to any great extent—twentyeight were homeworkers, twelve were charwomen, only casually employed, and 22 went out to work. (See employment table C.)

#### EMPLOYMENT TABLE C.

French polishing		 3
Street sellers		 2
Boxmakers		 2
Brush makers		 2
Tailoring		 2
Office cleaning		 2
Portmanteau fitting		 1
Military trimming		 1
Paper sorting		 1
Cigar making		 1
Ironer at Laundry		 1
Making fuel for Motor	cars	 1
Tin toy making		 1
Belt machinist		 1
Barmaid		 1
		22

I am, Sir,

Your obedient servant,

GEO. P. BATE, M.D.,

Medical Officer of Health

B. A. Whitelegge, Esq., M.D., Home Office, Whitehall, S.W.

# Enquiry as to Industrial Employment of Married Women, and Infant Mortality (1908).

AREA-BETHNAL GREEN.

EMPLOYMENT OF MOTHER IN RELATION TO HEALTH OF CHILD.

A.—Children surviving first year.

				f mothers in ployed in fac	
Industrial work	disconti	inued	At Home.	Otherwise,	Elsewhere.
before conf	inemen	nt—			
1 week			65		3
2 weeks			7	Table !	3
3 weeks					5
4 weeks				5	
8 weeks				19	
12 weeks				11	
26 weeks					
Over 26 weeks					
Industrial work r	esume	d after			
confinemen					
4 weeks			72		1
6 weeks					24
8 weeks				6	
12 weeks				10	
52 weeks					
Feeding-bro	east alo	one			
1 month			80%		
2 months			70%		
3 months			60%		
6 months			40%		
Feeding—bre	ast par	tly—			
1 month			15%		
2 months			20%		
3 months			23%		
6 months			30%		
Artificial ent	irely—				
1 month			5%		
6 months			30%		

# Enquiry as to Industrial Employment of Married Women, and Infant Mortality (1908).

AREA-BETHNAL GREEN.

EMPLOYMENT OF MOTHER IN RELATION TO HEALTH OF CHILD.

B.—Children dying in first year.

Enquiries made afte	r deati	h—		f mothers in oyed in fact	
Industrial work di			At Home.	Otherwise.	Elsewhere.
before confine	ment-	-			
1 week			25	2	
2 weeks			3		2
3 weeks				9	
4 weeks				7	
8 weeks				1	
12 weeks					1
26 weeks					
Over 26 weeks					
Industrial work re	sumed	after			
confinement,	within	n			
4 weeks			28		
6 weeks					
8 weeks					
12 weeks					
52 weeks					
Feeding—breas	talone	-			
1 month					
2 months					
3 months			Table 2		
6 months			128		
Feeding-breas	t partl	y—			
1 month					
2 months					
3 months					
6 months			29		
Artificial entirely			150		

TABLE I. VITAL STATISTICS OF WHOLE DISTRICT DURING 1909 AND PREVIOUS YEARS. Metropolitan Borough of Bethnal Green.

	BIRTHS,		TOTAL	DEATHS RI DIST		IN THE	TOTAL	Deaths of Non-	Deaths of Residents	NETT DEATHS AT ALL AGES BELONG- ING TO THE				
			Population estimated to			Under 1 Y	ear of Age.	At all	Ages.	DEATHS IN PUBLIC	residents registered	registered in Public	DIST	RICT,
	YEAR		Middle of each Year,	Number,	Rate,*	Number,	Rate per 1,000 Births registered.	Number,	Rate,*	INSTITU- TIONS IN THE DISTRICT,	in Public Institu- tions in the District.	Institu- tions beyond the District,	Number,	Rate,*
	1		2	3	4	5	6	7	8	9	10	11	12	13
1899			129,200	4,758	36.8	827	174	2,669	20.7	727	164	431	2,936	22.7
1900			129,600	4,588	35.4	771	168	2,535	19.5	878	150	431	2,816	22.7
1901			129,700	4,608	35.5	678	147	2,423	18.7	834	220	425	2,628	20.3
1902			129,889	4,589	35 3	710	155	2,522	18.5	864	245	470	2,744	21.1
1903			130,028	4,627	35.6	630	136	2,253	17.3	915	272	380	2,361	18.1
1904			130,207	4,526	34.7	711	157	2,393	18.4	918	300	399	2,489	19.1
1905	***		130,401	4,321	33.2	652	151	2,351	18.0	975	295	356	2,412	18.5
1906	***		130,609	4,430	33.9	696	157	2,398	18.4	934	326	391	2,463	18.9
1907			130,831	4,152	31.8	574	138	2,200	16.8	985	298	379	2,281	17.4
1908			131,006	4,341	32.6	572	132	2,251	16.9	961	392	407	2,266	17.0
		Years			-					-				
18	99 1908		130147,	4,493	34.5	682	151	2,399	18.3	898	266	407	2,539	19.6
1909			131,316	4,100	31.22	534	130	2,243	17.0	1,182	495	385	2,193	16.7

 $\begin{array}{c} 128,929 \\ 14,005 \\ 9.2 \end{array} \} \, \mathrm{At} \, \, \mathrm{Census} \, \, \mathrm{of} \, 1901$ 

8

TABLE II.

VITAL STATISTICS OF SEPARATE LOCALITIES IN 1909 AND PREVIOUS YEARS.

 $<sup>^{\</sup>ast}\,$  In 1906 the Borough was divided into two sub-districts instead of three as heretofore,

TABLE III.

Cases of Infectious Disease notified during the Year 1909.

		Cases Notified in Whole District.								No of cases removed t Hospital from each Locality,				
		1		All Ages	Years.			1	2	1	2	3 Total		
Notifiable Diseases,	At all Ages.	Under 1,	1 60 5.	5 to 15,	15 to 25	25 to 65	65 and up- wards.	North East,	South West,	North East.	South West,	cases remove to Hospita		
Small Pox	1	l			1				1		1	1		
011										•••				
Diphtheria (including								00	101	75	98	173		
S.F I anaman)	183	9	99	55	11	9	***	82	92	1				
Erysipelas	164	6	12	15	18	102	11	72	305	255	301	556		
Scarlet fever	. 565	6	205	316	20	18	***	260						
Typhus fever			***	***	***			22	11	20	11	31		
THEOREM TO LOS	33		4	10	10	9	•••	-			777	1000		
Relapsing fever			***	***	***	***	***	***	***					
COMMENT TO THE STATE OF THE STA	1		1		***	6		5	2	5	2	7		
Puerperal fever	7				1	0				-				
			***		***		***		***	***				
Epidemic Cerebrospinal								2	3	2	3	5		
0	5	5			1		***	100	1		1	1		
Anthrax	1				1							-		
Totals	960	26	321	396	62	144	11	444	516	358	417	775		

 $\mathtt{Note},..\mathtt{The}$  localities adopted for this table are the same as those in Tables II, and IV,

TABLE IV.

Causes of, and Ages at, Death during Year, 1909.

	of "	Resid	s at t lents' beyon	whet	her o	d age: ceurin ict.	g in	"Resid	dents" b	ll ages o elonging ther occu he Distr	to	Total Deaths whether of Re- sidents
Causes of Death,	All Ages		1 and under 5,	5 and under 15,	15 and under 25,	under	65 and up- wa. ds	Torner	N.E.	s.w.	No Home.	or Non- residents in Public Institu- tions in the District
1	2	3	4	5	6	7	8	9	10	n	12	13
Small-pox Measles Scarlet fever	70		57 18	3 5	 1			 78 25	 39 13	39 12		15
Whooping-cough Diphtheria (including Membranous croup)	37	13	23 15	1 2				37 20	15 10	10		10
Croup Fever Typhus Enteric				 1	2	 1		 4	8			4
Other continued Epidemic influenza Cholera					1	6 2	3	10  90	42 	6  48		66
Diarrhœa Enteritis Puerperal fever Erysipelas	53	34	12	3 1		2 1 3	2 1	53 1 9	20	33 1 7	 1	37 1 7
Phthisis, Pulmonary Tuberculosis Other tuberculous diseases	195 77	28	5 30	3 10	28 2	150	9 2	195 77	89 33	102 44 47	4 1	123 52 62
Cancer, malignant disease Bronchitis Pneumonia Pleurisy	267 267	35 66	2 17 58 7	16	1 3	72 86 78 13	45 128 46 4	119 267 267 25	71 146 119 13	121 143 12	5	117 167 21
Other diseases of Respiratory organs	22	15	2			4	1	22 18	5	17 12		9 5
Cirrhosis of liver Venereal diseases Premature birth	18 7 76	5	1			18	1	7 76	3 44	3 32	1	1 7
Diseases and accidents of parturition Heart diseases	12 221	9	2	11 4	3 20 1	9 104 19	75 19	12 221 80	5 115 39	7 101 41	5	 127 29
Accidents Suicides Kidney disease Rickets	80 16 80 3		12  2 2	1	2 1	11 46	3 30	16 80 3	8 44 1	8 34 2	2	2 57 4
Cerebrospinal Meningitis Homicide	10	7		1		1 2		10	6	4 2		12
Old age All other causes	81 291		ïï	10	10	79	81 58	81 291	43 143	31 141	7	202
All causes	2197	534	296	72	75	712	508	2197	1081	1083	33	1182

#### TABLE V.

# Total Infantile Mortality during the year, 1909. Deaths from stated Causes in Weeks and Months under one Year of Age.

Under I Week.  1-2 Weeks. 2-3 Weeks. 1-2 Months. 1-2 Months. 2-3 Months. 5-6 Months. 5-6 Months. 6-7 Months. 10-11 Months.	Total Deaths under One Year.
	1
All Causes.  Certified  Uncertified	
i. Common Infectious	
Cmell per	
Small-pox	
Massles 1 1 1 9 5 1 0 4	17
Convlot Foren	2
Diphtheria (including	-
Membranous Croup)	3
Whooping Cough 2 3 2 3 2 1	13
ii. Diarrhœal Diseases	
Diarrhœa, all forms 1 1 2 9 4 7 11 5 7 6 3 5 8 6	73
Enteritis, Muco-	
enteritis, Gastro-	00
enteritis 4 8 2 2 4 1 2 2 3 2	30
Gastritis, Gastro- intestinal Catarrh 2 1 1 1	5
iii. Wasting Diseases	0
Premature Birth 55 5 5 1 66 6 3 1 1	77
Congenital Defects 19 3 2 24 3 4 1 1 2	36
Injury at Birth 7 7 7	7
Want of Breast-milk,	
Starvation 1	1
Atrophy, Debility,	
Marasmus 7 2 1 2 12 10 8 6 3 3 3 1 1 2 1 1	51
iv. Tuberculous Diseases Tuberculous Meningitis 1 1 2	8
Tuberculous Meningitis 1   1	0
Tahas Masantariaa	10
Other Tuberculous	1000
Diseases 1 1 1 1 2 1 1 2	9
v. Other Causes	
Erysipelas 1 1 1	3
Syphilis 1 3 1	5 2
Rickets 1 1 1 1 1 1	2
Tuling 1 1 1 0 1 0 1 1	13
	25
Convulsions 2 6 1 4 13 4 1 1 2 1 1 1 1 Bronchitis 2 2 2 4 5 5 3 1 3 2 2 3 3 2 2	35
Laryngitis	2.
Pneumonia 1 2 3 7 7 3 7 7 1 2 5 9 7 4	62
Suffocation, overlying 2 2 3 1 8 8 2 5 2	25
Other Causes 1 1 1 3 2 4 1 1 1 4 1 3	20
93 20 14 16 143 64 50 38 36 31 25 29 28 32 27 31	584
30 20 11 10 110 01 00 00 01 20 20 32 21 31	301

Population, (estimated to middle of 1909), 131,316. Births in the year, 4,132.

Deaths in the year, 534

Deaths from all Causes, at all Ages, 2,422.

# TABLE V (A).

# District-North East Bethnal Green.

# Infantile Mortality during the year 1909.

Deaths from stated Causes in Weeks and Months under one Year of Age.

										_	_			_			_
CAUSE OF DEATH	Under 1 Week.	1.2 Weeks.	2.3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months.	10-11 Months.	11-12 Months.	Total Deaths under 1 Year.
All Causes. Certified Uncertified																	
i. Common Infectious Diseases Small-pox Chicken-pox												2	4				:: 8
Measles Scarlet Fever Diptheria (including Membranous Croup) . Whooping Cough								3				: :: :: :: :: :: :: :: :: :: :: :: :: :		1		1 1	 2 6
ii. Diarrhœal Diseases Diarrhœa, all forms Enteritis, Muco- enteritis, Gastro- enteritis						3	3	1	5	2	1	5	1	5	5	5	36 7
Gastritis, Gastro- intestinal Catarrh iii. Wasting Diseases Premature Birth	32	2	2		37	2		1									3 44
Congenital Defects Injury at Birth Want of Breast-milk, Starvation	4 4	1			5 4		2										8 4
Atrophy, Debility, Marasmus iv. Tuberculous Diseases Tuberculcus Meningitis	4			1	5	3	2	3	1	1	2	1	1	1		1	21
Other Tuberculous Diseases								3	1		1	1	3	1		1	8
v. Other Causes Erysipelas Syphilis							 2 										2
Meningitis (not Tuberculous) Convulsions Bronchitis	"i	4	"i	2 2	8 2	 2 4	1 3		1 "i	1	1	 1 2 1	1 2	1 1 1		 1	8 13 18
Laryngitis Pneumonia Suffocation, overlying Other Causes	2	1 2	3 1	ï	1 8 1	5 2	3		1	1		2 1	1	5	3 2	3	27 14 9
er ei et et et ei	47	10	7	7	71	29	26	11	12	11	11	18	13	17	12	15	246

Births in the year 1,927 Deaths in the year of infants, 246.

Population (estimated to middle of 1909), 66,003.

Deaths frem all Causes at all Ages, 2197.

# TABLE V (B).

#### District-South West Bethnal Green.

#### INFANT MORTALITY DURING THE YEAR 1909

Deaths from stated Causes in Weeks and Months under one Year of Age.

			_			_		_	_	_							
CAUSE OF DEATH.	Under 1 week.	1.2 Weeks	2.3 Weeks.	3-4 Weeks.	Total under one month.	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months	9-10 Months.	10-11 Months.	11-12 Months.	Total Deaths under one Year.
All causes																	
Certified							- 350										
Uncertified																	
Chectemen	***	***	***		***		***	***					***		***		
i. Common Infectious Diseases																	
Small-pox		***	***	***		***	***		***			***	***	***		***	
Chicken pox		***	***			***	144	***		1		***	1	1	3	3	9
Convlot Florian							**			1		***			1	1	2
Diphtheria (including		* ***			***		***			***		***	***	***	1	1	4
Mombrone Chara						800							1				1
Membranous Croup)				***		2			2			1		2		***	7
Whooping Cough ii Diarrhœal Diseases		***				2	***		2			1		2		***	1
Diarrhœa, all forms			1	1	2	6	1	6	6	3	6	1	2		3	1	37
Enteritis, Muco-		***	1	1	-	0	1	0	0	0	0	1	-		0	-	01
		133	100				111				1						
enteritis, Gastro-						3	4	2	1	4		2	2	3		1	23
enteritis	***			***		0	4	2	1	4	1	2	2	0		7	20
Gastritis, Gastro-							1				1131	1					2
intestinal Catarrh		***	***	***		***	1		***		***	1	***	***	***	***	2
iii. Wasting Diseases	00	- 6			00	0		4		190							00
Premature Birth		3	3		29	3		1	***	***		***	***	***	***	***	33
Congenital Defects	15	2	***	2	19	3	2	1	***		***	1	***	1	***	1	28
Injury at Birth	3				3	**				***	***	***	***	***	***	***	3
Want of Breast-milk,						-											-
Starvation		***				1	***	***	**	***	***	***	***	***	***	***	1
Atrophy, Debility,			2			_					100						00
Marasmus	3	2	1	1	7	7	6	3	2	2	1	***		1	1		30
iv. Tuberculous Diseases																	
Tuberculous Meningitis				***			***		1		1			1		2	5
Tuberculous Peritonitis,											1	4	1				0
Tabes Mesenterica			***	***					1	1		***				***	2
Other Tuberculous								4	3			0	-	144			
Diseases			***			***	***	1	1			1	1			1	5
v. Other Causes									2	- 10				1		1	
Erysipelas		***		***					1	1			1		***		3
Syphilis			***			1	1		1	***	***	***	***				3
Rickets		1	***		1		***		***	***				***	***	1	2
Meningitis (not																	
Tuberculous)			***		***						2	1	1	***		1	5
Convulsions	1	2		2	5	2		1	2	1						1	12
Bronchitis		***	2		2	1	2	3		2	1		1	2	2	1	17
Laryngitis		***			***		**						***	***		1	1
Pueumonia				2	2	3	4	3	6	3	1		4	4	4	1	35
Suffocation, overlying		***				3	2	5	***	1				***			11
Other Causes	1	***		1	2	***	1	1		1	1	3	1	***	1	***	11
										-			_				
	46	10	7	9	72	35	24	27	24	20	14	11	15	15	15	16	288
Rirths in		100		Name of Street		-	he in					-	Control of the Contro				_

Births in the Year, 2,027. Deaths in the year of infants, 288.

Population (estimated to middle of 1909) 65,313. Deaths from all Causes, at all Ages, 2,197.

#### NOTES TO TABLES IV. AND V.

- (a) In Table IV., all deaths of "Residents" occurring in public institutions, whether within or without the district, are included with the other deaths in the columns for the several age groups (columns 2-8). They are also, in columns 9-15, included among the deaths in their respective "Localities" according to the previous addresses of the deceased as given by the Registrars. Deaths of "Non-residents" occurring in public institutions in the district are in like manner excluded from columns 2-8 and 9-15 of Table IV.
- (b) All deaths occurring in public institutions situated within the district, whether of "Residents" or of "Non-residents" are, in addition to being dealt with as in note (a) entered in the last column of Table IV. The total number in this column equals the figures for the year in column 9, Table 1.
- (c) The total deaths in the several "Localities" in columns 9-15 of Table IV. should equal those for the year in the same localities in Table II, sub-columns c. The total deaths at all ages in column 2 of Table IV. equals the gross total of columns 9-15, and the figure for the year in column 12 of Table I.
- (d) Under the heading of "Diarrhœa" is included deaths registered as due to Epidemic diarrhœa, Epidemic enteritis, Infective enteritis, Zymotic enteritis, Summer diarrhœa, Dysentery and Dysenteric diarrhœa, Choleraic diarrhœa, Cholera (other than Asiatic or epidemic), and Cholera Nostras.
  - Deaths from diarrhœa secondary to some other well-defined disease are included under the particular disease.
  - Deaths from Enteritis, Muco-Enteritis, Gastro-Enteritis, and Gastritis (see under the heading Diarrhœal Diseases in Table V.) in Tables IV. and V. are placed immediately below, but separately from, those enumerated under the heading Diarrhœa as defined by enumeration above.

- (e) Under the headings of "Cancer" and "Puerperal fever" are included all registered deaths from causes comprised within these general terms. Thus: Under "Cancer" is included deaths from Cancer, Carcinoma, Malignant disease, Scirrhus, Epithelioma, Sarcoma, Villous tumour and Papilloma of bladder, Rodent ulcer. Under "Puerperal Fever" is included deaths from Pyæmia, Septicæmia, Sapræmia, Pelvic peritonitis, Peri- and Endo-Metritis occurring in the Puerperium.
- (f) Under "Congenital Defects" in Table V is included deaths from Atelectasis, Icterus, neonatorum, Navel hæmorrhage, Malformations, and Congenital hydrocephalus.
- (g) Under "Tuberculous Meningitis" is included deaths from Acute hydrocephalus.
- (h) Under "Other Tuberculous Diseases" is included deaths from Tuberculosis, Tuberculosis of bones, joints, and other organs, Lupus and Scrofula.

In recording the facts under the various headings of Tables I., III., IV., and V., attention has been given to the notes on the Tables.

TABLE VI.

Shewing the number of Deaths from the Seven principal Zymotic Diseases, inclusive of Hospital Deaths in the 10 years, 1899 to 1908, and in the year 1909.

DISEASE.	1899	1900	1901	1902	1903	1904	1905	1906	1907	1908	Annual Average of 10 years 1899-1908.	Proportion of Deaths to L,090 Deaths in 10 years IS99-1908,	1909	Proportion of Deaths to 1,000 Deaths in 1909.
Small Pox Measles Scarlet Fever Diphtheria Whooping Cough Fever Diarrhœa	90 9 64 44 38 157	63 12 60 93 18 103	2 84 44 63 38 20 119	64 59 19 33 89 15 60	85 13 26 41 12 112	8 89 18 48 44 7 147	 48 27 31 50 9 119	60 22 20 63 14 152	71 43 18 53 7 59	105 39 29 42 13 102	7 75 25 39 56 15	2·7 29·5 9·8 15·4 22·1 5·9 44·5	78 25 20 37 4 90	35·5 11·3 9·1 16·8 1·8 41·0
Totals	402	349	370	339	289	361	284	331	251	330	330	130.0	254	115.5

# FACTORIES, WORKSHOPS, WORKPLACES AND HOMEWORK.

#### 1.—INSPECTIONS.

INCLUDING INSPECTIONS MADE BY SANITARY INSPECTORS.

Due			Number of	
Pre	mises	Inspections.	Written Notices	Prosecutions
FACTORIES		169	22	
WORKSHOPS	etory Laundries)	5156	1047	
WORKPLACES	rkshop Laundries)	1331	76	
Total		6656	1145	

#### 2.—DEFECTS FOUND.

	Nu	mber of Def	ects,	
Particulars.	Found	Remedied,	Referred to H.M. Inspector.	Number of Pro- secutions
Want of cleanliness		512 9 8  493 10 95 2		
Total	1130	1129	1	

<sup>\*</sup> Including those specified in sections 2, 3, 7 and 8, of the Factory and Workshop Act as remediable under the Public Health Acts.

#### 3.—HOME WORK.

		01	UTWORK	ERS' LI	STS, SE	CTION 1	07.		nd Re-	SON	RK IN UNIE PREM	ISES	EI	ORK IN DEPREMIS	SES
		Lists rece Empl	ived fro oyers	m	resses ceived acils	Addresses s forward. Councils	Prosec	cutions	tions s		Þ	7			10
NATURE OF WORK		in the		in the	s and Addresses workers received other Councils	and Add vorkers for other Com	to keep mit in- n of lists	to send	of Insp	Instances	Notices served	Prosecutions	Instances	Orders made (s. 110)	Proseccutions Sections 109, 110
	Lists	Out- workers	Lists	Out- workers	Name of Out from	Names and of Outworkers ed to other (	Failing to b or permit i	Failing to	Number		X	ь		0	Pr
Vearing apparel—(1) making, &c., (2) cleaning and washing	138	1,647	9	58	2,398	835			4,139						
ace, lace curtains and nets	100	***	***	***	15	9	***		6	***		***	***	100	***
rtificial flowers	***		***	***	36	****	***	***	46		***	***	***	***	***
urniture and upholstery arding, &c., of buttons, &c.	- 0	161	1	1	20	104 14	***	***	93	***	***	***	***	***	***
nhvallag fra			***	***	76	19	***	***	137	***	***	***	***	***	***
aper bags and boxes	24 10	498 604	2 2	6 94	907 143	105 395			8,355 565						
Total	180	2,926	14	159	3,599	1,463			13,351						

#### 4.—REGISTERED WORKSHOPS.

Workshops	Workshops on the Register (s. 131) at the end of the year.												
Workshops, incl	uding I	aundri	es				1,993						
Workplaces							223						
Bakehouses							89						
Total nu	mbers o	of work	shops	on Regi	ister		2,305						

#### 5.—OTHER MATTERS.

Class.	Num- ber.
Failure to affix Abstract of the Factory and Workshops Act (s 133) Action taken in matters referred by H.M. Inspectors as remediable under the Public Health Acts, but not under the Factory Act, (s. 5)	36 60
Other (See 2)	27

# METROPOLITAN BOROUGH OF BETHNAL GREEN.

# STREET LIST.

200										
Name of Street.	Zymotic Diseases.	Tubercular Diseases.	Respiratory Diseases.	General Diseases.	Total.	Name of Street.	Tubercular Diseases.	Respiratory Diseases.	General Diseases.	Total.
Abbey street Abingdon street Abingdon buildings Ada place Ainsley street Albert buildings Albion place Alfred place Alfred place Alma road Ames street Angela gardens Anglesea street Anns place Approach road Arbery road (Except Nos. 74 & 76) Archer street	2 1 2	 1  2 1  	1 2 1	2 2  1 1  5 3 1 2 1 4 6	5 4 2 3 2 ····· 8 11 5 3 3 1 4 8 1	Blythe street Bonner road Bonner street Bonwell street Boundary street Bradys buildings Brady street Bratley street Brick lane Brierley street Bucks court Buckhurst street Bullards place Bunsen street Burgoyne road Burnham square Burnside street Busby street	B 1	4 2 2 1  3 2  4 1  1 1	4 9 3 1 2 7 4 1 9 3 3 2 2 3	11 12 5 2 2 2  14 6 1 16 7  5 3  2 2 2 3 6 6 1 6 6 1 6 1 6 1 6 1 6 1 6 1 6 1 6
Arline street Artillery street Ashwell road Auckland road Austin street	··· ··· i	1 1 1	1 4 3	2 1 2 3 	4 6 3 4 4	Busby square Butlers buildings Butler street Buxton street  [Odd Nos. 1 to 33] Even Nos. 2 to 10]		2	1 1 1	2 1 3 1
Bacon street Bakers court Bakers rents Baker street Bandon road Barnet grove Barnsley street Barnsley houses Baroness road	3 2 1	4 1 2 2 1	3 1 2 3 1 1	4 1 1 1 4 2 4 2 4	11 1 2 1 8 6 11 5		1 2 2	1 3	2 2 8	6  4 15
Bath grove Bath street Baxendale street Bellhaven street Benson buildings Bethnal House Rethnal Green road Birkbeck street Bishops road	 1	 1   1 3 1	 1   4 2 2	1  7 2  1 1 18 1 6	1  9 3  1 2 27 7 10	Camden street	1 5	4 6  1  3 4	4 10 1  2  1 	9 22 1  1 3 2 1 3 9 

# STREET LIST-continued.

											-
Name of Street.	Zymotic Diseases.	Tubercular Diseases.	Respiratory Diseases.	General Diseases.	Total.	Name of Street.	Zymotic Diseases.	Tubercular Diseases.	Respiratory Diseases.	General Diseases.	Total.
Chapel place		1				Cudworth street		2	1		3
Chapel street		1	1	2	4	Culham buildings	***				
Charles terrace		1		1	2	Cygnet street	1				1
Charlotte street	1		4	1	6	Cymon street			3	1	4
Chertsey buildings						Cyprus street	1	2	6	2	11
Cheshire street	2		5	4	11						Section .
Chester street	***			2	2	200000000000000000000000000000000000000					
Chilton street	4	1	1	5	11	Dagnall place		1	1		2
Chisenhale road	1	1	2 2	9	13	Daniel street					***
Church street			2	3	5	Darling row	1			1	2
(Except Even Nos.				1000		Davis place Davis buildings	1000		***	***	***
from 2 to 26.) Church row		1	4	3	8	Delamere buildings			**	**	
Clare street	1	3	2	4	10	Dolta atroot	1	***		2	3
Claremont street				1	1	Derbyshire street		1	3	6	10
Clarence street						Devonshire place					
Clarkson street .		3	2	3	8	Digby street	1	***		1	2
Clifton buildings	2			2	2	Digby walk	1	1	2	1	5
Club row	1	1	***		2	Dinmont street	1		1	3	5
Coate street				1	1	Diss street	1	2	1	3	7
Code street	3			2	5	Dixie street	1	1	4	2	8
Colling place		***				Driffield road	1				1
Colling street	***	***	***	1	1	(Odd numbers)			0	0	0
Collingwood place Collingwood street	1	2	4	9	16	Ducal street Durant street	1	1	8	3 5	6
Collyer's court	1				1	Durant street	1		0	0	10
Collins place											
Columbia market						Eastman street	2	3	2	4	11
Columbia road	1	3	3	4	11	Ebor street					
Columbia square	2	1	3	3	9	(Except Nos.	2000				0.7220
Conyer street	1	1	***	1	3	11 to 19 Odd)					
Cookham buildings			2	1	3	Eckersley street			1	1.	2
Co-operative b'ld'gs		***		***		Edgar place			-:	1	1
Coopers gardens	1	1	2	4	8	Edward place .		***	1		1
Cordova road Corfield street	3	2 4	5	3	8	Ellesmere road Elwin street		2	4	6 2	12
Communall wood				13	25	Emma street		***	2	2	2 4
Cornwan road					***	Franct place	1	1		1	3
	-		177		701	Evesham houses					
Cottage place				***		Ezra street				2	2
Coventry place									-110		-
Coventry street	1	4	13	10	28						
Cox s buildings				1	1						
Cranbrook street	4	2	5	3	14	Falcon buildings	***	***			,
Cranbrook road						Felix street	4	1	2	4	11
Craven buildings		1	1	1	3	Fellbrigg street		3	5	5	15
Crescent cottages		.:				Finnis street	1	***	1	3	5
Crescent place Cross street	1	1	1		3	Fleet street hill		**		1 2	1 3
Consoland access		***	***	1	1	Flint court Florida street	1 1	1	2	5	9
Crossiand square		***		1	1	Florida torraca					
						riorida terrace	***			***	***
William Control of the Control of th	OF STREET	-		-	100			-	-		-

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STREET LIST—continued.

Diseases.	Diseases.	Diseases,	Diseases.	General Diseases.	Respiratory Diseases.	Tubercular Diseases.	Zymotic Diseases.		Name of Street.	Total.	General Diseases.	Respiratory Diseases.	Tubercular Diseases.	Zymotic Diseases.	ne of Street!
19	19	9	19	19	4	2	1		Hackney road						's buildings
				1					(All even nos and						street
								1	odd nos. from 323)						in street
					***	***	***		Hague buildings	3		2		1	reet
3					1	1		-	Hague place Hague street	15	8	4	1	2	ouildings
								_	Hammonds gardens	10	0	-	1	2	street
5	5	5	5	5	6		1	- 1	Hamilton road						
									Hare court						
***			***	***		***	***		Hare marsh						
6					5				Hare row						
1		7			2	3	2		Hare street	8	4	2	1	1	gardens
3				_	2		2	-	Harold street Hartley street	***	***		***		place
									Hartley street Hassard place			200			let street
7		7	7	7	2	1	2		Hassard street					***	n place
1			0.000				1		Havelock place	5	1	1	1	2	ers road
1					**				Helens place	6	2	2	2		r street
3	73.0	25.0	73.0				1		Hedsor buildings	2		1		1	gne place
1 3					3	1		-	Hemming street						r street
				1			1	- 1	Henley buildings	5 2	1 1	3		1	ina gardens
	100	30				1		-	Henrietta street Hereford buildings	1070			***	1	n road
1					4	1			Hereford street	1	1			***	tar buildings
5	5 ]	5	5	5		5			Hersee place						tar gardens tar place
									Holly mansions	6		1	4	1	tar walk .
4	4 ]	1	4	4	3	2	3	1	Hollybush gardens	6	4	1	1		n street
	200	200	3000		1	2	***		Hollytush place	2	1			1	street
2									Holmes Avenue	14	5	5	3	1	road
	633		3553		***		***		Horatio street Horts place						numbers from
1					1		1		Hunslett street	2		0.51	1	1	odd from 131
2	2	2	2	2			1		Huntingdon b'ldings	-	***		-	1	nith's row
				***	***				Hurley buildings						s. 8 to 62 even
								1		17	10	3	3	1	t street
								1		2	1		1		y place
3	3		3	3	1	1			Iffley buildings	3	3	***			y street
	7		7			1			Ion square	4	2	7	7	1	Eastern bldgs
					***	-		"	Ivimey street	34	19			1	street
									James court	8	2	3	2	2	by street
									James place	9	7	1	- 333	1	n houses
2			2	2	5		1		James street .					-	
						100		,	(Odd nos. from 39,						nos. from 110
1	4 1		4	1	C	1	0		even from no. 4)						row
*	* 1	-	4	4	0	1	0		Jersey street	30	13	8	2	7	ess' buildings
2	2	2	2	2	2	2	1		Kay street						
	-			1		-		-	(Nos. 2 to 52 odd)	-		-			
		4			6 2	1 2	3 1		(Odd nos. from 39, even from no. 4)	30	13	8	2	7	

95
STREET LIST—continued.

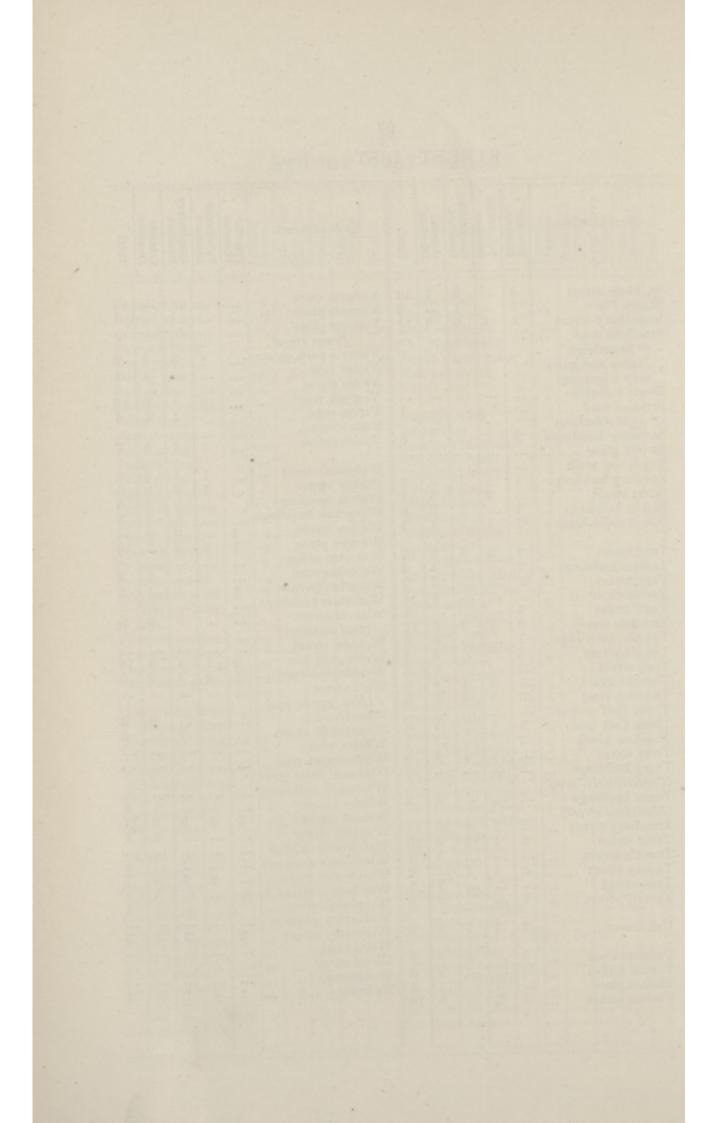
Name of Street.	Zymotic Diseases.	Tubercular Diseases.	Respiratory Diseases	General Diseases.	Total.	Name of Street	Zymotic Diseases	Tubercular Diseases	Respiratory Diseases	General Diseases	Total
Kelsey street						Menotti street	5	2	2	2	11
Kenilworth road		1 2		2	3	Merceron street		1			1
Kerbela street Kirkwall Place	3	100	4	3	12 2	Merceron houses	1			1	2
Kita Dlago				1	1	Middleton street	1		3	1	5
Knottisford street			1	3	4	Minerva street Minto place		1	1	2	4
			3	-		Mocatta house	***	***	***		***
						Molecon buildings		1		1	2
Laleham buildings		2		1	3	Montfort house			1		1
Lansdell place	1	. 1		2	4	Moravian street				2	2
Lark row	3	***	1	2	6	Morpeth street	1	1	8	7	12
Lawfranc road	3	1	1	2 4	3	Moss street	3		8	5	16
Leopold buildings Letchford place			-		9	Mount street	1		***	3	4
Lessada street	2	2	***	3	7	Mowlem street	***	***	3	2	5
Leslie House		1	1		2	Museum buildings	1		***	2	3
Linden buildings	2	2		3	7					4	
Lisbon buildings	***	3	***		3	Nant street		***		1	1
Lisbon street		***				Neath place		1	2		3
Little York street		***	***	1	1	Nelson place			1		1
London street Lucas street	•••	1	1	1	2	Nelson street		***	3	2	5
Lucas street Lyal road						New Church street	***	1	1		2
( Nos. 57a, and 58 to			***		***	Newling street New Tyssen street	1 2	***	1 2	1	3 5
88 Consecutive Nos)		16.00		-		Novah atmost	2	3	1	4	10
Lyte street		***		3	3	Northampton street	2	1	1	1	5
T. W. C.						Norton street			1	5	6
Mace street	1	1	3	4	9						
Manchester b'ld'gs				1	1	Octagon street			1	2	3
Manchester place						Old Bethnal Green					
Mansford street	3	1	6	11	21	road		7	4	7	18
Mansford buildings Mape street		***	2 4	1	7 5	Old Ford road	3	5	12	18	38
Margaret place	***		1	1	2	(Odd Nos. to 205					
Marion place			î		1	Old Nichol street			2		0
Marion street	1			1	2	Olga street			3	1	2 4
Marion square	***			1	1	Orange street	2		2	2	6
Marlow buildings	***			, 1	1	Oval			3	7	10
Martha court					0						
Matilda street Meadows dwelling	1		3	3	8						
Medhurst road		1	1	1	3	D.1		4	4	4	
Medway buildings				1	1	Palm street	***	1	1	1_	3
Medway road			1	6	7	Palmers road Paradise row				1	1
(Odd Nos. 3 to 49		100				Park place					4
even Nos. 2 to 62.)			1			Parliament place			1		1
Memorial Hall blds.	***					Parliament street			***		
Mendip houses	1		2		3	Parmiter houses			2		2
-											

# STREET LIST-continued.

Name of Street,		Zymotic Diseases	Tubercular Diseases.	Respiratory Diseases.	General Diseases.	Total.	Name of Street.	Zymotic Diseases	Tubercular Diseases	Respiratory Diseases	General Diseases	Tetal
		1		1	2	4	Rooks place					
		2	1	1	5	9	Ropley street	1				1
			***		***		Ross buildings		1			1
		***		***	•••	***	(Moss street)					200
		***	1	2	1	4	Royal Victor place			***		14
		***		1	2	3	Royston street Russia lane	3	3	3	5	14 12
Paal grove maure							Russia lane		0	0	0	12
Polter street				1	4	5	Sabbage yard					Police.
Paraira etraat					1	1	Sale street		1		8	9
Peter street							Sandford buildings				1	1
Dolland place							Satchwell rents		1	1	3	5
Polland row				1	7	8	Satchwell street	2	1	3	2	8
Pollard street .				4	5	9	School place		***			
			1	1	1	3	Sclater street	1		5	5	10
		2	1	1	3	7	Scott street	1	2	2	5	10
		1		2	3	4	Seabright street	1	2	5	5	13
		2	***	******		7	Selby street	1		3	***	4
	***			6	2	8	(even numbers) Sewardstone road		Tona a	6	8	14
D.'s-1		1	2		4	7	Shacklewell street	***			8	3
		-		***			Sheldon place			2		-2
to 117).	57						Shepton houses					
Dunnant townson			1	1	4	6	Shetland street	1				1
n :1		1				1	Shiplake buildings					
Providence yard .							Shipton street		1	2	2	5
Punderson gardens	s	4	1	6	6	17	Skinners court			***		
							Sidney street	1		1	2	4
Queen's buildings.			***		1	1	Smart street .					
(Princes place)			6.	4		4	Smiths place				3	3
Queen's buildings .				1		1	Somerford street	3	2	7	3	15
(Gossett street)			Sec.				Somerford houses	1	3	***	2	6
Queen's buildings				****			Somerford buildings		1	***	3	4
(Chambord street		1				1	Sonning buildings S'hampton cottages	2		1		3
Qu'n Caroline plac Quilter street	_	2	1	2	4	9	Southampton place					0
o .		2	1	6	10	19	Southampton terrace					1
&anno oquare			1				Spencer passage					
Railway arches .							Spicer buildings					
D					6	6	Spital street					
Danlau place		1				1	(Nos. 11 to 27)	- 19				
Ravenscroft build's		1		2	5	8	Squirries street		***	2	3	5
Ravenscroft street.			***	4	2	6	St, Andrews street	1		***	2	3
Reuben street .			1		***	1	St. James road	1	***		2	3
THE RESERVE THE PROPERTY OF THE PARTY OF THE							St. John street			***	0	
							St. Jude street	2			2	4
					3		St. Mark's buildings	3	***			3
Robinson road			2	2	6	3 11	(Tagg street)		15	7		
		1	4	4	0	11	St. Marys place	***		****	****	
Odd Nos. to 12	7,			100			St. Matthias place	***		***	1	1
even Nos. to 142).							St. Peter square				1	1

# STREET LIST-continued.

Name of Street.	Zymotic Diseases.	Tubercular Diseases	Respiratory Diseases.	General Diseases.	Total.	Name of Street.	Zymotic Diseases	Tubercular Diseases	Respiratory Discases	General Diseases	Total
St. Peter street	4		2	7	13	Victoria park					T
Stamp Place	1	***	1		2	Victoria place			1		1
Stainsbury street	1	1	6	3	11	Victoria place					
Stanfield road			***			James street					
("Stoneleigh"						Victoria park square		1	3	2	-
House and gate- way adjoining)						Violet row Violet street			***	1	
Steels buildings						Virginia road	***		***		15
Strahan road		1			1	Vivian road	***	2	1	6 3	13
(odd numbers)						Voss street	***	***			
Streatley buildings	3	1		1	5	Vyner street		1	1	5	
Stroud place		***					***	-			
Sugar loaf walk						Wadeson street		1	1	2	1
Sunbury buildings	1		1	3	5	Walter street		1	2	2	1
Surat street	***	2	5 2	3	11	Walton buildings			3	3	(
Sutton buildings .	1 1	1		1	6 3	Wargrave buildings		***		3	1
Sweet apple square	+	1		-	0	Warley street	1		3	8	15
Tagg street	1	2	3	6	12	Warner place Waterloo place	1	2	2	7	1:
Taplow buildings	1			1	2	Waterlas word	•••	1	***	1	
Tapp street				2	2	Waterloo terrace	1		1		1
Tavistock street				1	1	Waterlow buildings		***			
Teale street	1				1	Weaver street			3	2	1
Tecsdale street	3	4	2	8	17	(Odd numbers)					
Temple dwellings	1			4	5	Weldon street					
Temple street	2			3	5	Wellington row	2	1	1	8	15
Tent street	***	1	1	5 4	5	Wennington road	1	2	1	2	1
Thorold street Thoydon road		1 1	2	2	6 5	West street			***	***	
Three Colt corner						(Nos. 177 to 191) Wharf road				0	
Three Colt lane	1	1		4	6	Wharncliffe street	***	***	2	2	5
Thurlow place			***	1	1	Whites court	***	***		***	4
Totty street			1	4	5	Whitechapel road		***		***	
Toyes buildings						(Odd nos. from 319)		***		***	
(OldBethnalG'n rd)						Whitmore buildings					
Toyes buildings	***	***		2	2	Wilmot house				1	1
(Mansford street)	0	1	E	10	10	Wilmot street	3	3	3	8	17
Treadway street	2	1 1	5 2	10 6	18	Wimbolt street	***		***	1	1
Turin street Turville street	7	10000		1	1	Winchester b'ld'gs		***	***		
Tuscan street		1	1		2	Winchester crescent			1	***	1
Type street	***			7	7	Winchester place Winchester street	22/4/20	2	4	1	5
Tyrrell street	1		1	2	4	Wingham street		***	***	1	1
.,						Wolverley passage	Vester!		***		400
Usk street	2	1	1	1	5	Wolverley street	2		4	3	
						Wood close					
Vallance road	1	***	4	3	8	Wood street					
Venice street				2	2	Workhouse					
Viaduct place		1			1	No home	1	4	6	24	35
Viaduct street	1	2	2	5	10		10000			10000	



# Metropolitan Borough of Bethnal Green.

### THE CHIEF INSPECTOR'S

FOURTEENTH

# ANNUAL REPORT

ON THE WORK OF THE

# Public Health Department,

FOR THE

# YEAR ENDING 31ST DECEMBER, 1909.

Ordered by the Public Health Committee to be printed and circulated, 2nd. March, 1910.

THOMAS BROOKS,

Chairman of the Public Health Committee.

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BEET - RECORD TO THE SECOND DAY

# PUBLIC HEALTH COMMITTEE.

MR. CHAIRMAN AND GENTLEMEN,

Agreeably with the standing orders of the Council I herewith beg to submit the Annual Report of the Public Health Department for the year ending December 31st, 1909, being the fourteenth since the re-organisation of the Department, and the twentieth since my original appointment.

It has been customary for some years past in presenting the annual report to submit for consideration some one or other of the many questions affecting the life and condition of the people in so far as it relates to, and is affected by, Public Health Administration.

A prolonged industrial depression resulting in generally irregular and (in many cases) total want of employment has introduced a new factor into what is generally termed "the condition of the people question." As this new factor, or rather, perhaps, this aggravation of an old one, must of necessity affect our operations and the results of our procedure in

many ways, we shall probably do well in considering this question from the especial point of view of those whose duty it is to protect and conserve the public health.

Every party, faction, and sect in turn and all together, talk about, write about, figure about, and in the end leave the question in all its prime essentials just about where they found it.

A palliative here, a platitude there, plus a fresh set of statistics elsewhere, does not provide even the beginning of a remedy for the evils of town life in congested areas, where the people are absolutely dwarfed and stunted for the want of space and lack of means necessary to secure it.

The social and economic condition of the people form, as it were, the raw material on which a public health authority and its department has to conduct operations. Given a raw material approximating to good or fairly good, *i.e.*, of good stock, well mothered and nursed, properly clothed, well fed, and housed say as well as beasts shown for prizes at agricultural exhibitions, and you may reasonably expect favourable results.

If on the contrary your raw material is to continue to be a congested people, chronically below par, under fed and badly clothed, in addition to being mothered in factories and workplaces, and fathered by males suffering from the demoralising effects of want of employment, then it is useless to expect anything like real or healthy progress, and the question I desire

to submit for consideration to-day is whether we are even commencing any real advance toward the formation of that raw material, admitted by all to be so necessary if any lasting improvement is to be effected.

Whilst it is obviously true that so far as property is concerned most of the cruder features and more coarse conditions arising from neglected sanitation have, as the result of some years of effort, been swept away, the lamentable fact remains that the actual physical condition of our people as seen day by day in their homes and lives is not at all in accordance with the most elementary requirements necessary for the continuance of a healthy race.

The absence of proper facilities for the practising of domestic and personal hygiene as a part of the ordinary everyday habit is resulting in an almost general neglect and absence of desire to practice any effective system of domestic hygiene or personal sanitation. This want of cleanliness in the home and person invites, nay, challenges consideration of the point whether much of our so-called progress is not of a somewhat negative quality.

Year in and year out we visit approximately some six hundred "homes" in every week. Were it possible to reproduce the actual conditions found existing in some hundreds of these "homes," I feel pretty certain that the most optimistic of our reformers would agree it was high time to hark back, and to begin again on sounder lines.

Fathers either completely out of work or on "short time" for months; mothers taking the place of the men and gone with the girls to work in factories and workshops. In other instances the females bring home work, and become what is known as "outworkers," and so add to the destruction of the "home" by converting same into a workshop.

In either case the real and true position of the woman is perverted, domestic duties necessarily neglected, both house and children become more uncleanly, and what is unfortunately the natural and worst feature follows, in that hundreds of them are apparently becoming quite acclimatised to their progressively unsatisfactory and unwholesome surroundings.

In the result we are arriving by sheer dead weight of circumstances to the destruction of all the best of home life, to the very negation of all educational effort, to social degeneration and national physical deterioration.

As a whole, the people are not to blame, and I am not attempting it. Circumstances quite beyond their control are too strong for them, and they have to go under.

To describe the devolution of the decent workman through unemployed to demoralised unemployable, until he becomes a problem beyond the control of sanitarian and every other ameliorative agency, is unnecessary. Suffice it to say, that mentally, morally and physically the unemployed of yesterday, is not only the unemployable of to-day, but what is far worse, he and his and all that they get, are filling our most densely packed and congested areas with crowds of weaklings, as stunted in physique as they are dwarfed in intelligence and physical capacity.

Degenerate, and incapable alike of high responsibility or sustained individual effort, they could in hundreds of cases be properly described as partial wrecks of what a people should be, rather than the efficient citizens of a great Empire.

Every thinking man must deplore the fact that it is from this stock we are breeding in ever increasing numbers, burdening the ratepayer in money, and exerting all our scientific knowledge and effort to keep alive the unfit and inefficient by endeavouring by every means at our disposal to pull down and reduce the undue proportion of their heavy infantile mortality.

Unless some speedy solution of the unemployment question is devised, and a consequent general improvement of the condition of the masses promptly inaugurated, one shudders to contemplate what the conditions will be like, after another two or three generations of poor town bred population.

It is your province, gentlemen, to consider these things and to devise the something that shall provide some real beginning at putting a stop to what on every side is admitted to be disastrous; but, what appears to me to be the duty of everyone, with real knowledge of the facts is, first to make those facts known, and above all to enter a protest against any more sham remedies being foisted off upon the public.

Looking back over a period of some twenty-five to thirty years it seems to-day that almost every evil from which we are suffering has been and is being aggravated by early neglect and encouraged to establish itself, until it has become chronic by a series of "remedies" that are not remedies at all and that in so far as they have done anything have simply changed the surface appearance of the social scab without touching the wound underneath.

The people have had showered upon them Acts of Parliament, Laws, Bye-Laws, Orders and Regulations galore, and under each new sets of officials and machinery have been set up. The people are inspected, re-inspected, and inspected by half a dozen different authorities often overlapping and all working from different points of view.

The question now is how to make all these inspections beneficial to the people themselves. We must make the home the unit and from that point endeavour to apply the various measures in order to get results.

It seems regrettable that with so many agencies in existence all intended for social improvement there does not appear to be any desire for a cohesive united action. We split up into isolated sections working from different centres, confusing the public, and often nullifying each other's attempt.

Instead of trying to work out some practical measure of general procedure many of our leading men are now fighting the air over that important but not difficult (if properly dealt with) problem the school-child with an uncleanly head. The blight of divided authority has fallen more heavily on this matter than usual which is saying a great deal.

So far as one can judge deep cogitation is taking place as to whether the child shall be labelled and classified as pediculi or pediculousis. To be dealt with at a special school centre for cleansing, or sent to the Council's Depot to be dealt with at the disinfecting station amongst infected bedding and articles from infected premises.

Others apparently are wondering whether there is not a chance for a still further brand new department where more officers and others interested in pediculi may register and report to one another and make piles of figures on the peculiarities of the common louse.

Of course old fashioned people would direct their attention to cleansing the children at the proper place viz., in their home. Unfortunately we are too far advanced now-a-day to do a simple practical thing like that; besides we should not contaminate the public by performing our personal ablutions at home,

and modern officialism is nothing if it cannot disturb the community, and expose its social sores to the public eye.

Apparently the common louse has become such a terrible fellow, that no one authority is sufficient and competent to deal with him. Different departments and routine services must be called in to inspect, and tabulate and analyse and figure about him. It is of course a detail that amongst all this "procedure" the mere interest of the child may be overlooked.

Members of your Committee will recollect more than one case where more officers were concerned than there were vermin on the child in question. In the midst of all the enquiries and research over a poor motherless bairn, a good kindly neighbour just took the child and cleansed it. This practical person did not of course understand the position at all. Her emphatic action simply cut short a most interesting case, and ruined perhaps a whole table of figures.

One wonders why it is that all these fussy people do not understand and take the trouble to learn that these poor children are the victims of circumstance, subject for compassionate assistance and real help rather than meddlesome officiousness, leading to nothing except perhaps more statistics and reports.

If they could be got to see and know that hundreds of these children have never had a complete set of clothes or under-linen in their lives; that they have no change of body clothes from day to night, and in hundreds of cases sleep in the one miserable set of things they wear at school and at all times, and that proper bedding accommodation is conspicuous by its absence—they would I venture to think agree that a system that stops short at figures requires to be eliminated from the list of real remedies.

To such a ludicrous impasse has local administration been brought, that in addition to this schoolchild question, there are others of a far more trifling character, that thanks to the modern craze for the mere multiplication of authorities and departments, are dealt with in parts and reported upon and about by at least two or three different sets of officials and their properly constituted authorities.

The absence of a bolt, or a broken hinge on the door of a sanitary convenience may be subject matter of sufficient gravity for complaint to the first authority, and after investigation by their officers will be reported to the Health Department of the Borough Councils to be dealt with by them. In other cases a broken line on a skylight may be reported upon by a second authority, first to that authority and through them to the Town Clerk, and ultimately to your officers, who are already on the ground, and may have the matter in hand.

Almost every month brings its fresh authority with a new Jurisdiction, and as though all these were not enough, there are still more in the shape of voluntary quasi—public organisations, each and all determined to dare and do the Londoner to death by inspection and re-inspection. Of course all this

interfering with people's privacy would not be attempted amongst the well-to-do. It is reserved for the especial treatment of the poorer classes.

What is wanted to-day in the best interests of London Health Administration, as well as General Local Government, is, an enquiry into overlapping authorities, a strict co-ordination of all public duties, a simplification of procedure, the absolute ending of divided responsibilities, and a complete suppression of the costly impracticable faddist. In a word, we want to end a system that provides an intolerable amount of "Officialism" to a very small proportion of real sound service to the public.

The following letter sent by direction of your Committee, further illustrates the extent of this mischief and the desirability of effecting some co-ordination of duties and interests:—

"27th September, 1909.

G. R. Askwith, Esq.,
Board of Trade,
Gwydyr House,
Whitehall, S.W.

Sir,

In reply to your letter of the 24th instant, I beg to say that I am quite sure that my Committee are most desirous of forwarding any information in their possession that will facilitate any inquiry by your Board or other Public Department, and I have no doubt that instructions will be given for the list required to be forwarded to you as soon as the same can be prepared.

Rightly or wrongly it was understood that Miss Woodgate desired then and there to proceed to an inspection of these premises, and my Committee feel that it is time some protest was made against the multiplication of inspections one after the other by officers of various Authorities and Institutions and which inspections appear to lead to no very conclusive results.

In certain circumstances large numbers of the poorest workers in this and similar boroughs are now subjected to inspection and inquiry from

- (a) the Factory Department of the Home Office;
- (b) various departments of the London County Council;
- (c) the Borough Council;
- (d) the Local Government Board;
- (e) the Board of Trade and, in some special cases, the Board of Agriculture and Fisheries, and many other voluntary and semi-public Associations and Institutions, i.e., such as Health Associations, Care Committee Associations, Day Nursery Associations, the Mansion House Council on the Dwellings of the Poor and others.

My Committee feel that the overlapping and confusion that already takes place should be corrected and are strongly of opinion that the various duties and functions of these several Authorities should be defined and co-ordinated in order that some one Authority may be able to deal effectually with the matters and so prevent unnecessary expense, irritation to the worker and confusion.

Moreover, it is found as a matter of experience that this exaggerated over-inspection is defeating the very aim and object of all proper and reasonable inspection as shown by the fact that 447 outworkers in this Borough last year gave false names and addresses in order to escape what they term perse-

cution and harrassing by so many Inspectors and inquiries by various officials.

I will report the receipt of your letter to the next meeting of my Committee.

I am, Sir,

Your obedient servant,

(Signed) JOHN FOOT."

## NEW LEGISLATION.

The London County Council (General Powers) Act, 1909, was passed during the year. Part III, Sec. 16, relates to the storage of food in tenement houses and enacts that if in any tenement house it appears to the Sanitary Authority, that sufficient and suitable accommodation for the storage of food is not provided for any family having lodgings in the house, the Authority may, if the provision of such accommodation is practicable, require accommodation to be provided.

Provision is made for the application of certain sections of the Public Health Act in carrying out the powers conferred by the above mentioned section, including power of appeal by aggrieved persons to the quarter sessions, the final decision as to a purely public health matter being in no way within the province of the local public health authority.

The only other matter dealt with in the Act in any way concerning a health authority is the empowering of any metropolitan borough council to enter into agreement with the council of any other borough or the corporation, or any council having jurisdiction in areas adjoining the county, to provide public lavatories or sanitary conveniences on or in the vicinity of the areas in which the contracting councils exercise jurisdiction.

## FACTORY AND WORKSHOP ADMINISTRATION.

The following particulars from the report of the Chief Inspector of Factories on the administration of the Factory and Workshop Act, 1901, in respect of Workshops, Out-work &c. may be of interest. The report was issued in March, 1909; with regard to out-workers, Bethnal Green, with the exception of Belfast stands easily first in the United Kingdom in the recorded number of inspections these amounting to 5,474 as against 3,886 for a neighbouring borough, which stands third. Throughout the whole of the report this Borough compares most favourably with all other authorities.

## INFIRMARY DRAINAGE.

On the 26th June 1909, the Engineer to the Guardians called at the office stating that the drainage system at the Infirmary was choked and that all attempts to clear same had failed. In the emergency, men from this department were sent and the drain was cleared the same day. The chokage was caused by an accumulation of old bandages, rags &c. in the main interceptor trap where the drain leaves the Infirmary grounds. It was found that the man-hole containing the interceptor had been covered in during

the widening of Cambridge Road in 1904 when some portion of the Infirmary grounds was acquired and included in the widening. The man-hole as a result of this was left under the public carriage way being quite inaccessible. The cover was removed at that time and nothing remained to mark the site. Upon this fact being brought to the notice of the Board a request was made that your Committee should undertake the abolition of the old man-hole and and interceptor and construct anew within the Infirmary grounds. The work was eventually undertaken together with the subsequent flushing and examination of the whole of the drainage system including the rectification of any defects found.

On the completion of these works the following report was forwarded to the Clerk to the Guardians.

Public Health Department, 2, Paradise Row, N.E. 11th October, 1909.

D. Thomas, Esq.,
Clerk to Guardians,
Bishops Road, N.E.

Dear Sir,

## INFIRMARY DRAINS-FLUSHING.

In reply to your favour of the 8th instant as to defects found during the flushing and cleansing of the drainage system as suggested in my letter to you of the 25th August, I beg leave to report as follows:—

The examination and cleansing was commenced on the 27th August and finished on the 18th September.

Taken as a whole the system was found to be in fair working order and in as good condition as one would expect for a complicated system covering a large area of ground and laid some twelve or fourteen years ago.

Some settlement has naturally taken place at different points which settlement has apparently affected the branch and surface drains to a greater extent than it has the deep or main drains.

The most serious detects found were :-

- (1) A complete fracture and blockage in the branch drain next Charity Ward, which necessitated a relaying of the greater portion of this branch as well as the provision of a new chamber and cover.
- (2) Two gullies and branches completely choked with garden soil outside the two Wards or blocks immediately facing the administrative block on the south side and the residence of the Medical Superintendent on the north side. These two branch drains were cleared, gullies reset, and properly paved channel ways provided to and around each of the said gullies.
- (3) Gullies and branch drains (two) choked in the carriage way immediately facing the residence of the Medical Superintendent which necessitated opening the carriage way, clearing, and making good.
- (4) A blockage in the main drain under the carriage way at the point where the two branch drains connect and which was probably part of the stoppage referred to in No. 3 above. Carriage way opened, drain cleared, and made good.
- (5) A defective gully and connection (apparently crushed by traffic) on branch drain leading from the main

drain under carriage way at a point about midway from the entrance in Cambridge Road to the Medical Superintendent's residence. A new gully and connection provided and branch made good.

(6) Choked gully and drain necessitating opening to clear and making good near the Boiler House.

The works referred to in Nos. 1 to 6 above will with the provision of several gully grids and some minor details be entirely additional to the ordinary work of flushing and cleansing and has of necessity entailed a greater cost than the sum estimated in my letter of the 25th August already referred to.

Altogether I have discovered nothing that would go to justify any attempt to raise a foolish scare about the Infirmary drainage. The various alterations that have been made at several points during the past ten years or since the opening of the Institution are not of so good a quality or workmanship as the original construction and have certainly not enhanced the sanitary conditions of the whole.

These works emphasize more strongly than anything I can add the real necessity of insisting that whenever any sanitary works are required at any point whether such works may be mere local repairs necessary to remove a stoppage, the relaying of a sunken (or other) branch drain, the provision of an additional chamber or the refitting of a sanitary convenience, such works should be carried out under proper supervision on approved lines and with attention to the fact that to whatever extent the same may be necessary it must be carried out in strict relation to the whole. To patch a bit here and to fix an odd fitting there means neither more nor less than the damaging of the entire system.

Assuring you at all times of the best assistance of my Authority and its department.

I am, Dear Sir, Yours faithfully, JOHN FOOT." Arising out of the above the following instruction was issued by the Clerk to the Guardians, and it is to be hoped that in future no more will be heard of sanitary works being executed without notice to the authority:—

"..... Will you please instruct all officers under you, when dealing with the drains at any time, in future, to intimate to the Chief Sanitary Inspector of the district any defect, or intended alteration or addition to the drainage system at the Infirmary and Workhouse, in order that such alterations etc. may be carried out in accordance with the requirements of the Sanitary Authority....."

## OVERCROWDING AND POVERTY.

During the year the Committee continued their past practice in the case of overcrowded families whose condition was apparently due to poverty, of allowing a lengthy period for the abatement of overcrowding. In many cases the result was that the families concerned were able to turn the respite allowed to good account and upon the expiry of the notices served had managed to secure more accommodation, whereas doubtless with a strict application of the law they would have been compelled to enter the workhouse and break up their home; there being small reason to suppose they would ever be able to get another together again.

In many cases complaints of overcrowding were received from outside mainly philanthopic bodies requesting official action. Many of these cases were wholly due to poverty and would have more fitly been dealt with in a philanthropic manner than by the strict invocation of the law. In one particular case

sent in September last the following bald facts were set forth, no mention whatever being made of poverty:-Man and wife, and two girls aged respectively 15 and 13, and a baby, occupying one first floor room for both living and sleeping, one of the girls attending school in a verminous condition and the bedding being dirty. Upon inspection the following conditions were found: -Father a boot finisher till recently out of work and now on very short time; daughter aged 15, pattern card maker, earning 4/- per week; bed and mattress, but apparently no clothes for covering; the two girls slept on the floor. The Committee had the room and bedding disinfected immediately and gave a liberal period for the family to obtain more accommodation which they eventually did in November.

The following letter was, with the consent of the Committee sent to the person making the complaint:—

"Madam,

Adverting to your letter of the 18th, and in further reply thereto, as requested I beg to add for your information that there can be no doubt as to the rooms being overcrowded but this case like many others is very difficult to deal with on account of the poor circumstances in which the family are found to be living.

Such mattress and bedding as exist are dirty; they have no bed clothes for covering and it would not be surprising if the child attending school was at times verminous as there appears to be no change of linen or hardly any other necessities.

I shall, of course, report the facts to my Committee, but it seems that if they are turned out of this room they will only drift to another.

At present the income of the family is not enough for subsistence, without paying the rent of two rooms 7s. 6d. which they ought to have to abate overcrowding.

Yours, etc., JOHN FOOT."

There are scores of others and it is lamentable that so many of our so called overcrowding cases are simply the out-come of want of employment and may be far more aptly described as poverty cases. It is certain there will be no real remedy until some honest attempt is made to find these poor people regular work and to lift them bodily out of their squalid and wretched surroundings.

## REMOVAL OF OFFENSIVE REFUSE.

For some time past, endeavours have been made to secure a revision of the Bye-Laws of the County Council, respecting the removal of offensive refuse through the streets. The following report was submitted to the Council on the 20th May:—

Representations have in the past from time to time been made to the London County Council by the Council and this Committee on the subject of the times during which the removal of offensive refuse through the streets is allowed.

The limits of times at present allowed by the bye-laws made by the London County Council are as follows:—

Between 4 a.m. & 10 a.m. during March to October inclusive. Between 6 a.m. & 12 noon during the remainder of the year.

The representations made having failed to secure any amendment of these limits, the Council in March, 1907, upon the report of this Committee, who held a strong opinion that the removal of offensive refuse by the Council is the only way

to remove the difficulties in this matter, recommended the County Council to secure powers for Borough Councils in its next General Powers Bill to this end.

A suitable clause was inserted in the next London County Council (General Powers) Bill in consequence of this representation, but upon the appearance of the Act it was found that this clause had been excised.

We are still strongly of opinion that the most satisfactory method of removal of offensive refuse would be for the Borough Councils to be empowered to perform this duty. This opinion was supported by the various producers of offensive refuse in the Borough at the time of the above mentioned representation. We therefore

Recommend—That the London County Council be strongly recommended to include in its next General Powers Bill a clause enabling Borough Councils to carry out the removal of offensive refuse in the districts under their several jurisdictions, and that all possible steps be taken to secure that such provisions shall become law, the work being executed at the cost of the producers of offensive refuse.

The report was received by the Council and the recommendation adopted, but no indication has yet been given by the County Council that steps will be taken in the desired direction.

In October, in view of renewed complaints, an application was made direct to the County Public Health Committee to secure an amendment of the Bye-Laws by which the time for removal should be from 10 p.m. to 5 a.m. throughout the year, and the various Metropolitan Sanitary Authorities were asked to support the action taken by the Authority.

On the 2nd November, a reply was received from the County Council stating that that Authority could not entertain such a revision of the Bye-Laws as was suggested, being of opinion that collection and removal of offensive refuse should take place during daylight, this view at the time of making the present Bye-Laws being supported by the Local Government Board.

Of twenty-nine Authorities asked for their views on the proposed alteration, three did not reply, thirteen were in favour, five replied in the negative, two expressed no opinion and six advocated the use of removal in proper hermetically sealed vessels, which had been already recommended to the producers of offensive offal in this Borough by a circular letter, the contractors being prepared to provide one tin, the producer the other. Two Boroughs recommended entering into a formal contract for the removal of such refuse, but this is not quite suitable for us. Nothing short of the original suggestions made by the Committee will effect a solution of the matter.

## MILKSHOPS AND MILKSTORES.

Section 5 (1) of the London County Council (General Powers) Act, 1908, which came into force on January 1st, 1909, purports as pointed out in the last Annual Report, to give power to Sanitary Authorities to refuse to register or remove from the register any cowkeepers, dairymen or milk vendors, who carry on their business on premises, which in the opinion of the Authority, are unsuitable for the sale of milk therein. All this is, as was stated a year ago, subject to a proviso which is not quite intelligible, and to appeal to a court of summary jurisdiction, the sanitary

Authority not being now the final power for registration, refusal to register, etc. It was decided by the Committee that the only thing to do, was to work the section as far as possible, and in the first instance the following letter was sent to each registered milkseller in the Borough:—

DAIRIES, COWSHEDS & MILKSHOPS ORDER, 1885,

as amended by the

LONDON COUNTY COUNCIL (GENERAL POWERS) ACT, 1908.

Sir or Madam,

I am instructed by the Public Health Committee to direct your attention to the requirements of the above-mentioned Act.

Your are probably aware that with a view to ensuring a more cleanly and wholesome milk supply, further obligations are cast upon dairymen and purveyors of milk, and additional powers have been given to the Sanitary Authorities to enforce the same.

The Public Health Committee trust that dairymen will in their own interest take all necessary steps to so conduct their business that no official action may be necessary.

It is essential that the greatest care should be taken-

- To cause all pans, cans, vessels and other receptacles used for the sale and storage of milk, to be at all times kept in a cleanly condition.
- To insist upon the absolute personal cleanliness of the cowman, roundsman or any other person engaged in the handling of milk or serving customers.
- 3. To keep the shop floors, counters and the interior of all milk-shops, in a cleanly condition.

- That counter pans and other vessels containing milk shall be kept covered so as to prevent contamination by dirt, dust, flies, etc.
- 5. That milk shall not be stored near any offensive matter, such as paraffin oil, Dutch herrings, old clothes, rags, coal, etc.

Generally, the Committee will take the necessary legal measures to prevent the sale of milk by any person who fails to observe all reasonable requirements as to cleanliness and who omits, after notice from the Authority, to do whatever may be necessary for carrying into effect the requirements of the law as above mentioned.

I am,

Your obedient Servant,

GEORGE P. BATE, M.D.

Medical Officer of Health.

Following the issue of this letter a visit was paid to each milkshop in the Borough, and in those cases where the occupier had not fallen into line with the requirements, he was served with twenty-one days notice to do so. For the first few months a not too stringent interpretation was put upon the section, in order that the small trader and others should have every opportunity to make improvements. The whole thing now, however is a matter of general knowledge to those concerned, and they have had time to accommodate themselves to the new conditions, and it has latterly been felt that the requirements of the Authority should be strictly complied with in all respects. The Committee will therefore shortly be engaged deciding what further steps shall be taken.

During the year, eighty-one notices were served upon the proprietors of shops who were contravening the requirements laid down, seventy-four of these complied with the notices, the remaining seven being struck off the register and ceasing the sale of milk.

# FRIED FISH DEALERS, FISH CURERS, AND RAG AND BONE DEALERS.

The London County Council (General Powers) Act 1908 gives power to the County Council to make bye-laws with respect to the above mentioned businesses. Such power was very desirable, but the draft bye-laws framed and submitted to this authority for their opinion thereon were found to be objectionable in many respects. Two separate authorities, the County and Borough Councils were set up, which must of necessity cause needless expense, and irritation due to overlapping, to say nothing of divided responsibility. Further, the many requirements of the bye-laws as would in the vast majority of shops mean alterations of existing, or entirely new fittings and preparations of plans and specifications etc. elaborate arrangements as to furnaces and other appliances, would tend to crush out a large proportion of the small retailers in the borough.

At the instance of the Public Health Committee objection was raised to the draft bye-laws by the Council the main point raised being that of dual responsibility. The Bye Laws are being re-considered by the County Council and it is unlikely that any decision as to their final form will be reached for some little time yet.

## ALIEN IMMIGRATION.

During February a communication was received by the Town Clerk's Department from the Home Office asking for certain information as to the influx of aliens, and the following letter on the subject was sent to the Deputy Town Clerk upon which to base his reply:—

> "Public Health Department, 2, Paradise Row, N.E. 9th February, 1909.

C. G. E. Fletcher Esq., Town Hall, N.E.

Dear Sir,

#### Re ALIEN IMMIGRATION.

Adverting to our conversation last evening, respecting the information required in this matter, I fear it is somewhat difficult to reply to each question on the matter in detail, as that would mean a census of several streets in the Borough.

In a general way I should say that the increase in the alien population as compared with 1903 has not been so great as the previous five, ten, and fifteen years, so far as Bethnal Green is concerned. This does not follow that the alien immigration into London has been less in bulk, but that it has in fact heen diverted to some extent into the suburbs, especially Tottenham, Edmonton, Ponders End, etc. This arises mainly through certain manufacturers having removed their works from the central area.

With regard to the extent of overcrowding, that again is difficult to determine precisely except by actual early morning or late at night visits, but speaking generally there is of course a tendency shown by the alien to overcrowd more than is the case with the native except in the poorest sections of our own people, in which case overcrowding of course is simply a phase of the poverty question.

As to the number of cases, it can only be said that we are repeatedly serving notices and, as it were, moving on from house to house, which as you are aware, does not provide any permanent remedy.

As regards the effect on empty premises, especially on shops and warehouses, I have not the slightest doubt that the large increase of street dealers and coster-mongers, mainly alien, has tended and does tend to keep many premises empty that would otherwise be occupied but for the fact that this street trading is now so largely permitted.

Speaking generally again, and as a result of twenty years experience during which time I have seen the alien population increase from one or two streets only south of the railway in Brick Lane to now a large portion of both South and West Wards and other parts of the Borough generally, I should say that the effect has been generally hurtful to the conditions of labour and the social and economic condition of the district.

This would especially be felt in the cabinet-making, tailoring, and shoe-making industries and in that portion of the building trades that are engaged in repairs of house property which especially comes under my notice.

It is a well known fact that these aliens compete first with our own workmen, and, later on, amongst themselves, that they will work longer hours at lower prices, with the effect that an already poor and congested district is much "worsened" by their presence and keen cutting competition in every direction.

Yours faithfully,

## JOHN FOOT.

P.S. In serving notices for overcrowding the Inspectors of course do not specify aliens, consequently I am unable to give the number of notices served in respect of them."

# RE-ARRANGEMENT OF SANITARY INSPECTORS' DISTRICTS.

For some time past a feeling has existed that the apportionment of the districts of the Sanitary Inspectors should not be a practically permanent arrangement, but that a change of districts should take place more or less frequently. Each of the Inspectors had been allocated to the same districts for many years, and in June a Sub-Committee was appointed to enquire into the duties and districts, and to recommend any apparently necessary changes. The Sub-Committee surveyed the work of the whole department, but beyond the change of Inspectors' districts, were of opinion that no useful purpose could be effected by any further alteration.

The changes recommended and put in force by order of the Committee were as follows:—

Inspector	Henley-C	hange from	district	Е	to	district	В.	
The same of the sa	Richardo		1.				-	

Do.	Richards	do.	do.	A	do.	E.
Do.	Bridel	do.	do.	В	do.	F.
Do.	Ainley	do.	do.	F	do.	Α.
Do.	Bare	do.	do.	C	do.	D.
Do.	Weeks	do.	do.	D	do	C

The sanitary districts have the following limits:-

## DISTRICT A.

The portion of the borough east of Cambridge Road from St. John's Church to the boundary at Vyner Street; thence east to the boundary at Skewbridge, Old Ford Road, together with the north side of Green Street; from Cranbrook Road back to St. John's Church.

#### DISTRICT B.

The south side of Green Street from St. John's Church to the Canal Bridge, together with the remaining portion of the East Ward, south of Duckett's Canal.

#### DISTRICT C.

The south side of Bethnal Green Road, East, from Mape Street. The west side of Cambridge Road, from Bethnal Green Road to the boundary at Mile End Gate. The east side of Mape Street, along London Street, down to Brady Street, to the Whitechapel boundary.

#### DISTRICT D.

The portion of the borough between the south side of Bethnal Green Road, West, from Mape Street to the boundary at Shoreditch. The west side of Mape Street, along Waterloo Terrace to the boundary at Selby Street and Vallance Road.

#### DISTRICT E.

The north side of Bethnal Green Road throughout. The west side of Cambridge Road, from Bethnal Green Road to Old Bethnal Green Road, thence along the south side of Old Bethnal Green Road, Wellington Row and Columbia Road to Hackney Road, and from thence along the Shoreditch boundary south to Bethnal Green Road.

#### DISTRICT F.

The west side of Cambridge Road from Old Bethnal Green Road to the boundary at Cambridge Heath Bridge. The north side of Old Bethnal Green Road, Wellington Row and Columbia Road, and the remainder of the borough north thereof.

## ICE CREAMS.

A large retail trade in the commoner classes of ice cream is carried on during the summer months.

All ice cream vendors are registered and upon registration are supplied with a copy of the requirements relating to their trade. Frequent inspection of their premises is made both with a view to general sanitary conditions and the special requirements relating to the manufacture of ice cream in the L.C.C. (General Powers) Act 1902. (See appendix H).

In one case only did question arise concerning the connection of ice cream with danger to health; in this case neither the purity of the ice cream nor method or conditions of manufacture were impugned, an attack of acute gastritis terminating in death following the consumption of ice cream while in a very heated condition.

## STALL HOLDERS.

In July a letter was received from the London County Council enquiring as to the desirability of promoting legislation over the sanitary condition of barrows and stalls from which foodstuffs are sold. The need for such powers had certainly never been experienced in this borough, where quite as a matter of course the inspectors pay all necessary attention, in connection with the inspection of foodstuffs, to the barrows, stalls, premises, etc. from which such foodstuffs are sold, and have never experienced any difficulty in the matter.

During the year the question of stall-holders, particularly butchers, placing meat, etc. on the footway and roadway as a convenient temporary storage place was raised and the following letter was sent to all stall holders trading in food-stuffs.

#### METROPOLITAN BOROUGH OF BETHNAL GREEN.

"Public Health Department 2, Paradise Row, N.E. 26th September, 1909.

To Stall Holders, Butchers, Greengrocers, etc.

Complaint having been made to this authority respecting the practice of butchers and greengrocers placing meat, vegetables and other eatables, on the roadway, the Public Health Committee have instructed me to call your attention to the same and to request that in their own interests butchers and stall holders will cease from so doing and will either provide a shelf or boxes on which to place their goods so that the same may be at least some foot or eighteen inches from the roadway.

I am directed to add, in addition to this caution, that, if the above practice should be found to be continued. the Public Health Committee will take such legal proceedings as they are advised againt any stall holder or other person who shall place any food intended for human consumption on to the road or foot-way or into the gutter or any part thereof.

It is hoped that traders will in their own interests take every precaution to carry out the above request.

JOHN FOOT, Chief Inspector."

This letter in conjunction with the close attention of the inspectors has effected a marked improvement in the matter.

Attached to this report are the usual detailed items tabulated and set forth under the several Appendices A to U. Full particulars of all the various duties performed will be found in these appendices which I venture to submit contain evidence of a full and useful year's work having been carried

out by your staff. As regards the officers, both Inspectors and Clerks have all done good service and where everyone has done excellently well, it would perhaps be somewhat invidious to mention one more than another, except perhaps to again direct attention to the constant and continued growth of the clerical work of the department.

I therefore conclude this report with my best thanks to each and all of my colleagues for most cheerful and ready assistance rendered throughout the year, often under difficult and trying circumstances. On their behalf I respectfully beg to commend their efforts to your best consideration

I desire to acknowledge the assistance of your Committee and to thank you for continued support and confidence,

I have the honour to be, Mr. Chairman and Gentlemen,

Your most obedient Servant,

JOHN FOOT,

Chief Inspector, 1895. Certificate Sanitary Institute, 1888. Member Royal Institute of Public Health, 1892.

APPEN

Total Number of Inspections and Particulars of Cases in Hand

District.	Infectious Cases.	Complaints,	House to House Inspections.	Trades' Inspections.	Re-inspections,	Milkshop Inspections.	Factory and Work- shop Inspections.	Outworkers' Homes Inspections.	Tenement House Inspections.	New Buildings Inspections.	Ice Cream Shop Inspections.
A	150	116	30		2241	195	784	753	45	1	33
В	208	127	365		2157	196	619	1001	282	1	50
С	172	340	70	1	2892	228	388	486	249		11
D	169	302	741	55	3265	255	417	482	334	1	72
E	244	390	236		2980	154	627	1053	248	18	47
F	170	191	293	60	3086	240	644	1080	128	11	51
	82	30	4		1301	4	99	278	65	153	***
		13		902							
TOTALS	1145	1509	1739	1018	17872	1272	3578	5083	1351	185	264

DIX A.

for the year ended 31st December, 1909.

Combined Drainage Inspections.	Smoke Nulsances— Premises under Observation.	Other Inspections or work of Special Character	Number of Calls.	Unsound Food Seizures.	Samples of Food and Drugs taken.	Police Court Attendances.	Nuisances Abated.	Number of Cases in Hand.	Total Visits for the Year.	Inspector,
	***	89	148	2	78	27	630	98	4585	E. AINLEY.
		148	75		94	5	812	38	5229	A. S. HENLEY.
		71	86		92	23	814	31	4994	J. J. WEEKS.
	22	134			115	16	1028	50	6249	F. T. Bare.
		78	107		91	7	906	93	6132	Evan Richards
		142	82		84	4	902	45	6128	H. F. BRIDEL.
539		1	42				99		2548	I. R. Jones.
	635			4	113	17			1550	WM. ROWSELL.
539	657	663	540	6	667	99	5191	350	37415	

APPENDIX B.

List of Nuisances and Insanitary Conditions generally, discovered during the year 1909.

	Pe	eriod.	Dirty Premises.	Defective Drains.	Defective and Dirty W.C's.	Defective Water Supply	Smoke Nuisances.	Other Matters.	TOTAL,	
-	1	909								-
4 weeks	ending	30th January	221	25	142	63	1	267	719	
4 ,,	,,	27th February	263	- 7	102	94	1	294	761	
5 ,,	٠,	3rd April	293	11	125	92	1	364	886	Co
4 ,,	.,	1st May	253	27	128	19		276	703	36
4 ,,	"	29th May	273	12	41	29	5	287	647	
5 ,,	21	3rd July	441	12	73	21	. 5	397	949	
4 ,,	**	31st ,,	272	12	53	18	1	808	664	
4 ,,	"	28th August	129	10	32	16	1	119	307	
5 ,,	11	2nd October	675	16	136	53	1	770	1651	
4 ,,	,,	30th .,	531	13	119	48	3	577	1291	
4 ,,	"	27th November	359	5	73	14	2	446	899	
5 ,,	"	1st Jan., 1910	391	23	76	27	2	483	1002	
	Total		4101	178	1100	494	23	4588	10479	

### APPENDIX C.

APPENDIX C.		
LIST OF SANITARY IMPROVEMENTS EFFECTED DURING	G THE	YEAR.
Cleansing—		
Premises, &c., cleaned, repaired or whitewashed		4,589
Workshops ditto ditto		827
House Drains—		
Drains relaid		141
Drains amended		166
Drains cleared		337
Drains trapped and ventilated		13
Rain water pipes and waste pipes disconnected		11
Sink and bath waste pipes trapped		35
WATER CLOSETS-		
W.C.'s repaired, cleaned, &c		1,820
W.C.'s fitted with new pans and traps		269
W.C.'s supplied with water, and water supply ap	paratu	
W.C.'s ventilated		15
W.C.'s rebuilt		5
New W.C.'s provided		39
Partitions provided round W.C.'s to separate san	ne fron	1
workshops		4
WATER SUPPLY—		
		100
House supply disconnected from W.C. sixty		192
House supply disconnected from W.C. cistern		49
Cisterns supplied, repaired and cleaned	•••	43
Miscellaneous—		
Paving of yards		612
Washhouses paved		42
Forecourt and Areas paved and drained		34
Stables paved and drained		14
Removal of accumulation of Dung and other refu		178
Removal of Animals improperly kept		31
New Dung-pits provided and covers for same		19
Premises closed previous to executing the necessar		
Gutters, Rainwater Pipes, and Waste pipes repair	red	772
Illegal occupation of Basement discontinued		6
Overcrowded abated		131
Urinal accommodation provided		11
Grids provided to Gullies		37
Urinals supplied with proper water supply		19
Urinals cleaned		21
Dust Shoots repaired and Receptacles provided		588
Vacant lands cleansed		1
Yards cleansed		137
Indecent occupation discontinued		14
Verminous Rooms remedied		273
Dama Pages remedied		148
Lighting and Vantilation improved	•••	170
Lighting and ventuation improved	•••	110
Total		12,561
10tai		12,001
	_	

APPENDIX D.

Police Court Proceedings, 1909.—Public Health (London) Act, 1891.

Date		Defend	lant	Offence	Inspector	Magistrate	Result
190	9	1				1 .	
Jan.	5	С.Н.	Ρ.	Fitting sink waste and closet improperly (2 summonses)	A. S. Henley	Mr. Cluer	Withdrawn upon satisfactory alterations being made.
"	21	T.S.		Maggoty biscuits deposi- ted for sale	E. Richards	Mr. Biron	Fine £40; costs £1 1s.
June	22	Α.		Non - compliance with notices (5 summonses)	A. S. Henley	Mr. Cluer	Work done; costs paid, 15s.
July	20	J.S.		Exposing for sale un- sound cherries	W. Rowsell	"	Fined £2; costs, 2s.
"	20	J.G.		Ditto	,,	,,	Fined £3; costs, 2s.
"	27			Ditto	"	"	Fined £2.
Sept.	21	J.R.		Failing to maintain drains in proper state	J. G. Weeks	"	Costs, 2s.
"	21	,,		Executing drainage works without notice to Sanitary Authority	"	"	Dismissed; costs against Authority, £2 2s.
,,	21	"		Failing to maintain drains in proper state	,,	,,	Fined £2; costs, £3 3s.

## Police Court Proceedings, 1909.—Public Health (London) Act, 1891.—continued.

Date of hearing Defendant		Defendant	Offence	Inspector	Magistrate	Result			
,,	21	,,	Executing drainage works without notice to	J. G. Weeks	Mr. Cluer	Dismissed.			
,,	21	,,	Authority Repairing drains, &c., so as to be a nuisance	"	"	Withdrawn; costs against Authority £2 2s.			
,,	28	,,	Non - compliance with	"	"	Fined £2; costs, £2 2s.			
"	28	,,	Constructing untrapped sink waste pipe	"	"	Fined £1; costs, £1 1s.			
"	28	,,	Waste pipe constructed so as to discharge con- trary to Bye Laws	"	"	Withdrawn.			
,,	28	M.G	Exposing unsound rasp- berries for sale	E. Ainley	"	Defendant absconded before service of summons.			
"	28	н.м	Exposing unsound pears for sale	"	"	27 27 27			
Dec.	2	M.G	Exposing for sale unsound fowls	W. Rowsell	Mr. Biron	Sent to prison, 3 months.			

## APPENDIX E. (1).

Sale of Food and Drugs Acts, 1875—1907.

Samples taken officially and submitted for analysis during the year.

Article			Total No. of Samples taken.	Genuine.	Adulterated
Blaud Pills			1	1	
Bread			1	1	
Butter			116	113	3
Camphorated Oil			12	12	
Cheese			4	4	
Cocoa			16	16	
Coffee			19	18	1
Cream of Tartar			1	1	
Dripping			8	3	
Iron & Ammonia T	onic	Powder	1	1	
" Quinine	"	19	1	1 6	
Jam, Raspberry			8		2
Margarine			1	1	
Marmalade			4	4	
Milk			421	391	30
Mustard			5	5	
Paregoric Essence			1	1	
Pepper			18	18	
Rhubarb, Powdere	d		4	4	
Salad Oil			1	1	
Sausages			1	1	
Sherbet			2 1	2 1	
Sweets				1	
Tea Dust			1	1	
Vinegar			1	1	
Totals			644	608	36

APPENDIX E (1).

Police Court Proceedings.—Sale of Food and Drugs Acts, 1875-1907.

Date		Defendant	Offence	Inspector	Magistrate	Result	
190	9						
Feb.	9	B.R	Selling butter containing 77 per cent. foreign fat	W. Rowsell	Mr. Cluer	Fined £4.	
,,	9	,,	0 111	,,	,,	Withdrawn; conviction on other	
,,	23	Е.Н		A. S. Henley	,,	summons re same sample. Fined £2.	4
Mar.	2	M.J	Do. do.	E. Ainley	"	do. £5.	_
,,	2	S.L	Selling milk 12 per cent. deficient in butter fat	F. Bare	. ,,	do. £5.	
,,	23	т.ј		E. Richards	,,	do. £6.	
"	30	J.H	Selling milk 15 per cent. deficient in butter fat	A. S. Henley	,,	do. £3.	
June	8	н.р		J. G. Weeks	,,	Ordered to pay costs, £3.	
"	8	S.G		F. Bare	"	Fined £4.	
"	22	J.B	Selling milk 8 per cent. deficient in fat	W. Rowsell	"	do. £2.	

## Police Court Proceedings.—Sale of Food and Drugs Acts, 1875-1907—continued.

	Date of Defendant Offence		Offence	e Inspector Magistrate		Result.
June	22	N.T	Selling butter containg 81 per cent. foreign fat	E. Richards	Mr. Cluer	Fined £3.
"	23	J.M	Selling milk containing 19 per cent. added water	W. Rowsell	,,	Fined £40 or 3 months; went to prison
July	20	S.L	Selling milk 18 per cent. deficient in fat	J. G. Weeks	**	Fined £2; costs 2s.
"	27	A.B	Selling milk containing 10 per cent. added water	H. F. Bridel	"	Costs only, 12s. 6d.
,,	27	J.J	Selling milk containing 6 per cent. added water and	W. Rowsell	"	Fined £30.
		summonses)	15 per cent. deficient in fat			
,,	27	S.L	Selling raspberry jam containing 30 per cent. apple	>>	,,	Withdrawn in view of evidence that some notice of mixture was given.
Aug.	17	S.M	Selling milk containing 8 per cent. added water	F. Bare	"	Costs only, 12s. 6d.
Sept.	28	B.S	Selling coffee containing 36½ per cent. chicory	J. G. Weeks	"	Fined £2.
Oct.	5	H.G	Selling milk 25 per cent. deficient in fat	F. Bare	"	Fined £3.
Nov.	9	I.F	Selling milk 20 per cent. deficient in fat	,,	Mr. Biron	Fined £2; costs £1 3s.

## Police Court Proceedings.—Sale of Food and Drugs Acts, 1875-1907—continued.

Date of hearing	Defendan	Offence	Inspector	Magistrate	Result
Nov. 9	F.C	Selling milk containing 13 per cent. added water	J. G. Weeks	Mr. Biron	Costs £1 3s.
" 9	A.W	Selling raspberry jam containing 15 per cent. apple	,,	"	Fined 10s.; costs £1 3s.
" 9	т.ј	selling milk 17 per cent. deficient in butter fat	W. Rowsell	,,	Fined £10; costs £1 3.
,, 16	J.B		J. G. Weeks	"	Withdrawn; warranty proved.
,, 16	A.D		,,	"	Fined £2; costs £1 3s.
Dec. 21	H.C		>>	"	Fined £5; costs 12s. 6d.
" 21	G.T		A. S. Henley	" "	Fined £1; costs 12s. 6d.

The following is a summary of legal proceedings, etc., taken in connection with the above-mentioned cases:—

No. of Adulterations	Other offences under Sale of Food and Drugs Acts	No. of Summonses Issued,	No. of Convictions obtained,	No of Cases Dismissed.	No. of Sum- monses With- drawn.
37	8	33	28		5

The difference between the number of offences reported and the number of summonses issued is to be explained as follows:—In two cases a notice was exhibited in the shop at the time of purchase, which notice was of such a character as to protect the vendor; in five cases the sample was taken in the evening from a very small quantity of milk which had been frequently dipped from earlier in the day, and was found to be deficient in cream. In the latter cases the Committee exercised the discretionary powers vested in them, and in each case a caution was administered, the deficiency being very small and it being very probable that constant dipping without the necessary stirring would tend to remove an undue proportion of cream. In none of these cases had previous convictions been recorded.

Five summonses were withdrawn for the following reasons:—
In four cases two summonses were issued in respect of two offences in connection with the same sample, and in each case the second summons was withdrawn upon a conviction being obtained in respect of the first. In one case there appeared to be proof that the vendor had given some notice to the inspector's agent respecting the nature of the article purchased, and the summons was consequently withdrawn.

### APPENDIX E. (3)

FOOD AND DRUGS.

# Table showing Percentage Adulteration for Decennial Period 1899—1908.

Comparison with 1909.

Year.	No. of Samples Taken.	No. Adulterated.	Per centage Adulterated
1899	201	42	20.4
1900	186	35	15.8
1901	326	62	16.0
1902	896	57	14.4
1903	485	64	11.7
1904	609	79	12.9
1905	653	75	11.4
1906	671	87	12.9
1907	682	45	6.6
1908	617	52	8.4

Decennial average percentage adulteration 13·05

1909 644 36 5·9

#### APPENDIX E (4).

## Food and Drugs.

## Samples taken for General Information.

Articl	е		No. of Samples Purchased	No. Reported Genuine or containing no preservative	No. Reported Aduterated or containing perservative
Ambou Com			4 / 3/18	la constitution of	7.5
Amber Syrup	***		1	1	
Beef Sausages			2	2	
Biscuits, Broken			3	3	
Bread			1	1	•••
Condensed Milk			1	1	
		***	1	1	
Lemonade and Sh	erbet		1	1	
Milk			5	2	3
Nut Lard			1	1	
Pea Flour			3		***
Soda Water				3	
		***	3		***
Sprats, Pickled	•••		2	2	
Totals			23	20	3

Of the above samples eleven were examined by the Clinical Research Association, Ltd., and the remainder by the Public Analyst. No action could be taken in the case of adultered samples, owing to the fact that they were purchased privately and not divided in the official manner. The knowledge gained proved most useful when dealing with the vendors upon subsequent occasions.

## Samples taken on Delivery.

The following Samples were taken on delivery from wholesale firms delivering goods into the Borough.

		Milk	Jam	Total
Cambridge Heat	h Station	 8		8
Various shops		 16	2	18
				.26
All Genuine.				

#### APPENDIX F.

## Particulars of UNSOUND FOOD

Seized and Surrendered.

SURRENDERED BY VARIOUS TRADESMEN:-

			tons.	cwts.	qrs.	st.	lbs.
Vegetab	les		7	0	0	I	IO
Fish			I	5	0	I	13
Meat				3	0	0	2
Fruit	••••			I	3	I	0
Motzas						I	6
		Total	8	10	2	0	3

also 3 Rabbits were surrendered.

SEIZED BY INSPECTORS:

		cwts.	qr.	st.	lbs.
Biscuits	••••	I	2	0	12
Fruit.		2	1	I	II
	Total	4	0	0	9

also 5 Fowls were seized.

TOTAL AMOUNT OF FOODSTUFFS CONDEMNED: -

tons.	cwts.	qrs.	st.	lbs.
8	14	2	0	12

Rabbits—3 Fowls—5

#### APPENDIX G.

ALLENDIA G.		
Places where food is prepared for sale.		
Number of premises on register at end of 1909		223
Number of premises removed during 1909		16
Number of premises added during 1909		14
Number of Nuisances reported		114
Number of visits	1,	072
Number of notices served		52
Number of Prosecutions	:	Nil.
APPENDIX H.		
Ice Cream Shops.		
Number of premises on register at end of 1909		88
,, ,, ,, 1908		78
Number of premises removed from register		
during 1909		9
,, added to register		10
during 1909		19
Number of visits paid to premises by Inspector and particulars entered in register		331
No. of notices written and served for the		
abatement of Nuisances and Insanitary	y	
conditions	••••	69
APPENDIX I.		
Inspection, etc., of Bakehouses.		
Number on Register at end of 1908		87
,, ,, 1909		89
Number above ground		62
Number under ground		27
Number of Inspections		259
Number of Notices		24
Number of Prosecutions		-

APPENDIX J.

Inspection of Places subject to Special Bye-Laws and Regulations.

Premises.			No. of	PLACES.	N 6			
		On Register at end of 1908	Added in 1909	Removed in 1909.	On Register at end of 1909	No. of Inspections.	No. of Notices.	No. of Prosecutions,
Milk-shops		342	31	46	327	1320	155	
Cowhouses		16			16	77	4	
Slaughterhouses		6		I	5	23		
Other offensive trade								
premises		I			I	4		

APPENDIX K.

## Outworkers, 1909.

Year.	No. of Lists received from outworkers.	No. of Outworkers comprised therein.	Reported from other Boroughs.	Reported to other Boroughs.
1908	198	3,286	3,055	1,684
1909	194	3,085	3,599	1,463

Number of outworkers dealt with in 1909 .... 6,684

" " " 1908 .... 6,341

—

Increase over 1908 .... 343

#### APPENDIX K (1).

## Outworkers, 1909.

The following is a list of the trades in which outworkers are employed, and the number of workers engaged therein.

Artificial flower n	naking		18	Mantle making		15
Baby linen maker	rs		2	Millinery		. 18
Bathing costume	maker		1	Paper bag making		9
Belt makers			37	Paste fitting		- 5
Blouse makers			31	Pianoforte making		4
Bonnet making			3	Pom-pom making		4
Boot and shoe ma	aking		569	Shirt making		14
Box making			650	Silk winding and		
Brace making			3	weaving		64
Brush making			223	Skirt making	•••	18
Button hole maki	ng and			Slipper making	• • • •	50
covering			2	Stay making		. 8
Cabinet making			11	Tailoring		481
Cap making			11	Ties and bow work		37
Chair making			2	Trimmings		52
Collar making			9	Trouser making		103
Curtain nets, etc.			3	Umbrella making		28
Dressmaking			20	,, tassels		5
Embroidery			14	Underclothing		25
Feather curling			3	Upholsterers' trimmin	ngs	26
Fur slip stitching	& trim	nming	3	Waistcoat making		30
				Total		2,611

Of the above number of outworkers, 922 were incorrectly reported or had discontinued work.

#### APPENDIX L.

## TENEMENT Houses.

Number of houses registered		517
Number of houses registered during 1909		23
Number of houses removed from register		
4411118 -303		23
Visits paid to registered houses by Inspector		
and particulars recorded in register		,323
Registration forms written and served		22
Cases of overcrowding abated		8
Cases of indecent occupation abated		- 6
Number of notices served for Insanitary		
Conditions		659
Basements found to be illegally occupied		2
ADDUNDIA M		
APPENDIX M.		
REPORT ON SMOKE OBSERVATION DU	RING	
THE YEAR 1909.		
Number of shafts kept under observation—	about	100
Number of hours spent in observation		376
Number of intimation notices served		25
Number of Statutory notices served		4

APPENDIX N.

Particulars respecting Work of Disinfectors and Shelter.

Mor	nth		No. of Rooms Disinfected	No. of Rooms Disinfected by request for Phthisis, &c.	No. of Schools Disinfected	No. of Articles destroyed	No. of Articles of Bedding, &c., disin- fected at Station	No. of Cases in which Shelter was used	No. of Persons accommodated at Shelter	No. of hours for which shelter was occupied	
			00	05		10	1000				
anuary		•••	99	25		18	1809	***	***	•••	
February			102	43		7	2062		***	***	
March			79	28		8	2328	1	3	.9	53
April			64	28		8 2	2880				-
May			94	18			2922				
June			90	22			2943	1	2	10	
July			103	13		2	2653				
August			107	18			4328				
September			146	29	1	2	1996	1	4	9	
					1	2		1			
October			102	21		2	1769	1	4	6	
November	***		77	16		21	2031	1	4	17½	
December			65	25		5	1452				
Тот	ATC		1,128	281	1	67	29,168	5	17	511	

The Formalin Chamber proved of great use on many occasions in the disinfection of articles made from materials which would have been spoilt by steam disinfection. 1,345 articles were treated in the chamber, comprising boots, boot uppers, dress material, books, toys, &c. and one set of harness from the Works Department.

Under the Cleansing of Persons' Act, fourteen men and one boy were given baths and their clothing passed through the disinfecting apparatus.

#### APPENDIX N (1).

Forty Casks of Sanitas Powder (two tons), making up into 2,800 packets, have been distributed from the Offices.

Two hundred 1-pint bottles of Sanitas Fluid and two hundred and twenty-four 1-pint tins of Izal Fluid have also been distributed from the Offices.

Twelve hundred-weight of Sulphur Candles has been used in the disinfection of rooms throughout the year. Half a gallon of Formaldehyde, 40% solution, has been used in spraying the walls of rooms, 6½-lbs. of formalin tablets have been used for fumigating in certain cases instead of Sulphur Candles.

A gallon-and-a-half of Carbolic Acid has been used for disinfection in connection with Enteric Fever cases.

#### APPENDIX O.

#### Mortuary Returns for 1909.

#### Bodies removed to Mortuary—

On Coroner's Orders			 260
By Police			 14
By Firemen			 
From London Hospital			 19
On Sanitary Inspectors'	Order		 2
On Request of Relatives			 47
		Total	 342

Number of Inquests held					
Number of Post Mortem Examinations made					
Particulars of bodies on which Inquests were held—					
Bodies removed by Police from Great Eastern Rai	lway	1			
Ditto ditto Canal		2			
Ditto ditto Street, etc.		8			
Ditto ditto Found in Parcels		2			
Bodies received from Bethnal Green Infirmary		34			
Ditto Bethnal House Asylum		3			
Ditto Queen's Hospital		24			
Ditto Mildmay Mission Hospital		6			
Ditto Private Houses, etc		195			
Total		275			
Town to the state of the state					
Inquest cases according to age periods—					
Number under one year		76			
Number over one year and under five years		29			
Do. five do. ten do.		8			
Do. ten do. twenty years		10			
Do. twenty do. forty do.		24			
Do. forty do. sixty do.		54			
Do. sixty do. eighty do.		62			
Do. eighty		12			
Total		275			
		_			
Causes of death in Inquest cases—					
Abscess		2			
Acute Gastritis		1			
" Peritonitis		8			
" Meningitis		1			
Apoplexy		12			
Atelectasis		4			
Bronchitis		10			
Broncho-Pneumonia		6			
Cancer		3			

Cau	ses of death in inquest cases-	-continued-	· Lasanna L	
	Cardiac Valvular Disease			 12
	Chronic Cystitis			 1
	" Enteritis			 1
	" Liver Disease			 1
	,, Nephritis			 2
	Congestion of Lungs	*115		 2
	Convulsions			 13
	Dropsy			 4
	Diphtheria			 1
	Enlarged Thymus Gland			 1
	Fatty Degeneration of Hear	t		 6
	Gastro-Enteritis			 2
	General Tuberculosis			 4
	Inanition			 5
	Internal Bleeding			 2
	Marasmus			 1
	Measles			 3
	Natural Debility			 4
	Phthisis			 15
	Premature Birth			 7
	Pneumonia			 10
	Pleurisy			 4
	Rupture of Aneurism of Aor	rta		 4
	Septic Pneumonia			 1
	Senile Decay			 7
	Still Born			 6
	Strangulated Hernia			 1
	Spasmodic Asthma			 1
	Spasm of Glottis			 1
	Vomiting Indigestion			 1
Ac	cidental Deaths—			
	Falls			 29
	Suffocation in bed			 23
	Do. while in a fit			 2
	Do. at Birth			 1
	Burns			 14
	Scalds			 1
	Run over in the street			 4

Causes of death in Inquest cases	s—continu	ed—		
Want of attention at Birth				2
Misadventure				3
Ptomaine Poisoning				3
Death due to Chloroform				2
Chronic Alcoholism				8
Homicide—self defence				1
Manslaughter				1
Wilful Murder				1
Suicide—				
			0	
Hanging			6	
Gas Poisoning			1	
Poisoning			3	
Cut Throat			1	
Drowning			2	
Fall from window			1	
Run over on Railway			1	15
		Total		275
Bodies received under the Public	c Health	Act—		
Diphtheria			4	
Typhoid			1	
Measles'			1	
	Total		6	

#### APPENDIX P.

OVERCROWDING AND HOUSE TO HOUSE INSPECTIONS.

Number of dwelling rooms overcrowded in 1909	140
do. do. remedied in 1909	131
Number of Prosecutions	Nil
Number of House to House Inspections in 1909	1,739
Number of defects discovered	2,517
Number of notices served	1,162

#### APPENDIX Q.

The complaints\* received from public and semipublic bodies during the year, were as follows:—

London	County	Council				2
London	County	Council	smoke	compla	aints	
		officers				4
H.M. Fa	ctory Ins	pections				60
Mansion	House C	Council (L	ocal Sa	nitary A	Aid	
	Commit	tee)				94
Metropo	litan Wa	ater Boar	rd (Not	ification	n of	
		of suppl				66

<sup>\*</sup> Those of the Mansion House Council no longer represent complaints as usually understood, that is by aggrieved persons writing them soliciting assistance to obtain the abatement of some alleged insanitary condition. In many instances they visit a street house-by house which is a deviation from original procedure. Probably over 50% of these "complaints" could not be called legal nuisances but we do our best to secure attention to the same, with fair success.

## APPENDIX R.

## CLERICAL WORK.

Intimation notices written and served		5,512
Statutory do. do		2,112
Entries in Nuisance Register		6,642
do. Tenement Houses Register		3,004
do. Food and Drugs do.		667
do. Workshop do		6,394
Notice respecting Combined Drainage		79
Smoke nuisance notices written and served		
(Intimation)		25
Smoke nuisance notices written and served		
(Statutory)		4
Final notices prepared and served		617
Letters written		2,693
Briefs and Instructions to Solicitor prepare	d	47
Summonses prepared (4 copies each)		53
School notifications prepared and dispatche	ed	2,264
Notices to District Surveyor		70

#### APPENDIX S.

Works carried out and in progress by Combined Drainage Staff during the year.

#### Relaying Combined Drains.

19-23, Allas Road.
97, Bishop's Road.
12-18, Buckhurst Street.
74, Barnet Grove.
45-49, Quilter Street.
379, Cambridge Road, and
Arches in rear.

5-15, Chilton Street. 1216, Columbia Road. 121, Ion Square. 1-17, Dagnall Place. (19-25, Dagnall Place. (77, Pereira Street. 11-22, Durant Street. (214, Green Street. (65, Moss Street. 2-7, Lawfranc Road. 65-67, Morpeth Street.

#### Other Works.

74, Bacon Street:—New frontage.

Do. Underpinning (private charge).

14, Chapel Street:—Clearing Council's Main Drain.

17, Do. Do.

16, Chester Street:—Cutting off old drain.

216, Columbia Road:—Paving (private charge).

22, Digby Walk:—Clearing Council's Main Drain.

Disinfecting Station:—Making good after repairs.

17-21, Durant Street:—Clearing Council's Main Drain.

166, Globe Road:—Cutting out stopper for new connection

(private charge).

61, Green Street:—New frontage.

Holmes Avenue:—Clearing gully and Council's Main Drain.
Infirmary:—Drainage repairs, flushing, sweeping, &c.
(Guardians' charge).

8, Lawfranc Road:—Relaying branch drain (private charge).
8, London Street:—Clearing Drain (private charge).
16, London Street:—Clearing Council's Main Drain.
19, London Street:—Clearing drain (private charge).

Mortuary:—Fixing new guttering, &c.

47, Neath Place:—Clearing drain (private charge).

1, Northampton Street:—Exposing drain for examination.

8-12, Old Bethnal Green Road:—Clearing drain (private charge).

Public Health Offices:—Cleaning and whitewashing.

8, Pritchard's Road:—Clearing gully (private charge).

45, Quilter Street:—Relaying branch drain (private charge).

Shelter, 3, St. James' Road:—Internal Repairs.

"Two Provers" Prick Lane:—Laving gully branch drain

"Two Brewers," Brick Lane:—Laying gully branch drain. (private charge).

Workhouse: - Relaying drainage system. (Guardians' charge).

## Sweeping combined drains, refixing M.H. covers, &c.:-

5, 7, 9 & 11, Abingdon Street.	2 to 8, Chance Street.
29 to 39, Alma Road.	5, 7 & 9, Cheshire Street.
36 to 44, do.	55, do.
23 to 27, Anglesea Street.	57 to 69, do.
23 & 24, Arline Street.	72 to 82, do.
27 to 30, do.	64 to 88, do.
24 to 27, Artillery Street.	19 to 25, Chisenhale Road.
14, 16 and 18, Bacon Street.	42 to 46, Church Street.
1 and 3, do.	30, do.
2 and 4, do.	1 to 15, Clarkson Street.
24 to 32, do.	17 to 33, do.
4 and 6, do.	36 to 46, Collingwood Street
26, do.	1 to 4, Colling Place.
1 to 23, Baxendale Street.	17 to 25, Cooper's Gardens.
2 to 24, do.	9 to 12, Cordova Road.
18 to 32, Belhaven Street.	19 to 21, do.
213 to 227, Bethnal Green	22 to 26, do.
Road.	27 & 28, do.
1 to 14, Bonwell Street.	51 to 65, do.
15 to 21, do.	11 to 15, Cranbrook Street.
27 & 28, do.	39 to 61, do.
178 to 180, Brady Street.	7 to 13, Digby Walk.
1 & 3, Brierley Street.	16 to 22, do.
13 to 17, do.	29 to 35, do.
9a & 11a, Buckhurst Street.	41 to 45, do.
34 to 60, do.	8 to 16, Diss Street.
62 to 88, do.	11 to 15, do.
Butler's Buildings.	1 to 4, Durant Street.
1 & 3, Buxton Street.	73 & 75, Ellesmere Road.
9 & 11, Cadell Street.	7 to 10, Emma Street.
31 to 37, do.	31 & 32, do.
199 & 201, Cambridge Road.	32 to 40, Felix Street.
42 to 50, Canrobert Street.	4 & 6, Flint Terrace.
96 & 98. do.	9 to 15, Gales Gardens.
100 & 102, do.	17 to 25, do.
	27 to 41, do.

Sweeping combined drains, re-fixing M.H. covers, etc., -continued.

43 to 49, Gales Gardens.	2 to 9, Lawfranc Road.
32 to 36, Garner Street.	17 & 18, Lessada Street.
16 to 28, Goldsmith's Row.	47 & 48, do.
142 to 146, Hackney Road.	2 to 16, London Street.
166 & 168, do.	57 to 63, Lyal Road.
224 to 230, do.	64 to 70, do.
290 to 298, do.	71 & 72, do.
384, Hackney Road.	73 to 80, do.
2, Mansford Street.	81 to 86, do.
395 to 399, Hackney Road.	83 to 97, Mape Street.
413 to 419, do.	1 to 4, Marian Street.
10 to 29, Hamilton Road.	13 to 21, do.
35 to 41, do.	6 & 8, Matilda Street.
51 to 65, do.	42 to 54, Medhurst Road.
1, Harold Street. )	2 to 20, Middleton Street.
6, Type Street.	14 & 16, Minerva Street.
11 to 15, Hartley Street.	75 & 77, Moss Street.
17 & 19, do.	61 & 63, Neath Street.
2 to 6, do.	14 to 23, Nelson Place.
21 & 23, do.	101 to 117, Old Bethnal
25 & 27, do.	Green Road.
26 to 34, do.	17, Pelter Street.
37 to 55, do.	41, Preston Street.
28 to 34, Hassard Street.	3 & 5, Prichard's Road.
38 to 50, do.	11 to 19, do.
49 to 63, do.	1 to 6, Queen Caroline Gdns.
65 to 75, do.	7 to 11, do.
1 to 17, Havelock Street.	56 & 58, Quilter Street.
104, Cranbrook Street.	2 to 6, Roman Road.
1 to 4, Henrietta Street.	9 & 10, do.
24 & 25, do.	9 to 21, do.
Holmes Avenue.	96 to 110, do.
2 & 4, Horatio Street.	1 to 37, Scott Street.
15 & 19, do.	2 to 24, Seabright Street.
21 to 31, do.	64 to 88, do.
1 to 19, Kerbela Street.	71 to 83, do.

Sweeping combined drains, re-fixing M.H. covers, etc., -continued.

1 to 5, Somerford Street. 24 & 26, Theydon Road. 10 to 28, do. 30, Usk Street. 60 to 70, do. 1 to 6, Victoria Place. 59 & 61, do. 37 to 59, Wellington Road. 2 to 4, Southampton Buildings 61 to 81, do. 5 to 15, St. Jude Street. 73, do. 3, Tagg Street. White's Court. 14 to 25, Tagg Street. 2 to 8, Wimbolt Street. 1 to 19, Tent Street. 3 to 17, do. 11 & 12, Theydon Road. 19 to 33, do.

APPENDIX T.
STATEMENT OF WAGES ACCOUNT.

No. of Weeks.	Ending.	Sanitary Labour.	Combined Drainage.	Workhouse Drainage Reconstruc- tion.	Infirmary Drainage Flushing, Sweeping and minor repairs	Public Health Offices.	Mortuary.	Shelter.	Disinfecting Station.	Sick Pay.
4 4 5 4 5 4 4 5 4 5 4 5	1909  28th January 25th Feb 1st April 29th ,, 27th May 1st July 29th ,, 26th August 30th Sept 28th Oct 25th Nov 30th Dec	41 4 4 33 16 6 33 19 2 41 17 9 37 12 1 40 11 9 41 19 8 32 9 9 32 10 9	£ s. d.  31 0 1 61 19 8 82 15 2 65 2 0 106 3 8 55 15 0 34 19 5 5 3 5 4 14 11 28 9 3 33 8 7	£ s. d.  95 15 1 89 9 2 80 8 7 6 16 3	£ s. d 29 8 3 22 3 10	£ s. d 5 18 0 0 2 11	£ s. d 2 4 7 1 9 0 0 13 5 2 11 0	£ s. d 7 17 3 14 6 11 4 1 9	£ s. d.	£ s. d 0 18 9 0 15 0
Tota	al for year	444 14 2	532 16 1	272 9 1	51 12 1	6 0 11	6 18 0	26 5 11	2 18 10	1 13 9

APPENDIX U.
STATEMENT OF PETTY CASH ACCOUNTS.

1909	Amount received each month from Finance Committee.	Public Health (London) Act 1891. Cost of Prosecutions, Seizure of Unsound Food, &c.	Sale of Food and Drugs Acts.  Cost of obtaining Samples for Analysis, Prosecutions &c.	Combined Drainage and General Small Accounts for Tools, Materials, &c., not kept in Stock.	Drain Plug Hire. Returned Deposits.	Mortuary Washing, Sundry Require- ments, &c.	Workhouse Drainage.	Fines, Costs, &c., recovered and paid into Council's Account.	
January February March April May June July August Sept October Nov Dec	£ s. d. 9 0 3 8 1 11 7 15 1 7 0 4 5 8 11 8 1 11 16 1 5 9 19 10 6 18 0 6 11 1	£ s. d. 2 1 3 1 18 8 1 0 0 1 1 9 2 8 4 3 6 8 1 9 2 0 16 10 3 11 11 1 16 4 1 4 6 3 9 4	£ s. d. 1 16 0 2 13 6 2 10 0 1 18 3 2 0 8 3 7 1 3 7 5 0 5 3 1 10 8 2 12 2 1 14 3 1 17 0	£ s. d.  1 18 8  1 14 5  1 2 0  0 19 4  1 5 5  0 8 5  1 16 9  0 13 8  1 10 5  0 11 9  0 11 9  0 14 9	£ s. d. 1 5 0 0 10 0 3 5 5 1 10 0 0 10 0 0 10 0 0 10 0 0 15 0 1 10 0 0 10 0	0 10 11 0 18 7 0 1 0 0 0 1 3 0 10 9 0 15 10	£ s. d. 0 3 3 0 3 9 0 16 11 0 4 0 1 3 0	£ s. d. 2 17 7 46 14 6 5 0 0 19 8 0 4 10 6 13 15 1 60 8 11 8 13 9 13 7 6 6 0 0 21 15 0 9 4 2	
Total for Year.	84 18 9	24 4 4	25 7 3	13 7 4	11 0 <b>0</b>	2 18 4	2 10 11	211 15 0	
				Total amount rec Balance from 19	eived from Fin			17 17 10	
					Les	s Expenditure		£102 16 7 . 79 8 2	
					Bala	ance		. £23 8 5	

