[Report of the Medical Officer of Health for Walthamstow].

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Walthamstow Urban District Council.

REPORT

BY THE

MEDICAL OFFICER OF HEALTH

ON THE

SANITARY CONDITIONS AND VITAL STATISTICS

ALSO

REPORT TO THE EDUCATION COMMITTEE

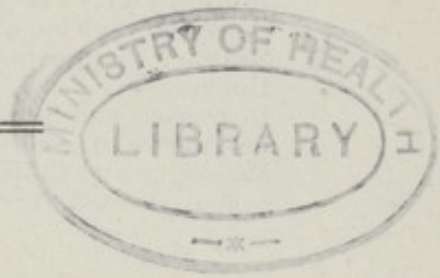
ON THE

MEDICAL INSPECTION OF SCHOOL CHILDREN,

FOR THE YEAR 1925.

Tottenham:
Crusha & Son, Ltd., 821-3, High Road,
And at Enfield and Wood Green.

Walthamstow Urban District Council.



REPORT

OF

THE MEDICAL OFFICER OF HEALTH

AND

SCHOOL MEDICAL OFFICER

FOR THE YEAR 1925.

Cottenham:

CRUSHA & SON, Ltd., 821-3, HIGH ROAD,
And at Enfield and Wood Green.

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OFFICERS AND STAFF.

Clerks:

H. T. CRISP. R. C. BLAND. G. W. PHILLIPS. L. R. W. KEMP.
G. W. WEST. R. ROSE. H. J. SMITH.

Chief Clerk:

H. BUTTERS.

Health Visitors:

* MISS A. C. KEENAN. * MRS. RYLEY. *MISS O. J. PANTHER.

Sanitary and Food Inspectors:

*T. VAUGHAN. *F. W. KEMP. *H. A. WHIPP. *T. J. BARNES.
*F. G. SENDELL.

Senior Sanitary Inspector, Food Inspector and Petroleum Officer:

*M. E. DUNCAN.

Matron, Isolation Hospital:

MISS L. PRATCHETT.

R. M. O. Isolation Hospital:

DR. S. MOORE.

Assistant Medical Officer, Medical Officer for Maternity and Child Welfare:

*DR. MARY. C. SHEPPARD.

Medical Officer of Health, School Medical Officer, and Medical Superintendent, Isolation Hospital:

*J. J. CLARKE.

* Proportion of Salary contributed under Public Health Acts or by Exchequer Grants.

TO THE CHAIRMAN AND MEMBERS

of the

Walthamstow Urban District Council.

LADIES AND GENTLEMEN,

I beg to present to you my Annual Report for 1925.

This is the twenty-eighth which I have had the privilege of presenting to your Authority.

Unlike the four previous ones this is a "Survey Report" and contains information which no doubt is quite familiar to most of you, but is given by request of the Ministry of Health. The Report is compiled on the lines and under the headings as suggested in Circular 648 issued by the Ministry of Health.

The first printed Annual Report of the Medical Officer of Health for the District was that for 1889 and consisted of six pages of printed matter and five statistical tables.

Prior to my appointment in 1898 and on to 1906, the Medical Officer of Health was a part time Officer whose work was mainly consultative and mildly supervisory of that of the Inspector of Nuisances and his Assistants who devoted their time and energies to defective drains and similar nuisances.

The Notification of Infectious Diseases Act was passed in 1889, and since that time the man in the street and those who govern him have completely changed their outlook on Public Health matters and have been gradually educated to realise that whilst the house and its surroundings play no unimportant part in the well being of the community, the citizen, individually and collectively, is the centre round which all Public Health work now revolves.

In 1901, the Isolation Hospital, with accommodation for 42 beds was opened, with the result that to-day we have fewer cases of Scarlet Fever and Diphtheria with a population of 130,800 than we had at that period when the population was 95,000.

In 1905, the first woman Health Visitor was appointed and in 1906 "an office" and a part time Clerk was provided for the Medical Officer of Health and in 1909 the Medical Inspection of School Children was undertaken.

To-day there are six Sanitary Inspectors, eight Clerks, four Health Visitors, six School Nurses, four Doctors and a Dentist engaged in the work of Public Health.

The citizen of to-day is under medical supervision from the cradle to the grave!

An extra ten years' longevity is claimed as the result of general Public Health work throughout the country, but how much of this can be legitimately claimed for our citizens by your Authority is difficult to estimate.

Owing to the character of our population the District is heavily rated, our leisured classes are few and Voluntary Public Health services—apart from the excellent work carried out at Brookscroft —is minimal.

As a result our Maternity and Child Welfare work is less than the needs of the Community warrant and below that which your Authority is anxious to give.

In all other respects the services rendered our citizens will compare favourably with those in the other extra Metropolitan Districts. Judging by results as evidenced by the Statistics given by the Registrar General we can legitimately claim a favoured place even among the very best administered Urban Districts and large Towns throughout the country

From a perusal of the body of the Report it will be seen that the year 1925 was a favourable one. The figures supplied by the Registrar General are for the calendar year and are taken as the basis of all rates.

Our Birth-Rate at 17.9 per 1,000 of the population was greater than in 1924 and only slightly less than that of London or the Great Towns.

It will be noticed from Table XI on page 33 that our Birth-rate taken out for five-yearly periods shows a steady decline from 37.3 in 1891 to 17.4 in 1924. The average from 1891-95 was 34.4; that for 1921-25 was 19.2.

In 1891, one in eight children born died within the year, whereas in 1925 only one in twenty born failed to survive; in other words our natural increase of population—that is, excess of births over deaths—in 1925 was only 20 less than in 1891.

Taking the period 1891-95 the average Birth-rate was 34.4 and the natural increase of population 1,003. The Birth-rate of 1921-25 was 19.2 and the natural increase of population 1,144, or a gain in the later period of 141, in spite of the lowered birth-rate.

As in previous years the birth-rates of the various Wards differ—Hoe Street has a rate of 13.3; Hale End, 15.6; St. James' Street, 16.6; High Street, 17.5; Higham Hill, 17.9; and Wood Street, 18.0. Compared with 1924, St. James' Street shows a decrease of 2 per 1,000, Hoe Street 1, Wood Street and Higham Hill an increase of nearly 2, and High Street and Hale End have practically the same rates.

Our Death-rate, was 10.0 per 1,000 of the population, compared with 12.2 for England and Wales and the "Great Towns," 11.2 for the "157 Smaller Towns," and 11.7 for London.

It is slightly less than in 1924 and 0.5 and 1.0 greater than 1921 and 1923.

The total recorded deaths were 31 less than in 1924. Tuberculosis, Cancer and Heart Disease had practically the same mortality in both years; diseases of the respiratory system and Influenza were less. From these five "causes of death" more than half our people succumbed.

Deaths in the new-born from Congenital Debility and Prematurity were numerically greater than in 1924. This might be expected as our births were 60 more than in the previous year.

Taking the age periods, fewer persons died within the age groups 25-65 than in 1924, and a larger number in the group 65 and upwards. The only Cause of Death in a very large number in the later period was given as Senile Decay.

A more definite reason might be given for those under 70 years and the careless way many deaths are certified makes classification a difficult matter with the result that however closely one follows the Rules laid down by the Registrar General slight variations occur between the numbers given by him and me.

The Zymotic Death-rate, or that resulting from deaths caused by Diphtheria, Erysipelas, Scarlatina, Typhoid Fever, Diarrhœa, Measles and Whooping Cough, was .34, or nearly double that of the previous year. The rate is given for comparative purposes, but is of little value as an index to the good or bad administration of an Area.

All the diseases are theoretically preventable, but so far no Authority has had much success in preventing epidemics of Measles and Whooping Cough.

Measles in an epidemic form was present during the first half of 1924, followed by Whooping Cough which continued right up to the middle of 1925 and was the cause of 26 deaths—25 of them in children under 5 years of age.

These deaths account for the increased rate. Diarrhoea as a cause of death in young children is now negligible.

Infantile Mortality Rate. This rate is based on the deaths of children under 1 year of age as compared with the births taking place within the year and was, on the Registrar General's figures, 51.4—the lowest on record, except that of 1923—as compared with 64.1 in 1924. It was 24 less per 1,000 than that of England and Wales, 27 less than that of the Great Towns and less than London by 15.

Whilst the total number of infants dying in their first year has become yearly less there has been no improvement in the Mortality from causes operating before confinement and during the first four weeks of life. A further reduction in this respect may be looked for when Medical Science has unlocked the secrets which lie behind these deaths and can apply a remedy. Meantime we must hope for improvement in a more extended use of the Ante-Natal Clinic and the education of our Senior Girls while in School, in the art of healthy living.

On page 30 is given a table based on the Registrar General's four quarterly Returns.

The Population, Birth-rate, Death-rate and Infantile Mortality-rate of nine extra Metropolitan Districts with that of Walthamstow is shown.

Excluding West Ham, Edmonton and Croydon our birth-rate was higher than in the other Districts whereas our Infantile Mortality-rate was lower with the exception of Croydon, Edmonton, Ilford and Hornsey.

The low birth-rate and the economic conditions of the Borough of Hornsey would apparently explain its favourable position, but not satisfactorily in view of the fact that Edmonton, a less favoured District than Walthamstow, with the highest birth-rate of all Districts, has the lowest Infant Mortality, in fact only 60 per cent. of that of Willesden, a wealthy, well administered District, where Ante-Natal and Child Welfare Work is carried out energetically and on the most up-to-date methods.

On page 28, it will be seen from the Table given, that Hoe Street Ward socially one of the best parts of the District, has the lowest Birth-rate and the highest Infantile Mortality-rate of all the Wards, a contrast as strongly marked as that between Willesden and Edmonton, which goes to show that my previous remarks as to diminution of the Infantile Mortality-rate is little affected by the methods now in operation.

The following Tabular Statement issued by the Registrar General will serve to show our relative position compared with the Country and the "Great" and "Smaller" Towns as regards general Death and Infantile Mortality rates and those from the principal Infectious Diseases.

TABLE I.

Birth-rate, Death-rate, and Analysis of Mortality during the Year 1925.

(Provisional figures. The rates for England and Wales have been calculated on a population estimated to the middle of 1925, while those for the towns have been calculated on populations estimated to the middle of 1924. The mortality rates refer to the whole population as regards England and Wales but only to civilians as regards London and the groups of towns.)

	Birth-rate per 1,000 Total Population.	Annual Death-rate per 1,000 Population.									Rate per 1,000 Births		Percentage of Total Deaths.		
		All Causes.	Enteric Fever.	Small-Pox.	Measles.	Scarlet Fever.	Whooping Cough	Diphtheria.	Influenza.	Violence.	Diarrhoea and Enteritis (under 2 years).	Total Deaths under 1 year.	Causes of Death Certified by Registered Medical Practitioners	Inquest Cases.	Uncertified Causes of Death.
England and Wales	18.3	12.2	0.01	0.00	0.13	0.03	0.15	0.07	0.32	0.47	8.4	75	92.1	6.9	1.0
105 County Boroughs and Great Towns including London ..	18.8	12.2	0.01	0.00	0.17	0.03	0.18	0.09	0.30	0.43	10.8	79	92.1	7.3	0.6
157 Smaller Towns (1921 Adjusted Populations 20,000—50,000) ..	18.3	11.2	0.01	0.00	0.15	0.02	0.14	0.06	0.31	0.38	7.6	74	93.0	5.9	1.1
London	18.0	11.7	0.01	0.00	0.08	0.02	0.19	0.11	0.23	0.46	10.6	67	91.1	8.9	0.0
Walthamstow	17.9	10.00	0.01	0.00	0.04	0.007	0.19	0.05	0.23	0.25	3.4	51.9	100.0	8.0	0.0

Comparing the Table with that given for 1924 all our Mortality rates are less—those for Whooping Cough and Diphtheria with a slight increase excepted—and in every case more favourable than those for the Country or the Great Towns.

Over 45 per cent. of our Deaths occurred without the Area, mainly in Public Institutions, but in every case the Cause of Death was certified by a Doctor or Coroner.

Our Infantile Mortality-rate is very low when compared with that of the Country or those of the Towns.

Although the number of cases of Scarlet Fever was double that of 1924 only one death occurred, whereas with 30 per cent. less cases of Diphtheria we had three more deaths.

The increased mortality occurred in children aged 2 to 5 years.

Three of these deaths occurred within twenty-four hours of removal to Hospital.

From the Table given on page 58 it will be seen that of the Areas given West Ham and Willesden only had a smaller Diphtheria Death-rate than here.

Our Infectious Sickness Rate, based on the proportion of cases notified to total population, was 4.6 per 1,000 compared with 3.9 in 1924.

The increase is accounted for partly by a large number of cases of Rötheln being notified as Scarlatina.

In estimating this rate the only diseases counted are those notifiable prior to 1914. Upon this basis the rate is only a third of that prevalent prior to the opening of the Isolation Hospital.

Although no extension has been made to the Institution since 1906 the accommodation provided was sufficient for all purposes. Ninety per cent. of the notified cases of Diphtheria and over 80 per cent. of the Scarlet Fever cases were removed from their homes.

The natural advantages enjoyed by Walthamstow—its close proximity to Epping Forest and the number of open spaces in the shape of Parks and unbuilt-on areas—account largely for the favourable position it occupies from a Public Health standpoint. Within a few years our Sewage Farm will have disappeared, and the future prospects of the District as a residential area, will thereby be enhanced.

The section of the Report dealing with the Sanitary Circumstances of the Area is largely the work of Mr. Duncan, the Senior Inspector, and the School Report has been compiled by Dr. Broderick.

I am pleased to record that the Members of the Public Health and School Medical Staff have made the fullest use of their opportunities to serve their respective Authorities well and I much appreciate their unvarying loyalty and willing co-operation.

I beg to remain,

Ladies and Gentlemen,

Your obedient Servant,

J. J. CLARKE.

STATISTICAL AND OTHER INFORMATION.

Total Area of District	4343 acres.
Area of land upon which houses are erected ..	1814 ,,
Population—1901 Census	95,131
,, 1911 Census	124,580
,, 1921 Census..	129,395
,, ,, per acre (Registrar General)	29.8
,, 1925 Estimated do. ..	130,800
No. of separate occupiers, 1921 Census	29,461
No. of persons per "occupation"	4.3
No. of houses (including shops, inns, etc., inhabited 24,616, uninhabited 455) ..	25,071
Births registered within area	2,131
,, ,, without area	220
Birth-rate per 1,000 of the population	17.9
Deaths registered within area, excluding non-residents	716
Deaths registered without area	589
Death-rate	10.0
Death-rate corrected for age and sex	10.59
Deaths of Infants under 1 year of age	121
Infantile Mortality Rate	51.9
Zymotic Death-rate	.34
Infectious Sickness Rate	4.6
Rateable Value	£529,956
,, ,, 1901	£328,756
General District Rate, 1925	7s. 0d.
,, ,, ,, 1901	3s. 7d.
Total Poor Rate, 1925	17s. 4d.
,, ,, ,, 1901	4s. 10d.
Education Rate, 1925	2s. 3d.
,, ,, 1901	1s. 9½d.

SECTION I.

NATURAL AND SOCIAL CONDITIONS OF THE DISTRICT.

The Urban District of Walthamstow has an area of 4,343 acres, and lies between the River Lea on the west and Epping Forest on the east, extending from Leyton on its south to Chingford on the north.

The area built upon is approximately 1,814 acres, and the land as yet undeveloped is 987 acres. The remainder is made up as follows, in acres:—

Schools 52½, Reservoirs 361, Railways 110, Allotments 231, Epping Forest 359, Marsh Land 100, Municipal Depots 13, Parks and Recreation Grounds 70, Cemetery 12, River Ching 251 Playing Fields 425, Xylonite Factory 41, London Genera, Omnibus Works 9 and the Sewage Farm 238.

The 987 acres termed "undeveloped" include a large proportion of the land now used as allotments and playing fields.

The District is divided into six Wards for administrative purposes; they vary in altitude from 18 feet above ordnance datum in the St. James' Street Ward, to 230 feet in the Hale End Ward.

The subsoil is mainly gravel, the London clay showing itself in various parts on the surface, more particularly in the Wood Street and the Northern Wards.

There are two small streams within the District—the Ching and the Dagenham Brook, and the River Lea flows past the western boundary.

The Ching, a small brook, enters the District at Highams Park in the northern area, and winds its course through Hale End and Chapel End to the River Lea.

The Dagenham Brook, rising within the District, is the outlet for our drainage, and having received the effluent of the Sewage Farm, situated in the western or St. James' Street Ward, winds its course through the neighbouring parish of Leyton and joins the River Lea at Temple Mills, near Stratford.

Neither stream, at any point, is used for domestic purposes, nor likely to be a source of pollution to potable waters.

The whole District has a duplicate system of sewers, and practically every house water-closet accommodation. The average daily flow of sewage is 2,500,000 gallons.

The sewage is received into precipitating tanks, treated with lime and alum, the solids removed, and the effluent subsequently passed over the Farm before finally passing out of the District.

In addition there are in operation at the Farm large filter beds of clinker for dealing with storm water.

TABLE II.

SUB-DISTRICTS.

WARDS.—*Acreage, Population, Density, Birth and Death Rates*, 1925.

WARDS.	Acreage.	Area actually built upon.	Number of Private Families Census, 1921.	Structurally separate dwellings occupied, 1921.	Census Population, 1921.	Houses built 1921-1925	Estimated mid-year population, 1925.	Density of Area built upon 1925.	Birth-Rate, 1925.	Death-Rate, 1925.	Height in feet of Ordnance Datum.
Cols. (1).	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
St. James' Street ..	488	186	5364	4384	24,936	2	24,946	134	16.6	11.5	18 to 54
High Street	672	174	4697	3730	20,480	4	20,500	118	17.5	9.3	23 to 60
Hoe Street	359	318	5869	4651	23,895	11	23,955	75	13.3	11.1	52 to 145
Wood Street	515	240	3890	3102	17,589	24	17,689	73	18.0	10.0	75 to 176
Hale End	1328	334	4128	3638	18,072	329	19,717	59	14.8	8.0	46 to 230
Higham Hill ..	981	274	5513	5105	24,423	502	26,933	98	16.3	7.9	25 to 80
Whole District ..	4343	1526	29461	24610	129,395	872	133,740	87	17.9	10.0	—

In column 3, the area is arrived at by excluding Reservoirs, Railways, Schools, Sewage Farm, Recreation Grounds, Cemetery, etc.

The number of separate occupations is arrived at by adding to Columns 4 and 6 the proportionate increased number of houses now occupied as compared with 1921.

Comparing the different Wards, the average number of persons per acre at the Census varies from 13.6 in Hale End to 51.3 in St. James' Street, and 67.3 in Hoe Street, with an average for the whole area of 29.8 This compares with 1.5 for the County. The numbers on the previous Table refer to the Wards as actually built upon.

The average density is not an index as to overcrowding as may be seen from column 9. Hoe Street, with a population of 75 per acre, has a greater room capacity per unit of its population than Hale End with 59 persons per acre.

Of the six Wards the housing and general conditions favourable to health are best in Hoe Street and Hale End Wards. The greater portion of the unbuilt on land lies in the Higham Hill and Hale End Wards or the Northern part of the District. All the other Wards are built over and an amount of cheap, badly kept property, is to be found in all the Wards.

Around or in close proximity to the Wood Street and St. James' Street railway stations are mean streets, peopled largely by the casual or unskilled type of worker.

Many of these tenants appear to have no interest in the houses they occupy nor exhibit a desirable civic or domestic pride and are largely to blame for the unwholesome conditions requiring the constant supervision of the Sanitary Inspectors. In very many instances the landlords are no less guilty by failing to expend on their property even the proportion of rent exempted from taxation.

As a consequence there are hundreds of houses on or in which not a pound of paint or a yard of paper has been used for the past twelve years.

The Inland Revenue Authorities should insist that either this money is spent on the property or it pays its proportion of taxation.

According to the Census for the County of Essex for 1921 it appears Walthamstow is, in population, the third largest District in the County.

The increase of population over that in 1911 was 4,815 persons, equal to 3.9 per cent. compared with 8.8. for the County as a whole.

Leyton excepted, our intercensal increase was less than that of any of the other large areas in the County.

Between 1911 and 1921 our natural increase of population—that is excess of births over deaths—was actually 14,630, showing

that we lost by migration alone 9,815. The District remains as heretofore a London Dormitory.

Between 1911 and 1921 certain marked changes took place. The District became more industrialized and the middle classes of the population have become fewer or poorer as evidenced by the fact that in 1921 only 5 per cent. of private families employed domestic helps as against 10 per cent. in 1911.

The following two Tables are taken from the last Census Returns, the first gives the housing and the second gives families classified by size of the rooms occupied and density of occupation.

TABLE III.

Buildings, Dwellings, Rooms and Families.

Buildings.													
In Course of Erection	Completed: Not Contg. Dwgs.	Completed: Containing Dwgs.	Population. 1921.		Dwgs. occupied by non-private Families.	Structurally Separate Dwellings occupied by Private Families or Vacant.						Total Dwgs.	Total Rooms.
						Vacant on Census night	Occupied by Caretaker.	1-3 Rooms	4-5 Rooms.	6-8 Rooms.	9 or more Rooms.		
447	—	22142	116195	I. Undivided Private Houses	3	392	—	908	12637	8256	338	22139	117618
—	—	6	36	II. Structy. Divided Private Houses	—	1	—	3	8	2	—	13	55
—	—	583	5094	III. Blocks of Flats, Tenements, etc.	—	26	—	577	710	33	—	1320	4857
—	204	1550	6893	IV. Shops	7	36	—	133	888	489	33	1543	7947
4	263	71	1177	V. Others	15	—	2	9	29	13	5	56	293
451	467	24352	129395	Total	25	455	2	1630	14272	8793	376	25071	130770
				Principal Buildings in Group V (others) above:— Vacant on Census Night				43	247	156	9	455	2351
				Principal Buildings in Group V (others) above:— Dwellings occupd. by 1 Private Family				1574	12984	5228	263	20049	100963
3	109	24	112	Offices, Factories, Warehses. Workshops — Dwellings occupd. by 2 Private Families				11	1006	3217	86	4320	25830
				Offices, Factories, Warehses. Workshops — Dwellings occupd. by 3 or more Private Families..				2	35	192	18	247	1626
—	—	—	—	Hotels. — Total Dwellings occupied by Private Families .. No.				1587	14025	8637	367	24616	128419
—	1	10	754	Institutions. — Total Dwellings occupied by Private Families .. %				6	57	35	2	100	—
—	55	5	20	Places of Worship.									
—	7	—	—	Places of Amusement. — Total Private Families therein ..				1602	15103	12256	500	29461	—

TABLE IV.

Private Families classified by Size of Family, Rooms occupied and Density of Occupation.

No. of Persons in Family.	Number of private families occupying the following number of Rooms.								Total Private Families.		Population in Private Families.	Rooms occupied.	Density of Occupation.				
													Average number of Rooms per Person.	Population at following densities of occupation (rooms per person)			
	1	2	3	4	5	6-7	8-9	10 and over	No.	%				under .3	.3 and under .5	.5 and under .7	.7 and under 1.0
1	443	239	216	129	112	71	2	2	1214	4.1	1214	3126	2.57	—	—	—	—
2	233	748	1271	842	772	482	43	13	4404	14.9	8808	16270	1.85	—	—	466	2
3	165	551	1445	1320	1444	814	76	23	5838	19.8	17514	24022	1.37	—	495	1653	3
4	45	226	1310	1254	1870	1066	79	22	5872	20.0	23488	26325	1.12	180	—	904	5240
5	10	98	858	938	1663	853	87	36	4543	15.4	22715	21301	0.94	50	490	4290	4695
6	1	44	515	615	1230	636	53	24	3118	10.6	18708	14934	0.80	12	258	6780	7380
7	—	14	306	376	801	416	47	19	1979	6.7	13853	9665	0.70	98	2142	2632	7903
8	—	4	138	234	511	256	20	10	1173	4.0	9384	5782	0.62	32	1104	5960	2048
9	—	2	55	112	300	172	17	8	666	2.3	5994	3421	0.57	18	1503	3852	531
10	—	2	28	70	175	98	7	5	385	1.3	3850	1976	0.51	20	980	2500	300
11	—	1	4	26	86	48	7	1	173	0.6	1903	918	0.48	55	1232	528	88
12	—	—	2	11	38	13	2	3	69	0.2	828	388	0.47	24	588	180	—
13	—	—	—	1	10	4	—	—	15	0.1	195	78	0.40	—	195	—	—
14	—	—	—	1	2	3	—	1	7	0.0	98	46	0.47	14	56	14	14
15 & over	—	—	—	1	—	3	—	1	5	0.0	75	37	0.49	15	45	—	15
Total Private Families	897	1929	6148	5930	9014	4935	440	168	29461	100.0	—	—	—	—	—	—	—
Population in Private Families	1640	5225	23802	25841	44868	24133	2198	920	—	—	128627	—	—	518	9088	29759	28219
Rooms occupied	897	3857	18443	23720	45069	30757	3620	1926	—	—	—	128289	1.00	—	—	—	—
	3.0	6.5	20.9	20.1	30.6	16.8	1.5	0.6	100.0	1921	Percentage of families living in various units of occupation.						
	2.5	4.1	18.8	20.4	30.3	21.2	1.9	0.8	100.0	1911	,,	,,	,,	,,			

All the dwellings below the dark lines are overcrowded according to the standard of the Registrar General. These total 1,287 compared with 882 in 1911.

The greatest overcrowding was found in "occupations" of three rooms, then comes those of four rooms, followed by those of one, two and five rooms.

The percentage of families living in the various units of occupation, *i.e.*, the number of rooms to a family, shows little change from 1911, in habitations of four rooms and over; in those with fewer rooms a considerable change has taken place.

In 1921, 3 per cent. of our "families" lived in one room, 6.5 per cent. in 2 rooms and 20.9 in 3 rooms as against 2.5, 4.1 and 18.8 per cent. in 1911.

In other words, in 1911, 666 families lived in one room, 1,092 in two rooms and 4,945 in three roomed tenements as against 897, 1,929 and 6,148 in 1921.

Although the average number of rooms per "dwelling" is shown to be 5.2 the number of 4 to 5 roomed houses, occupied by two private families was 1,006 and the number of 6 to 8 roomed houses occupied by two or more families was 3,409 or nearly 42 per cent. of the whole.

Little change has taken place in this respect since 1921 and need of suitable housing accommodation for our people is still urgent.

The occupations of the people according to the Classification of the Registrar General were in proportion to 1,000 of the population —aged 12 years and over—as follows:—

TABLE V.

Occupation.—Males.	Essex Administrative County (with associated County Boroughs).	East Ham C.B.	Southend-on-Sea C.B.	West Ham C.B.	Ilford U.D.	Leyton U.D.	Walthamstow U.D.	Aggregate of Rural Districts.
1. Orders and Sub-Orders.								
Agricultural Occupations	82	3	17	2	18	4	5	338
Chemical Workers, Makers of Paints, Oils, etc.	8	11	2	19	6	5	3	3
Metal Workers (not Electro Plate or Precious Metals)	82	89	42	105	52	90	99	53
Electrical Apparatus Makers and Fitters, Electricians	14	21	12	15	15	17	18	6
Makers of Textile Goods and Articles of Dress	15	16	21	12	15	23	21	7
Makers of Foods	13	11	10	23	7	11	9	13
Workers in Wood	37	42	29	35	26	48	68	30
Printers, Bookbinders and Photographer	17	25	16	15	20	26	2	4
Builders, Stone and Slate Workers; Contractors	38	36	34	31	33	33	39	49
Painters and Decorators (not Pottery)	18	21	21	20	13	27	24	11
Railway Transport Workers ..	22	17	11	26	20	43	23	16
Road Transport Workers	37	34	37	46	31	42	42	31
Water Transport Workers ..	50	84	22	100	21	20	13	21
Other Transport Workers (not Railroad or Water)	30	40	25	33	38	39	50	14
Commerce, Finance and Insurance (not Clerks)	90	93	180	68	136	109	94	55
Public Administration	24	33	34	20	48	30	24	13
Defence	11	4	7	4	5	5	5	10
Professional Occupations (excluding Clerical Staff)	22	17	36	11	40	21	16	20
Persons employed in Entertainment and Sport	4	4	13	3	4	4	4	2
Personal Service (including Institutions, Clubs, Hotels, etc.) ..	24	21	38	22	16	22	25	22
Clerks (not Civi Service or Local Authority)	74	93	125	51	177	115	81	32
Warehousemen, Storekeepers and Packers	19	29	11	24	19	27	38	6
Stationary Engine Drivers, Dynamo and Motor Attendants	10	12	4	18	5	7	6	8
Other and Undefined Workers (mainly Labourers)	74	79	45	122	35	49	61	57
Unoccupied and Retired	142	122	165	128	175	135	132	149

TABLE VI.

Occupation—Females.	Essex Administrative County (with associated County Boroughs).	East Ham C.B.	Southend-on-Sea C.B.	West Ham C.B.	Ilford U.D.	Leyton U.D.	Walthamstow U.D.	Aggregate of Rural Districts.
Occupied Females per 1,000 aged 12 and upwards	294	298	310	313	292	316	325	235
1. ORDERS.								
Agricultural Occupations	13	3	1	—	7	1	1	63
Chemical Workers, Makers of Paints Oils, etc.	7	8	—	17	2	4	2	3
Metal Workers, not Electro Plate or Precious Metals	12	9	1	19	4	10	18	9
Electrical Apparatus Makers and Fitters, Electricians	13	19	—	15	7	32	19	9
Makers of Watches, Clocks and Scientific Instruments	2	1	—	1	1	1	12	—
Workers in Skins and Leather and Makers of Leather and Leather Substitute Goods	5	5	2	9	4	8	11	1
Textile Workers	13	5	2	19	4	5	7	19
Makers of Textile Goods and Articles of Dress	120	166	69	137	83	158	197	64
Makers of Food, Drinks and Tobacco	22	24	5	66	3	14	12	9
Workers in Wood and Furniture ..	6	5	1	10	4	6	14	1
Workers in Paper; Printers, Bookbinders, etc.	28	40	9	54	15	29	46	8
Workers in other Materials ..	14	8	1	27	4	10	46	2
Workers in Mixed or Undefined Materials (not elsewhere enumerated)	7	12	2	8	6	11	16	1
Workers in Transport and Communication	17	26	11	19	27	19	18	12
Commerce, Finance and Insurance (not Clerks)	101	112	128	89	106	102	92	82
Persons employed in Public Administration (and Defence) ..	20	25	21	13	27	23	17	25
Professional Occupations (excluding Clerical Staff)	78	51	85	53	118	80	46	101
Persons employed in Entertainments and Sport	5	16	13	4	6	5	3	3
Personal Service (including Institutions, Clubs, Hotels, etc). ..	307	186	472	193	251	207	165	493
Clerks, etc. (not Civil Service or Local Authority)	161	226	163	137	300	232	189	79
Warehousemen, Storekeepers and Packers	33	48	4	83	15	36	30	7
Other and Undefined Workers ..	13	14	8	25	4	3	18	9

The Tables as given by the Registrar General are reproduced for comparative purposes.

Fuller information as to the employment of our people will be found at page 76, County of Essex Census, 1921.

It will be seen that Walthamstow has the largest percentage, 32.5 of occupied females, and Ilford the lowest, 29.2 as compared with the County as a whole with 29.4.

The Registrar General notes that Walthamstow has the lowest proportion of domestic servants of any of the area sgiven, followed closely by West and East Ham; and like West Ham, Walthamstow is the most industrial in type of those areas given. A larger proportion of the people here is engaged in Scientific Instrument making, Sewing, Tailoring, Celluloid and Brush making, than in the other large Districts of the County.

Comparing 1911 with 1921, on the surface the masses seem to be better clothed and better fed, and the physique of our School Children has improved.

A noted contrast between the periods is the number of girls now employed in clerical work—3,247 as against 750 in 1911.

HOSPITALS AND POOR-LAW RELIEF.

The Walthamstow, Wanstead and Leyton Children's and General Hospital, containing 50 beds, situated in the Hoe Street Ward is conveniently accessible to all the inhabitants.

At present considerable extensions are being carried out, and when completed will make possible a much more efficient service to the Public than heretofore.

A Casualty Ward, quarters for two Resident House Surgeons, a Nurses' Home and New Ward Block of 40 beds are in course of construction and will probably be functioning within the year.

During 1925 all cases sent from the School Clinics requiring special treatment were readily admitted to the Hospital or were dealt with in the Out-patients' Department.

The extent to which the Hospital has been used may be inferred from the following:—

In-patients in Hospital (31-12-24) ..	50
Admitted during 1925	944
Out-Patients from 1924 continuing treatment in 1925	297
New Out-Patients in 1925	9,938
Out-Patients' Attendance in 1925:—	
Medical	8,531
Surgical	25,832

The only contribution made to the Hospital by the Local Authority is a retaining fee of £15 15s. for two beds reserved for the treatment of Typhoid patients. The patients are paid for at the rate of 30s. per week.

Reference has previously been made in my Annual Reports to causes which militated against a maximal usefulness of the Hospital and while these have to some extent disappeared, co-operation of the Hospital's work with that of the Dispensary, the Child Welfare Clinics and the School Clinics is lacking.

Combination of the Public Health Authority—which has powers to contribute any necessary funds to the Hospital—with the Governors and Subscribers, might make it as efficient to cater for the needs of the sick inhabitants as is the Isolation Hospital for the needs of those suffering from Infectious Disease.

Walthamstow Dispensary.—This is situated like the Hospital in the Hoe Street Ward, but is more centrally placed as regards the District as a whole.

In addition to the useful medical work which the Staff of this Institution undertake on behalf of the Subscribers, they also carry out the surgical treatment of enlarged Tonsils and Adenoids and the X-ray treatment of Ringworm on behalf of the Education Committee.

A member of the Staff attends for a few hours daily for the routine work of the Dispensary, and that for the Education Committee is carried out at definite times on specified days.

The Dispensary is popular and well patronised and has a good reputation among the Public.

Patients require a Subscriber's letter and each pays 4d. per week while under treatment to cover the cost of the physic supplied.

During 1925, 1,216 patients, making 3,829 attendances, received treatment.

All the operative work undertaken for the Education Committee has been satisfactorily carried out and during 1925, 234 children were successfully operated on for the removal of Tonsils and Adenoids.

There are no beds attached to the Dispensary and although so far nothing untoward has arisen, the removal of children to their homes within a few hours after operation can only be justified by necessity.

The premises are by no means ideal for the work carried on and they do not lend themselves except at great cost to much improvement or extension.

With the enlargement of the Out-Patients' Department of the General Hospital, the Dispensary will probably be less patronised as time goes on and for many reasons this Institution should join forces or agree to absorption by the General Hospital. The latter should then form the centre for all the Medical and Surgical work of the District.

By a complete linking up of all the Agencies concerned—Hospital, Dispensary, Orthopaedic Hospital, Child Welfare Societies and Essex Cottage Nursing Association—a complete and satisfactory service could be rendered to the Public at a reduced cost and with an increased efficiency.

Whipps Cross Hospital, under the management of the West Ham Guardians is just outside the borders of the District. The Surgical and Medical work carried out there is similar to and equally as good as that of the large Hospitals in London and no difficulty has been experienced to get admission for patients from this area.

The Essex Cottage Nursing Association. A Branch of this Association has its quarters in the High Street Ward and is well placed to serve a large working class population.

The resident Staff consists of a Sister-in-Charge—a qualified and experienced nurse midwife, holding a certificate for massage and electrical treatment—assisted by nine others, four of whom are qualified Midwives.

The Association has been carrying on its work for the past 22 years and its inception was mainly the outcome of local effort.

The work carried out is mainly attendance on the poorer women during confinement and the lying-in period, and nursing the sick poor in their own homes.

The midwifery work is invariably well done and the Rules of the Midwives Board are strictly observed. A very useful feature of this work of the Association is the large amount of Ante-Natal visiting undertaken—359 such visits were paid from July to December, 1925.

During the year 262 Midwifery cases were attended by the Midwives, and 67 others in conjunction with a Doctor.

At the request of various London Hospitals, the Association visited, at their homes, 140 children following removal of Tonsils and Adenoids, and in addition 31 other cases were visited and the necessary prescribed treatment carried out.

The amount of general nursing entailed 13,152 visits, and 3,091 massage treatments were given to 55 patients.

In addition to the work referred to, probation nurses attend the School, Child Welfare and Ante-Natal Clinics, and while thus enjoying facilities to acquire a fuller knowledge, are a great help to the Local Authority in the work undertaken for Child Welfare.

POOR LAW RELIEF.

For the following details I am indebted to the Clerk to the West Ham Guardians.

The numbers of Walthamstow Residents admitted during the year to the Institutions named were as follows:—

The Central Home	434
Whipps Cross Hospital	1,419
Forest Gate Sick Home	92
Children's Homes	47
Margate Convalescent Home	19

The average number of Walthamstow Residents in receipt of out-relief during the year was as follows:—

Cases 3,508, comprising 8,870 persons. Cost per week .. £3,270.

VITAL STATISTICS.

In 1911 the enumerated population was 124,580 and in 1921, 129,395. Between 1911 and 1921 the natural increase of the population was 14,144 and since 1921, 4,840. The latter figure added to the enumerated population of 1921, would be 134,235 or 3,435 more than our mid-year 1925 population as given by the Registrar General.

Looking at the Table headed "Sub-Districts" it will be noticed that from local knowledge I estimate our present-day population as 133,740, and there is reason to believe this is more nearly correct than the figure given by the Registrar General.

Upon the basis of a population of 130,800, the general birth and death rates of the District are ascertained, otherwise these rates would not be fairly comparable with those of other "Large Towns" whose populations, like our own, are based on data known at Somerset House. The discrepancies in Ward populations under Sub-Districts and those given on page 30 are thus accounted for.

The following Table gives a summary of the Vital Statistics of the area for 1925 and the years previously on to 1911:—

TABLE VII.

Vital Statistics of Whole District during 1925 and previous Years.

Year.	Population estimated to Middle of each Year.	Births.			Total Deaths Registered in the District.		Transferable Deaths		Nett Deaths belonging to the District.			
		Uncorrected Number	Nett.						Under 1 year of age		At all ages.	
			Number.	Rate.	Number.	Rate.	of Non-residents registered in the District.	of Residents not registered in the District.	Number.	Rate per 1000 Nett Births.	Number.	Rate.
1911	125334	3107	3182	25.36	1018	8.1	33	471	340	108.30	1456	11.70
1912	128480	3104	3150	24.40	876	6.8	22	413	243	77.10	1267	9.80
1913	131636	3210	3261	24.77	943	7.1	17	408	256	78.47	1334	10.13
1914	131980	3072	3134	23.74	946	7.1	21	503	243	77.50	1428	10.70
1915	131718	2826	2867	21.70	1091	8.2	20	502	267	93.10	1573	11.90
1916	131718	2779	2854	20.50	925	7.2	39	490	196	69.30	1376	10.70
1917	126140	2167	2228	16.70	867	7.2	29	492	152	70.00	1330	11.10
1918	119307	1980	2034	15.90	1299	10.8	31	524	166	81.10	1792	15.7
1919	127684	2218	2301	17.20	869	6.9	35	439	160	69.50	1273	9.90
1920	132771	3142	3286	24.70	834	6.2	20	479	198	59.90	1293	9.70
1921	129800	2814	2673	21.20	801	6.1	25	461	173	61.40	1237	9.50
1922	129700	2405	2545	18.80	917	7.0	28	513	155	62.80	1402	10.70
1923	130000	2314	2529	18.12	719	5.5	35	481	116	45.80	1165	8.78
1924	131100	2104	2291	16.10	786	5.9	39	581	146	64.10	1328	10.01
1925	130800	2152	2351	17.9	.. 758	5.7	42	589	121	51.4	1309	10.00

BIRTHS AND BIRTH-RATES.

The number of births registered within the District during the year was 2,131—males, 1,076; females, 1,055.

The total births as given by the Registrar General were 2,351, showing that 220 were born and registered without the area.

Of the total births, 56 were illegitimate as compared with 43 in 1924 and 70 in 1914. In other words 2.2 per cent. of the children born in 1914 were illegitimate compared with 2.3 per cent. in 1925, a proportion not differing materially from that in pre-war days.

The birth-rate for the year was 17.9 per 1,000 of the population as estimated by the Registrar General.

This rate is an improvement on the previous year, but less by .4 than that of the Country as a whole and by .9 than that of the 105 County Boroughs and Great Towns. The 157 Smaller Towns had only .4 greater rate than Walthamstow and London a rate of .1 only.

The following Table (page 28) shows the births distributed in Wards, with birth-rates for 1924 and 1925, on populations estimated by the Registrar General:—

TABLE VIII.

Births distributed in Wards—with populations (1921), and Birth-rates for 1925

	St. James Street.		High Street.		Hoe Street.		Wood Street.		Hale End.		Higham Hill.		Totals.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1st quarter	29	34	28	32	21	28	19	30	24	24	34	26	165	174
2nd quarter	53	53	42	44	41	42	44	34	43	40	53	51	276	264
3rd quarter	50	45	53	43	43	46	51	43	42	36	71	54	310	267
4th quafter	58	82	63	54	42	56	44	52	41	33	77	73	325	350
	200	214	186	173	147	172	158	159	150	133	235	204	1076	1055
Totals	414		359		319		317		283		439		2131	
Number of Births as given by R.G.	—		—		—		—		—		—		1180	1171
													2351	
Population (Census, 1921)	24936		20480		23895		17589		18072		24423		129395	
Population (assumed, 1925) ..	—		—		—		—		—		—		130800	
Birth-rate 1925	16.6		17.5		13.3		18.0		15.6		17.9		17 9	
Birth-rate 1924	18.8		15.7		14.3		16.2		15.4		16.2		17.4	
Infantile Mortality Rate 1925 ..	53.1		61.2		72.1		66.2		49.9		45.5		51.4	
Infantile Mortality Rate 1924 ..	61.4		79.6		75.8		77.7		56.1		68.8		64.1	

The populations of the Wards are those of Census year and the total is slightly less than that assumed for the whole District by the Registrar General for 1925, but there is no reason to think that any great changes have occurred in the Wards, except those of Hale End and Higham Hill. Probably the Birth and Death-rates of these Wards are actually less than those given.

At any rate, the figures, though not accurate, are based on like data as in previous reports, and to this extent will serve for conclusions to be drawn as to the relative improvement or otherwise noticed from year to year in the constituent parts of the area.

The birth-rates for the various Wards for Census years 1901 and 1911, and for 1920, 1922, 1923, 1924 and 1925 were as follows:—

	St. James Street.	High Street.	Hoe Street.	Wood Street.	Hale End.	Higham Hill.	Whole District.
1901 ..	33.0	35.7	28.0	28.4	39.8		33.1
1911 ..	26.4	26.9	20.0	23.5	27.0		25.3
1920 ..	25.0	24.9	20.0	23.7	21.5		25.0
1922 ..	18.0	19.0	15.3	18.4	19.3	17.0	19.6
1923 ..	19.8	18.3	15.7	17.5	15.0	19.5	19.4
1924 ..	18.8	15.7	14.3	16.2	15.4	16.2	17.4
1925 ..	**16.6**	**17.5**	**13.3**	**18.4**	**15.6**	**17.9**	**17.9**

I am unable to give the rates for 1921, and those for 1922 are shown for comparison as the year following Census and when the known populations of the Wards were fairly correct.

The decline in the birth-rate for the whole District in the last 25 years was nearly 40 per cent.; that for St. James' Street and High Street 50 per cent., and Hoe Street nearly 54 per cent. Hale End and Higham Hill Wards were in 1901 known as the Northern Ward, but taking the mean for both as 16.7 the decrease is even greater than in Hoe Street.

DEATHS AND DEATH-RATES.

WHOLE DISTRICT.

During the year 758 deaths—males, 400; females, 358—were registered within the District. Forty-two of these—males, 25; females, 17—were of non-residents and are now excluded.

The deaths of those dying without the District numbered 586, or nearly 45 per cent. of the whole. The great majority of these occurred in Hospitals. Two hundred and fifty took place at Whipps Cross Hospital, and 138 at the Central and Sick Homes—Institutions under the Poor Law—120 died in London Hospitals, 23 in Mental Hospitals, 11 at Sanatoria and 44 elsewhere.

The total deaths given by the Registrar General for the Calendar year were 1,309, or 6 more than I account for. These represent a death-rate of 10.0 per 1,000 on a total population of 130,800. Corrected for age and sex, that is allowing for differences in the age and sex constitution of our population and that for the Country as a whole as found at the Census, the rate is increased to 10.59.

All deaths registered within the District were certified by the Coroner or a registered Practitioner.

The death-rate for England and Wales was 12.2; that of the 105 County Boroughs and Great Towns 12.2; that of the 157 "Smaller Towns" 11.2 and for London 11.7.

The birth, death, and infantile mortality rates of the following districts of the outer zone of London compared with Walthamstow, are as follows:—

District.	Population.	Birth-rate.	Death-rate.	Deaths of Children under 1 year to 1,000 Births.
West Ham ..	317,400 ..	24.7 ..	10.6 ..	58
Willesden ..	169,100 ..	15.1 ..	9.8 ..	67
Tottenham ..	153,100 ..	14.9 ..	10.2 ..	62
Hornsey ..	87,240 ..	12.1 ..	10.9 ..	47
Leyton ..	133,500 ..	12.5 ..	9.9 ..	66
Croydon ..	196,000 ..	17.9 ..	10.9 ..	52
East Ham ..	146,900 ..	14.6 ..	9.9 ..	61
Ilford ..	92,400 ..	15.3 ..	9.2 ..	53
Edmonton ..	70,450 ..	28.0 ..	9.5 ..	39
Walthamstow	**131,100** ..	**16.4** ..	**9.9** ..	**57**

The preceding figures are those given by the Registrar General in his four quarterly Reports. The figure 57 as the Walthamstow Infantile Mortality Rate is now found to be 51.4 and probably that for each of the other Districts may be lowered when the final corrections are made.

ACCORDING TO WARDS.

The number of deaths and their distribution into Wards is as ascertained, but the populations are those as enumerated in 1921, with slight adjusted variations. These will not vitiate to any extent the true death-rates:—

	St. James Street.	High Street.	Hoe Street.	Wood Street.	Hale End.	Higham Hill.
Population	25,000	20,500	24,000	17,600	18,000	25,000
Deaths	287	191	267	187	161	210
Death-rate (1925) ..	11.5	9.3	11.1	10.0	8.9	8.9
,, (1921) ..	10.5	9.8	11.0	9.8	9.9	7.9
,, (1914) ..	12.3	11.1	11.0	11.4	9.2	8.2

The causes of death for the Whole District and for the Wards are given in the Table following page 31.

The highest rates are those of St. James' Street, Hoe Street and Wood Street Wards, but the Mortality in all the Wards is less than in 1914—Higham Hill excepted, with a minimal increase.

The Hale End and Higham Hill Wards with a high general level over ordnance datum, are still largely unbuilt on and are surrounded by open country or the Forest—advantages not enjoyed to the same extent by the other portions of the District—and may account for their low Mortality rates.

St. James' Street with the highest rate lies from 18 to 50 feet above sea level, is built over and inhabited largely by semi-skilled or casual workers who have a constant struggle to keep over the poverty line.

My remarks on page 15, as to the inhabitants and the conditions in this Ward are emphasised in the proportionally greater number dying from Tuberculosis, Respiratory and Heart Diseases, as compared with the other Wards.

Hoe Street's high death-rate is accounted for by quite the reverse conditions. The Ward has a large proportion of well-to-do people living under favourable economic conditions tending to longevity. This is attained, and the causes of death include those associated with old age, namely Cancer, Senile Decay and diseases of the Heart and circulating organs. Under the heading of Senile Mortality it will be seen that over 27 in every 100 dying in this Ward were over 75 years of age.

An unsatisfactory feature in the Mortality of this Ward, however, is the excessive number of deaths in children under 1 year of age. With the lowest birth-rate the Ward has the highest Infantile Mortality rate.

One usually associates infant mortality with ignorance of the laws of health and feeding and poor economic conditions, and yet with 100 more births, the poorer mothers of St. James' Street had to their credit fewer deaths than their well-to-do sisters in Hoe Street. The large number dying in Hoe Street from Prematurity and Convulsions within the first month of life is significant and leads one to think that Ante-natal conditions are more artificial in the one Ward than in the other.

INQUESTS.

During the year 105 inquests were held concerning the deaths of Residents.

The ages at death and the causes assigned were as follows:—

Under 1 yr.	2-5 yrs.	5-15 yrs.	15-25 yrs.	25-45 yrs.	45-65 yrs.	65 yrs. and upwards.
14	2	3	11	9	37	29

Under One Year.—Tubercular Meningitis, 1; Atelectasis Neonatorum, 2; Broncho-Pneumonia, 1; Lobar-Pneumonia, 1; Congenital Malformation, 1; Whooping Cough, 1; Convulsions, 1; Heart Failure, Patent foramen ovale, 1; Syncope Status Lymphaticus, 1; Accidental shock following concussion of brain and partial asphyxiation by Water, 1; Accidental Asphyxia through inhalation of vomited food into bronchi, 1; Accidental syncope pressure of overloaded Stomach on Heart, 1; Accidental Asphyxia while in bed with parents, 1.

Over One Year.—There were 56 returned as due to Natural Causes, 4 to mis-adventure, 33 to accidents and 8 were suicides.

SENILE MORTALITY.

Of the total deaths recorded in the District 517 or 39 per cent. were of persons aged 65 and upwards compared with an average in 1920 of 30 per cent.

Two hundred and seventy-four were over 75 years of age, 34 over 85, and 17 over 90 at the time of death.

Hoe Street Ward contained the largest number, 125; followed by St. James' Street with 105, Wood Street, 78, Higham Hill, 76, High Street, 70 and Hale End 63.

Apart from old age the chief causes of death in the latest stages of life were Cancer and diseases of the Heart and Lungs.

The figures relating to the Wards were as follows:—

In St. James St. Ward,	57	were	75 yrs.	or	over;	of these,	5	were	85 yrs.	or over.
,, High Street	,,	32	,,	,,	,,	,,	5	,,	,,	,,
,, Hoe Street	,,	71	,,	,,	,,	,,	4	,,	,,	,,
,, Wood Street	,,	43	,,	,,	,,	,,	7	,,	,,	,,
,, Hale End	,,	33	,,	,,	,,	,,	4	,,	,,	,,
,, Higham Hill	,,	38	,,	,,	,,	,,	9	,,	,,	,,

The following table (page 33) gives the number of births and deaths, their rates, the Zymotic Death-rate, Infantile Mortality-rate, and natural increase of population for the past 35 years, and the average in five-yearly periods. The rates for 1925 are based on similar data to preceding years:—

TABLE IX.

Causes of and Ages at Death during the year 1925.

Whole District and Wards.

No.	Causes of Death.	Nett Deaths at the subjoined ages of "Residents" whether occurring within or without the district.									Wards.					
		All Ages	Under 1 year	1 and under 2 years	2 and under 5 years	5 and under 15 years	15 and under 25 years	25 and under 45 years	45 and under 65 years	65 and upwards	St. James Street	High Street	Hoe Street	Wood Street	Hale End	Higham Hill
	1	2	3	4	5	6	7	8	9	10						
1	Enteric Fever	2	—	—	—	—	1	—	1	—	2	—	—	—	—	—
2	Small Pox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
3	Measles	6	—	3	3	—	—	—	—	—	3	1	1	—	—	1
4	Scarlet Fever	1	—	—	1	—	—	—	—	—	—	—	1	—	—	—
5	Whooping Cough	26	10	9	6	1	—	—	—	—	7	5	5	4	1	4
6	Diphtheria	7	—	1	4	1	1	—	—	—	2	2	—	2	—	1
7	Influenza	31	—	1	—	1	4	1	9	15	7	1	6	10	3	4
8	Encephalitis Lethargica	3	—	—	1	—	—	—	1	1	1	1	1	—	—	—
9	Meningococcal Meningitis	2	—	1	1	—	—	—	—	—	1	—	—	—	1	—
10	Tuberculosis of Respiratory System	112	—	—	3	6	25	42	32	4	22	20	17	15	13	25
11	Other Tuberculous Diseases	26	3	5	5	7	2	2	2	—	7	3	7	2	5	2
12	Cancer, malignant disease	155	—	—	—	1	2	12	76	64	26	23	39	28	15	24
13	Rheumatic Fever	3	—	—	—	—	1	—	2	—	—	1	1	1	—	—
14	Diabetes	9	—	—	—	—	—	—	4	5	1	—	1	2	2	3
15	Cerebral Hæmorrhage, etc.	69	—	—	—	—	—	3	22	44	13	8	22	7	6	13
16	Heart Disease	168	1	—	1	4	4	9	55	94	39	34	35	20	16	24
17	Arterio-sclerosis	22	—	—	—	—	—	2	5	15	6	3	2	3	4	4
18	Bronchitis	150	9	2	—	2	1	4	31	101	39	17	33	21	23	17
19	Pneumonia (all forms)	99	15	12	5	3	5	8	23	28	26	18	15	9	12	19
20	Other Respiratory Diseases	17	1	—	—	—	1	—	7	8	4	1	7	2	2	1
21	Ulcer of Stomach or Duodenum	9	—	—	—	—	—	1	6	2	2	2	2	1	1	1
22	Diarrhœa, etc. (under 2 years)	6	6	—	—	—	—	—	—	—	1	1	3	—	1	—
23	Appendicitis and Typhlitis	10	—	—	1	4	—	2	3	—	1	1	—	1	5	2
24	Cirrhosis of Liver	5	—	—	—	—	—	1	3	1	1	—	—	1	1	2
25	Acute and Chronic Nephritis	40	—	—	—	3	2	7	16	12	10	7	4	5	7	7
26	Puerperal Sepsis	1	—	—	—	—	—	1	—	—	—	—	—	—	—	1
27	Other accidents and diseases of Pregnancy and Parturition	6	—	—	—	—	—	6	—	—	1	2	2	—	1	—
28	Congenital Debility and Malformation, Premature Birth	63	62	1	—	—	—	—	—	—	10	12	11	11	7	12
29	Suicide	8	—	—	—	—	3	—	3	2	2	1	1	2	1	1
30	Other Deaths from Violence	35	3	—	1	1	3	3	11	13	5	1	11	5	7	6
31	Other Defined Diseases	147	11	3	6	11	8	16	40	52	38	19	22	24	21	23
32	Causes ill-defined or unknown	1	1	—	—	—	—	—	—	—	—	—	—	—	—	1
	Special Causes (included above)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Polioencephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Senile Decay	64	—	—	—	—	—	—	—	64	10	7	18	11	6	12
	Totals	1303	122	38	38	45	63	120	352	525	287	191	267	187	161	210

TABLE X.

SUMMARY, 1925.

Causes of Death of Children under 1 year of age.

Cause of Death.	Under 1 Week	1-2 Weeks	2-3 Weeks	3-4 Weeks	Total under 4 Weeks	4 Weeks and under 3 Months	3 Months and under 6 Months	6 Months and under 9 Months	9 Months and under 12 Months	Total Deaths under One Year.	Wards. St. James Street	High Street	Hoe Street	Wood Street	Hale End	Higham Hill
All Causes {Certified .. ..}	40	5	16	6	67	17	22	10	6	122						
{Uncertified .. ..}	—	—	—	—	—	—	—	—	—	—						
Influenza	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Small-Pox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Chicken-Pox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	—	—	—	—	—	2	3	2	3	10	2	2	3	1	—	2
Whooping Cough	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria and Croup	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tuberculous Meningitis	—	—	—	—	—	—	1	—	—	1	—	—	—	—	1	—
Abdominal Tuberculosis (*b*)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Tuberculous Diseases	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Phthisis	—	—	—	—	—	—	—	1	—	1	—	1	—	—	—	—
Meningitis (*not Tuberculous*)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Convulsions	1	1	3	—	5	—	—	1	—	6	—	1	4	—	—	1
Laryngitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Bronchitis	1	1	1	—	3	4	3	—	—	10	4	2	—	2	2	—
Pneumonia (all forms)	1	—	1	—	2	3	6	2	2	15	3	2	2	2	2	4
Diarrhœa	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Enteritis	—	—	2	1	3	—	3	1	—	7	1	1	3	—	1	1
Gastritis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Syphilis	—	—	1	—	1	1	—	—	—	2	—	—	—	2	—	—
Rickets	—	—	—	—	—	—	—	—	—	—	—	=	—	—	—	—
Inattention at Birth, wilful neglect ..	—	—	—	1	1	—	—	—	—	1	1	—	—	—	—	—
Suffocation, overlying	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Injury at Birth	1	—	—	—	1	—	—	—	—	1	—	—	1	—	—	—
Atelectasis	6	—	—	—	6	—	—	—	—	6	1	1	—	2	1	1
Congenital Malformations	3	—	1	1	5	1	2	1	—	9	2	1	1	1	2	2
Premature Birth	25	2	4	3	34	3	—	—	—	37	4	10	8	5	4	6
Atrophy, Debility and Marasmus ..	2	—	1	—	3	1	2	—	—	6	3	—	—	1	—	2
Cerebro-Spinal Meningitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Encephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Causes	—	1	2	—	3	2	2	2	1	10	1	1	1	5	1	1
Totals	40	5	16	6	67	17	22	10	6	122	22	22	23	21	14	20

TABLE XI.

Birth, Death, and other Rates since 1891.

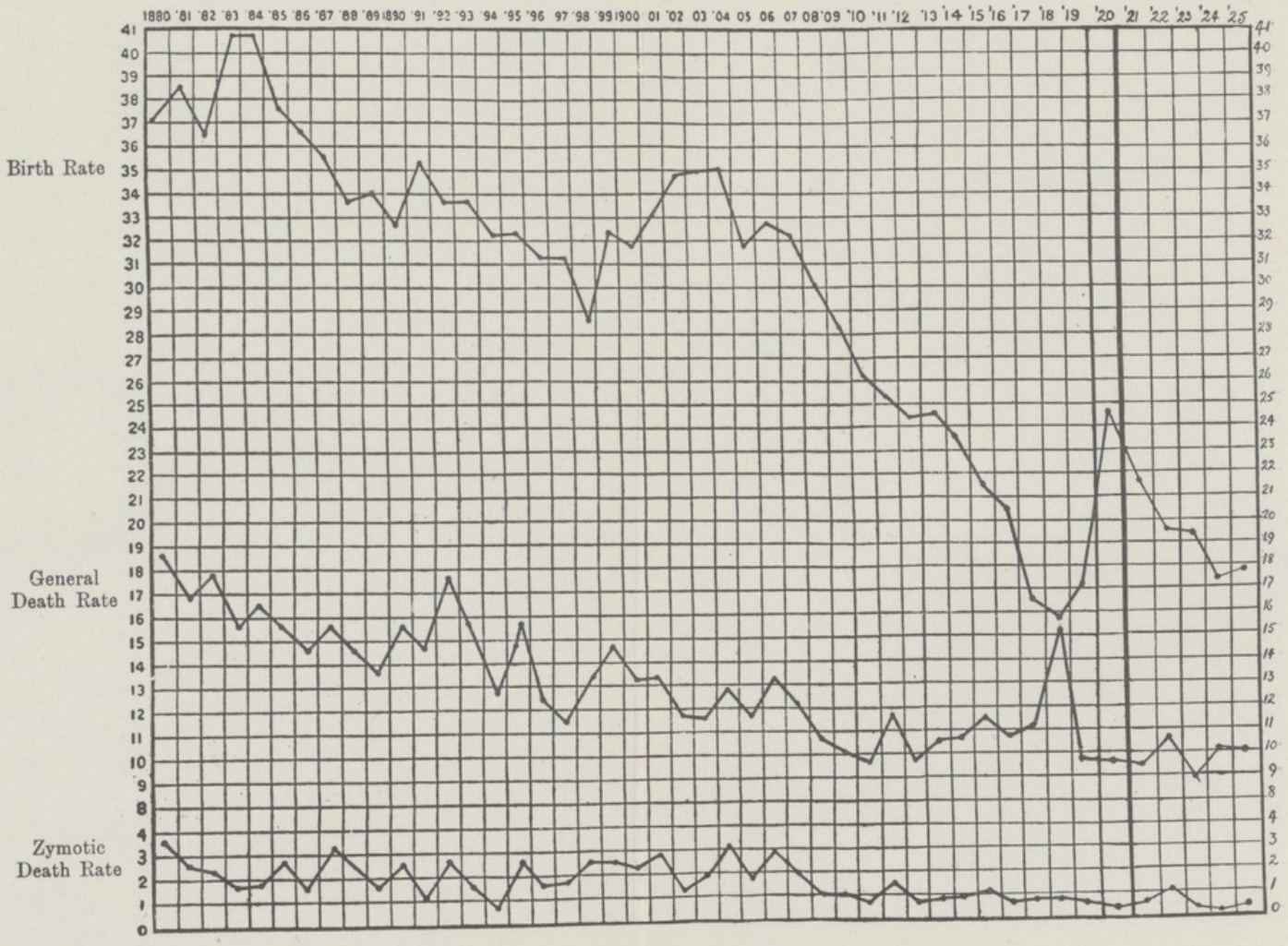
Year.	Births.	Deaths.	B. Rate.	D. Rate.	Zymotic D. R.	Infantile Mortality Rate.	Natural Increase of Population
1891	1756	694	37.3	14.7	1.9	120.0	1062
1892	1717	915	34.75	18.0	3.9	145.6	802
1893	1809	809	34.78	15.55	2.43	133.2	1000
1894	1813	717	32.0	12.6	1.8	129.6	1096
1895	2021	965	33.2	15.8	3.5	153.3	1056
Average for 5 years 1891-1895.	**1823**	**820**	**34.4**	**15.33**	**2.7**	**136.3**	**1003**
1896	2101	817	32.3	12.5	2.4	127.5	1284
1897	2246	832	32.08	11.88	2.8	132.0	1414
1898	2294	1034	29.8	13.4	3.67	169.5	1260
1899	2835	1282	34.14	15.44	2.94	170.0	1553
1900	3037	1254	33.37	13.78	2.8	158.7	1783
Average for 5 years 1896-1900.	**2502**	**1043**	**32.33**	**13.4**	**2.92**	**151.5**	**1458**
1901	3210	1296	33.1	13.35	2.82	147.6	1914
1902	3426	1154	34.82	11.73	1.3	115.0	2272
1903	3535	1178	34.97	11.65	1.9	113.7	2357
1904	3649	1330	35.14	12.81	3.1	135.9	2319
1905	3389	1249	31.76	11.71	1.8	104.4	2140
Average for 5 years 1901-1905.	**3341**	**1241**	**33.94**	**12.25**	**2.18**	**123.3**	**2200**
1906	3594	1447	32.79	13.20	2.9	129.7	2147
1907	3629	1376	32.23	12.22	2.0	104.7	2253
1908	3482	1258	30.10	10.87	1.0	100.8	2224
1909	3369	1205	28.35	10.14	1.0	83.4	2164
1910	3197	1186	26.18	9.71	0.8	88.5	2011
Average for 5 years 1906-1910.	**3454**	**1294**	**29.93**	**11.22**	**1.5**	**101.4**	**2159**
1911	3182	1456	25.36	11.70	1.58	108.4	1726
1912	3150	1267	24.40	9.80	0.87	78.9	1883
1913	3261	1334	24.76	10.13	0.84	79.5	1926
1914	3134	1428	23.24	10.50	0.98	77.5	1706
1915	2826	1573	21.7	11.9	1.06	93.1	1253
Average for 5 years 1911-1915.	**3110**	**1411**	**23.89**	**10.8**	**1.06**	**87.4**	**1698**
1916	2854	1376	20.5	10.7	0.72	69.3	1478
1917	2228	1330	16.7	11.1	0.75	70.0	898
1918	2034	1792	15.9	15.7	0.79	81.1	252
1919	2215	1273	17.2	9.9	0.61	69.5	1028
1920	3286	1293	24.7	9.7	0.45	59.9	1993
Average for 5 years 1916-1920.	**2523**	**1413**	**19.0**	**11.4**	**0.66**	**69.9**	**1130**
1921	2673	1237	21.7	9.5	0.52	61.4	1436
1922	2479	1402	19.6	10.8	1.07	62.8	1077
1923	2529	1165	19.4	8.96	0.30	45.8	1364
1924	2291	1328	17.4	10.01	0.19	64.1	963
1925	2351	1309	17.9	10.00	0.34	51.4	1042
Average for 5 years 1921-1925.	**2464**	**1288**	**19.2**	**9.85**	**0.48**	**57.1**	**1144**

TABLE XII.

Since my appointment the numbers of deaths from the Zymotic diseases named were as follows:—

	Small-Pox.	Scarlatina.	Diphtheria and Croup.	Typhoid.	Measles.	Whooping Cough.	Diarrhœa.	Zymotic Enteritis.	Total.
1898	0	3	46	9	39	24	162		283
1899	0	6	73	19	33	34	144		309
1900	0	5	78	6	3	54	110	27 (Gastro-Enteritis	283
1901	0	13	38	12	43	26	131	10	274
1902	20	6	21	13	14	23	23	5	125
1903	0	6	17	19	52	34	28	37	193
1904	1	14	29	10	55	32	84	99	324
1905	0	17	28	8	35	31	52	26	197
1906	0	21	57	8	39	18	113	51	307
1907	0	22	36	5	22	76	56	15	232
1908	0	11	22	13	36	2	26	14	124
1909	0	11	17	2	30	46	7	10	123
1910	0	4	15	2	20	32	8	23	104
1911	0	5	30	3	32	19	130		219
1912	0	2	23	2	22	37	27		113
1913	0	2	21	2	21	18	47		111
1914	0	7	29	4	21	17	48		126
1915	0	7	12	1	54	31	46		151
1916	0	3	19	0	24	21	24		91
1917	0	2	24	4	24	11	25		90
1918	0	2	16	2	19	32	20		91
1919	0	2	20	1	9	5	41		78
1920	0	1	19	1	5	10	24		60
1921	0	5	12	0	3	8	45		73
1922	0	8	26	1	40	39	23		137
1923	0	0	6	2	1	3	16		28
1924	0	1	4	0	11	17	9		42
1925	0	1	7	0	6	26	6		46

Chart showing the Birth, Death and Zymotic Death-Rates for the Years 1880 *to* 1925.



SECTION II.

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

Hospitals Provided or Subsidised by the Local Authority or County Council.

1. **Tuberculosis.**—In 1914 the Council erected a pavilion of 14 beds for Tuberculosis patients, on land adjoining the Isolation Hospital in the Chingford Area. Since then, by arrangement with the County Council of Essex, these beds have been continuously in occupation by patients of the pulmonary type, until mid-year 1923, when surgical cases were admitted.

2. **Maternity.**—Many unsuccessful attempts have been made to establish a Maternity Hospital and at the present moment an application is before the Ministry for sanction to purchase a House considered suitable for this purpose.

3. **Children.**—Apart from the General Hospital already referred to the Voluntary Child Welfare Society has established six beds for the treatment of children suffering from developmental defects and malnutrition. The Council contributes £50 yearly and any children sent there for treatment by me are paid for at the rate of thirty shillings a week.

4. **Infectious Disease.**—The Isolation Hospital provided by the Local Authority and situated without the Area is referred to on page 60. In addition two beds are retained by the Local Authority for the treatment of cases of Typhoid and these have, so far, been quite sufficient for the purpose.

5. **Small Pox.**—No provision has yet been made for the treatment of patients who may contract this disease. In 1902 the Council paid a large sum to West Ham, and up to the year 1919 also paid yearly a retaining fee of £100 to ensure treatment for patients from this Area at the Dagenham Hospital.

These sums have been largely wasted and the Council refused to enter into a later scheme formulated by West Ham, primarily from a feeling that the original agreement when entered into was considered to be permanent, but mainly owing to a belief that the County Council of Essex is the Authority which can adequately and economically provide for the Metropolitan Areas of the County such a Hospital under the Isolation Hospitals Act of 1893.

There is no Institutional provision made by the Authority for unmarried mothers, illegitimate infants and homeless children.

AMBULANCE FACILITIES.

(*a*) Two motor Ambulances for Infectious Diseases are maintained by the Local Authority and the St. John's Ambulance Association hires its Motor Ambulance for the removal to Hospital of cases of serious illness and deals with accidents without payment.

(*b*) The Council has had under consideration the provision of an Ambulance for night and day service to be kept at the Fire Station and available for serious street accidents occurring within the Area and requiring removal to Hospital. No final decision has yet been made,

CLINICS AND TREATMENT CENTRES.

These embrace the following:—

Situation.	Accommodation.	By whom provided.	Description.
Brookscroft, Forest Road.	Waiting rooms, weighing room, consulting room class rooms.	Voluntary Association.	Infant consultations, wards for observation and treatment.
Truro Hall, High Street.	Waiting, weighing and consulting rooms.	Urban District Council.	Infant consultations, Ante-Natal Clinic.
Lloyd Park, Walthamstow	Waiting, consulting and treatment rooms.	Walthamstow Education Committee.	Minor ailments, Dental Clinic, Eye Clinic.
Hoe Street, Walthamstow	Do.	Voluntary.	X-ray treatment for School children by arrangement.
Do.	Do.	Essex County Council.	Tuberculosis Dispensary.
Lloyd Park, Walthamstow	Waiting and consulting rooms.	Walthamstow Education Com.	Orthopaedic Consultation.
Cripple School Barrett Road.	Consulting and treatment rooms.	Do.	Consultation and Treatment.

Venereal Diseases are treated at the London Hospitals by arrangements made by the Essex County Council.

There is no arrangement for home nursing of any kind apart from that undertaken by the Walthamstow Branch of the Essex Cottage Nursing Association, described on page 24.

Public Health Officers of Local Authority.—These are given on page 4.

Midwives.—There are 12 Midwives practising within the Area in addition to those of the Essex Cottage Nursing Association, mentioned on page 24. During 1925 they attended 927 confinements on their own account and the work carried out was quite satisfactory. In addition they acted as Midwifery Nurses in 111 other cases.

Until 31st December, 1925, the Council acted as Supervising Authority, when the County Council resumed its powers under the Midwives Act, 1918.

Chemical Work.—By arrangement with the County Council of Essex the Public Analyst for that Body carries out at a fixed fee all the necessary analyses under the Sale of Food and Drugs Acts.

During 1925, 89 samples—mainly Milk—were analysed for your Authority and 86 proved genuine. There was such slight variation from normal in the others that no legal action was deemed necessary.

Legislation in Force.—The following Legislative Enactments are in force:—

ADOPTIVE ACTS.

BYE-LAWS AND REGULATIONS.

Relating to Public Health in force in the District.

Adopted Acts.

The Infectious Disease (Notification) Act, 1889.

The Public Health Acts (Amendment) Act, 1890. Parts II, III & V.

The Infectious Disease (Prevention) Act, 1890.

The Public Libraries Act, 1892.

Baths and Washhouses Act, 1846, and the Acts amending the same.

The Burials Acts, 1852 to 1885.

The Public Health Acts (Amendment) Act, 1907. Parts II, III, IV, V, VI, and X.

The Public Health Act, 1925. Parts II, III, IV and V.

Bye-Laws.

Bye-laws with respect to Common Lodging Houses.

Bye-laws with respect to Slaughter-houses.

Bye-laws with respect to Nuisances.

Bye-laws with respect to Houses let in Lodgings or occupied by members of more than one family.

Bye-laws as to Nuisances in connection with the Removal of Offensive or Noxious Matters.

Bye-laws as to the Decent Conduct of Persons using Sanitary Conveniences provided and maintained by the Local Authority for Public Accommodation.

Bye-laws for Imposing on the Occupier of any Premises duties in connection with the Removal of House Refuse so as to facilitate the work of collection.

Bye-laws for the Prevention of Nuisances from Filth, Ashes and Rubbish.

Bye-laws with respect to New Streets and Buildings and the Alteration of Buildings.

Bye-laws with respect to the Provision of Means of Escape in case of Fire in certain Factories and Workshops.

Bye-laws for the Regulation of Offensive Trades.

Bye-laws *re* Employment of Children.

Regulations.

Regulations to be observed by Occupiers of Bakehouses.

Regulations with respect to the Management of Sanitary Conveniences provided and maintained by the Local Authority.

Regulations with respect to Dairies, Cow-sheds and Milk Shops.

SECTION III.

SANITARY CIRCUMSTANCES OF THE AREA.

Water.—The whole District is served by the Metropolitan Water Board, and the supply is constant.

During the year 12 houses had the water supply reinstated or improved; 84 cisterns were cleansed and covered, and in 13 instances were abolished.

Since the adoption of the Public Health Acts (Amendment) Act of 1907, a considerable amount of improvement in this latter direction has taken place yearly.

No complaint has been made as to pollution of streams within the area.

Drainage and Sewerage.—The whole District has a duplicate system of sewers and practically every house water-closet accommodation. Work will be commenced in May, 1926, and finished within 18 months, when all the sewage of the Area will be delivered into the London County Council Sewers. There has been difficulty at times, under existing arrangements, for the production of a satisfactory effluent, but no serious complaints have been made nor any action taken by the Dagenham Commissioners for pollution of the stream through which the effluent flows.

Scavenging.—This has been efficiently carried out and the large number of private streets now tar-macadamed or asphalted and flanked by flowering and other trees give a general appearance of cleanliness and freshness to our roadways.

A weekly collection of house refuse is carried out over the whole District and disposed of at the Destructor. In the Shopping and Market Areas collections are more frequent.

In conformity with the Bye-laws galvanised dust-bins are supplied by the landlords to all tenants. Considerable difficulty is experienced in maintaining this provision, especially when renewals are necessary.

Sanitary Inspection of the Area.—The following indicates the nature and amount of work carried out during the year:—

Number of Inspections made	9,395
Number of nuisances detected	7,978
Number of complaints received	1,704
Informal Notices served	2,299
Informal Notices complied with	2,223
Statutory Notices served	99
Total number of visits from all causes ..	18,398

The number of complaints received were less than in 1924 and shows that we are slowly returning to more normal conditions.

Of the 99 Statutory Notices served 91 were complied with within the year.

The nature and variety of the work carried out is shown in the following tables:—

Drains tested	295
,, reconstructed or repaired	400
,, obstructions removed	309
,, means of access provided	34
,, ventilation provided or improved	65
,, ventilation repaired	113
,, manholes repaired and resealed	55

Soil pipes repaired	36
,, new provided	9
Gully traps provided	136
W.c. pans and traps provided	148
Rain water pipes repaired	255
,, ,, ,, disconnected from drains	9
Roofs repaired or renewed	702
W.c. flush cisterns provided	122
,, ,, repaired	373
W.c. floors concreted	82
W.c.'s repaired and cleansed	423
W.c.'s, light and ventilation improved	11
Waste pipes renewed or trapped	270
,, ,, repaired	23
New sinks provided	28
Water supply reinstated	12
,, ,, taken off main	13
Drinking water cisterns cleansed and covered	84
Conveniences cleansed and repaired	27
Sculleries paved	408
Yards and forecourts paved	418
Dirty houses cleansed	151
Dirty rooms cleansed	3,936
Floors repaired	259
Ventilation under floors provided	167
New Damp-proof courses provided	48
Sites concreted	2
Rooms ventilated	2
Offensive accumulations removed	67
Animals improperly kept, removed	10
Manure receptacles provided	8
Stables cleansed, paved and drained	85
Other cases of dampness remedied	357
Separate Sanitary Conveniences provided to shops where both sexes are employed	2
Miscellaneous repairs	1,006

DAMPNESS IN HOUSES.

Sites concreted	2
Damp-proof courses provided	48
Yards and forecourts paved and drained	418

Roofs made water-tight	702
Rain-water pipes made good	264
Guttering repaired or renewed	365
Other cases of dampness remedied	357
Ventilation under floors provided	167
House-to-house Inspections	429

Premises and Occupations which can be controlled by Bye-laws and Regulations:—

	Number.	Visits paid.
Slaughter-houses	15	599
Butchers' Shops	74	851
Bakehouses	45	113
Fishmongers (fish frying & curing), etc. ..	60	443
Eating-houses and coffee stalls	63	76
Ice cream vendors	125	119
Cowsheds	4	41
Milkshops	123	248
Laundries	31	37
Rag and bone dealers	7	33
Elementary Schools	27	111
Private Schools	13	
Piggeries	11	98
Street Stalls	Numerous	138
Greengrocers	,,	123
Factories	,,	234
Workshops	,,	253
Outworkers	,,	371

As a result of the regular periodical visiting of the Special Premises the following works were carried out:—

Butchers' Shops and Slaughter-Houses.

Special cleansings, 55; Pavings repaired, 4; Floors repaired and ventilated, 2; Accumulations removed, 3; Drains cleared of obstruction and repaired, 2; Roofs repaired, 2; Coppers renewed, 2; W.c.'s cleansed and Cisterns renewed, 5; Shop fittings improved and blinds renewed, 3; Light and Ventilation improved, 1; New galvanised iron receptacles provided, 7.

BAKEHOUSES.

Special cleansings, 69; Drains repaired, 3; W.c.'s cleansed and doors repaired, 2; Yards repaved, 2; Obstructions from drains removed, 1; W.c. cisterns repaired, 4; New W.c. pans and traps provided, 3; floors repaired, 2; New ceiling fixed, 1; New W.c. provided, 1.

FISHMONGERS.

Special cleansings, 38; Drains cleared of obstruction, 3; Yards repaved, 11; W.c.'s repaired and cleansed, 2; Access to drains provided, 1; W.c. cisterns repaired, 4; New W.c. cisterns provided, 2; New W.c. pans and traps fixed, 2; Accumulations removed, 4; Floorings repaired, 2; Drains repaired, 3; Other improvements, 2.

COFFEE AND EATING HOUSES.

Special cleansings, 20; Drains cleared of obstruction, 2; W.c.'s repaired and cleansed, 2; Yard pavings repaired, 3; Food Store Ventilation improved, 2; Drains repaired, 3; W.c. Cisterns repaired, 3.

ICE CREAM VENDORS.

Special cleansings, 19; Special cleansing of Utensils, 7; Yard pavings repaired, 2; W.c. Ventilation improved, 1; Obstruction from drains removed, 2.

COWSHEDS AND MILKSHOPS.

Special cleansings, 36; Pavings relaid, 2; Drains repaired, 3; New W.c. provided, 1; W.c.'s cleansed, 2.

STABLE PREMISES.

Cleansings, 51; Accumulations removed, 17; Gutters repaired, 2; Roofs repaired, 5; Pavings repaired, 4 Manure receptacles repaired, 2; New Manure receptacles provided, 8.

LAUNDRIES.

Special cleansings, 26; Roofs repaired, 2; Floors repaired, 1; W.c. Cisterns repaired, 1; Other improvements, 2.

RAG AND BONE DEALERS.

Cleansings, 12; New roof provided, 1.

PRIVATE SCHOOLS.

W.c. repaired and cleansed, 1; Flush Cistern repaired, 1.

PIGGERIES.

Cleansings, 9; Paving relaid, 2; Re-drained, 1.

In addition to the foregoing 39 Public Houses and 51 Off Licensed Premises were inspected which resulted in the following works being carried out:—

Cellars cleansed, 21; Cellars and floors rendered in Cement, 2; Dampness remedied, 2; Ventilation improved, 5; Flooding of Cellars abated, 2; Light improved, 2; Drains repaired, 4.

Smoke Abatement.

Observation is kept from time to time on Factory Chimneys, and no legitimate cause of complaint was found.

Considerable difficulty was experienced during the year owing to complaints from residents as to the offensive and irritating vapours given off from a manufacturing premises in the Wood Street area.

A special report was given by two of the Ministry's Officers and certain improvements were effected.

I made several visits to the premises and saw a number of those who believed they were suffering as a result of emitted vapours, but I failed to satisfy myself that this was really so.

The workpeople and staff numbering over 300 had practically a clean bill of health throughout the year. Complaints have ceased to be made for the past seven months.

Elementary Schools.

A systematic survey of all these have been made. Few defects were found and upon representation to the Education Committee they were remedied.

The School buildings are nearly all modern and the sanitary fittings up-to-date; ventilation and lighting is invariably good and the water supply—off the main—ample.

The action taken in relation to the health of the Scholars and for the prevention of the spreading of disease is detailed under the heading of "Infectious Diseases."

SECTION IV.

HOUSING.

Table IV. given on page 18 shows that at the Census there were 1,287 overcrowded "occupations." The population since that period has increased only by 1,405 persons.

In the meantime 872 houses were erected—608 by the Council and 264 by private enterprise. Fifty-three of the latter were "subsidised."

Assuming five in a family per house 4,360 persons have been provided for as against an increase of 1,405 in population. In other words approximately 5,000 persons were living in over-crowded conditions at the Census as against half that number to-day.

A considerable number of houses are in course of construction on the border of the District and the Council has in course of construction at the moment (April) 50 houses in the Northern Area. These, in conjunction with the houses being built by private enterprise (97 and 36 Tenements) will tend to relieve at an early date the more serious conditions of present day overcrowding.

The number of instances of gross overcrowding discovered in the course of inspection numbered 31. These were to some extent relieved, more particularly the objectionable features of want of separation of the sexes by a different allocation of the sleeping arrangements. The number found by the Sanitary Inspectors is no index to actual conditions.

The following list of applications for houses submitted to the Housing Committee in the mid-year shows more fully the extent of gross overcrowding which has not come under the Inspectors' knowledge:—

Applicants living in—	
One room—two adults with two to four children	283
Two rooms—two adults with three to seven children ..	129
Three rooms—two adults with four to eight and eleven children	559

The causes of overcrowding were the obvious ones—want of sufficient accommodation and in many cases inability to pay for it and the unwillingness of landlords to re-let, preferring to sell their houses as they became vacant.

No legal action was taken against occupants for overcrowding, but in many instances the Council or the "Warner Estate Company" helped by the granting of a house or "Flat."

Fitness of Houses.

The general standard is lower than in 1914. The defects are largely due to "wear and tear" and the failure to carry out the ordinary repairs during the period 1914-1919. The older houses and those of the "field ranging" type suffered most as they are owned largely by the small men who prior to 1909 bought this class of property, and now find that owing to increased cost of repairs they are financially unable to do justice to their tenants or maintain their property adequately.

Decorative repairs are most difficult to get effected, and the necessary painting neglected. The houses under management are probably better than those directly supervised by the class of owner referred to.

The number of Statutory Notices served—99 compared with 27 in 1913—shows the difficulty experienced in maintaining anything like a proper housing standard. Owing to failure of landlords the Council carried out repairs under Section 3, Housing Act, 1925, to the extent of £265 on 15 houses.

Unlimited action in this respect by the Council is seriously checked by the fact that the Governing Body, like the landlord, has but a limited purse.

Years must elapse before the Council can recover the money already expended and naturally many members of the Council hesitate to incur further liability in this way.

Prior to 1914 the general standard of fitness of houses was good. How far this standard has fallen is apparent by a perusal of the following table:—

Year.	No. of complaints received.	No. of Informal Notices served.	No. of Statutory Notices served.	No. of Dirty Rooms cleansed.	No. of House-to-house Inspections
1913 ..	179	1306	27	1224	1326
1920 ..	1847	2532	46	2863	415
1921 ..	2188	2617	32	4567	110
1923 ..	1717	2533	65	5115	1214
1924 ..	1794	2265	75	4097	660
1925 ..	1704	2299	99	3936	429

The number of house-to-house inspections made is influenced by the number of complaints received, although this was not entirely so in 1923, when an endeavour was made to deal with certain areas in the District. The result of this is shewn in the reduction of complaints in 1924 and 1925.

House-to-House Inspection, and the general character of defects found to exist in unfit houses recorded under Section 17, Housing, Town Planning Act, 1909, is as follows:—

(1)	Number of houses inspected	429
(2)	Number of houses found not to be in all respects fit	329
(3)	Number of representations made to Local Authority..	Nil.
(4)	Number of Closing Orders made	Nil.
(5)	Number of defects which were remedied without Closing Orders	329
(6)	General character of the defects found to exist in the dwelling houses inspected ..	Drainage. Uncleanliness. Dampness.

The conditions were found as follows:—

		Good.	Fair.	Bad.
	Conditions regarding:—			
(1)	Arrangements for preventing the contamination of the Water Supply ..	412	11	3
(2)	Closet Accommodation	381	33	12
(3)	Drainage	382	36	8
(4)	Condition of house in regard to light, free circulation of air, dampness and cleanliness	221	186	19
(5)	Paving, drainage and Sanitary condition of Yard and Outhouses	291	104	31
(6)	Arrangements for deposit of refuse and ashes	417	—	9
(7)	Any room so dangerous or injurious to health as to be unfit for human habitation	350	72	4
(8)	Any other defects which may tend to render house dangerous and injurious to health of any inhabitant	315	101	10

Unhealthy Areas.

No part of the District could be described as coming under this heading. There are a few old dilapidated houses in cul-de-sacs in the Wood Street Ward which, under favourable conditions, might be condemned as unfit for habitation.

The present Bye-laws as to Houses let in Lodgings are dated 1883. There are no registered premises under this heading and no necessity for a revision of these Bye-laws at present.

General and Miscellaneous.

Under this heading may be mentioned that 28 sinks of the old and worn out type of soft stone were replaced by those of modern pattern and in no instance was replacement due to the outcome of misuse by tenants.

The number of water closets and their fittings replaced was considerable. The improvements in these were mostly on account of the worn out condition of the fittings and to the furred up condition of water closet traps. Many of the latter were found, after removal, to be of an irregular shape and would tend towards corrosion. Such matters as these can hardly be attributable to misuse by tenants.

Housing Statistics for the Year 1925.

Number of new houses erected during the year:—

No. of Houses erected (private enterprise)	107
No. of Houses erected (building scheme)	60
Total	167

1.—UNFIT DWELLING HOUSES.

I.—Inspection.

(1) Total number of dwelling-houses inspected for housing defects (under Public Health and Housing Acts)	5,507
(2) Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910	429
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	Nil.
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	329

II.—Remedy of Defects with Service of Informal Notices.

Number of defective dwelling-houses rendered fit in consequence of formal action by the Local Authority or their Officers	2,223

III.—Action under Statutory Powers.

A. *Proceedings under Section* 28 *of the Housing, Town Planning, etc., Act,* 1919, *and Section* 3 *of the Housing Act,* 1925.

(1) Number of dwelling-houses in respect of which notices were served requiring repair	87
(2) Number of dwelling-houses which were rendered fit—	
(*a*) by owners	67
(*b*) by Local Authority in default of owners ..	12

(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declaration by owners of intention to close	Nil.

B. *Proceedings under Public Health Acts.*

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	12
(2) Number of dwelling-houses in which defects were remedied—	
(*a*) by owners	3
(*b*) by Local Authority in default of owners	9

C. *Proceedings under Sections* 17 *and* 18 *of the Housing, Town Planning, etc., Act*, 1909.

(1) Number of representations made with a view to the making of Closing Orders ..	Nil.
(2) Number of dwelling-houses in respect of which Closing Orders were made ..	Nil.
(3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling house having been rendered fit	Nil.
(4) Number of dwelling-houses in respect of which Demolition Orders were made ..	Nil.
(5) Number of dwelling-houses demolished in pursuance of Demolition Orders ..	Nil.

FACTORY AND WORKSHOP ACT, 1901.

Factories, Workshops, Laundries, Workplaces and Homework.

1.—INSPECTION.

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.

Premises. (1)	Number of		
	Inspections. (2)	Written Notices. (3)	Prosecutions. (4)
Factories .. .. (Including Factory Laundries.)	234	7	—
Workshops .. .. (Including Workshop Laundries.)	253	1	—
Workplaces .. .. (Other than Outworkers' premises.)	171	—	—
Total	658	8	—

2.—DEFECTS FOUND.

Particulars.	Number of Defects.			Number of Prosecutions.
	Found.	Remedied.	Referred to H.M. Inspector.	
(1)	(2)	(3)	(4)	(5)
*Nuisances under the Public Health Acts:—**				
Want of cleanliness	19	19	—	—
Want of ventilation	1	1	—	—
Overcrowding	—	—	—	—
Want of drainage of floors ..	—	—	—	—
Other nuisances	24	24	—	—
Sanitary accommodation — insufficient ..	2	2	—	—
Sanitary accommodation — unsuitable or defective	4	4	—	—
Sanitary accommodation — not separate for sexes	2	2	—	—
Offences under the Factory and Workshop Act—				
Illegal occupation of underground bakehouse (s. 101)	—	—	—	—
Breach of special sanitary requirements for bakehouses (ss. 97 to 100)	—	—	—	—
Other offences .. .. .. (Excluding offences relating to outwork).	—	—	—	—
Total	52	52	—	—

*Including those specified in Sections 2, 3, 7 and 8 of the Factory and Workshop Act 1901, as remediable under the Public Health Acts.

3.—OUTWORK IN UNWHOLESOME PREMISES.

Nature of Work. (1)	Instances. (2)	Notices served. (3)	Prosecutions. (4)
Wearing Apparel—			
Making, etc.	34	—	—
Cleaning and washing	—	—	—
Household linen	—	—	—
Lace, lace curtains and nets	—	—	—
Curtains and furniture hangings ..	—	—	—
Furniture and upholstery	—	—	—
Electro-plate	—	—	—
File making	—	—	—
Brass and brass articles	—	—	—
Fur pulling	—	—	—
Cables and chains	—	—	—
Anchors and grapnels	—	—	—
Cart gear	—	—	—
Locks, latches and keys	—	—	—
Umbrellas, etc.	—	—	—
Artificial flowers	2	—	—
Nets, other than wire nets	—	—	—
Tents	—	—	—
Sacks	—	—	—
Racquet and tennis balls	—	—	—
Paper, etc., boxes, paper bags ..	—	—	—
Brush making	6	—	—
Pea picking	—	—	—
Feather sorting	—	—	—
Carding, etc., of buttons, etc. ..	—	—	—
Stuffed toys	—	—	—
Basket making	—	—	—
Chocolates and sweetmeats	—	—	—
Cosaques, Christmas crackers, Christmas stockings, etc.	—	—	—
Textile weaving	—	—	—
Total	42	—	—

SECTION V.

INSPECTION AND SUPERVISION OF FOOD.

Milk Supply.—The average number of Cows kept in the Area is only 24 as compared with 30 in 1920 and 228 in 1911.

(1) The Milk produced in the Area is quite negligible.

(2) Cowsheds are under the constant supervision of the Sanitary Inspectors and systematic visits are made quarterly by the Senior Sanitary Inspector accompanied by the Veterinary Surgeon, and any cows found to be tubercular are removed from the herd. The byres are generally well kept and the cows' udders and flanks are kept fairly clean by grooming and washing; in fact, the cowkeepers' standard of cleanliness has advanced considerably within the last few years.

The grading of Milk and its pasteurization, now largely practised, has changed the outlook of those engaged in its handling.

The milk supplied within the Area must be considered satisfactory as no illnesses have been traced to its consumption.

(3) Six of the eleven principal distributors of milk in the Area have installed fairly extensive machinery for the purpose of clarifying and cooling milk, and in some instances plant for the pasteurising by the "Flash" process. One dairyman has installed plant for pasteurising milk by the "Holding" process and is licensed in respect thereof.

(4) There are 123 milk sellers registered, the majority of whom carry on a general business. The quantity of milk distributed by the latter is small.

No revocation of registration took place during the year, and in one instance only the Council refused to register a would-be milk-seller in consequence of the unsuitability of his premises. No appeal was made from this decision. Subsequently the applicant was placed on the register upon giving an undertaking not to deal with milk in any way except in sealed bottles as delivered by the wholesaler to the premises.

The number of licences granted for the sale of milk under Special Designations classified as in the Fourth Schedule to the Milk (Special Designations) Order, 1923, was 15.

Of these, two are in respect of Bottling Grade A milk and one in respect of Licence for Pasteurizing milk; the other twelve are in respect of Licences to retail Grade A and Pasteurized milk.

The type of apparatus licensed in connection with Pasteurised milk is that known as the "Holding" process, fitted with an automatic time and temperature recording chart.

Meat Inspection.—During the year 599 visits were paid to the 15 slaughterhouses in the area and as far as possible inspection of all animals has been carried out during slaughter.

Notification of the intention to slaughter is invariably given by occupiers of slaughterhouses.

The slaughtering of animals in the early morning and at night-time caused a considerable amount of overtime to be worked by the Sanitary Inspectors, and some provision should have been made in the Meat Regulations, 1924, that all slaughtering should be done within sunrise and sunset.

There has been no request from Meat Traders in the Area for the marking of Meat, and the Council made no application to the Ministry for this purpose.

All meat and foods condemned as unfit for human consumption are taken to Low Hall Farm and placed in the Destructor.

The administration of the Meat Regulations with regard to Shops has not come up to expectations, although in some instances a considerable improvement is noted.

In the absence of definite instructions in the Regulations as to all Butchers' Shops being provided with glass fronts, difficulty is experienced to justify such provision in one instance and not in another.

There are comparatively few Meat Stalls, other than those placed immediately outside the owners' shops and little or no difficulty in this respect has been experienced in effecting improvements along the lines indicated in the Regulations.

Too much has not been attempted under the Regulations; the important thing—proper supervision of slaughtered animals—has been attained, the remaining objects will gradually be achieved.

There are no Public Slaughterhouses in the area. The following Table shows the private Slaughterhouses now in use:—

	1920.	January, 1925.	December, 1925.
Registered	13	13	13
Licensed	1	2	2

Unsound Food.—The foods condemned were partly discovered in the course of inspections, but the majority were brought to the notice of the Sanitary Inspectors, and no prosecutions have been found necessary.

There has been no case of Food-poisoning in the area and the existing powers for dealing with foods appear to be adequate.

The following articles were condemned and destroyed:—

*1 Oxhead, tongue, liver and lungs.
*1 set ox lungs, liver and spleen
*2 pigs. heads and offal.
*2 sows heads.
*2 sets ox lungs and livers.
*2 sets ox lungs and heart.
*1 pigs head and one liver.
*3 ox livers.
*2 pigs heads.
*2 ox heads.
*1 ox kidney and fat.
*5 ox heads.
*1 beef carcase, all organs and offal.
*8 ox livers.
*2 sets ox lungs and 1 set gut fat
*1 pigs pluck.
*1 pigs liver.
*1 beef carcase, all organs and offal.
20 lbs. beef and mutton pieces.
5 ox livers.
3 pigs livers.
2 legs of pork.
1 pigs pluck, spleen and intestines.
1 ox tongue.
1 set pigs lungs.
5 ox livers.
25 lbs. salt beef.
1 set sheeps lungs.
3 sheeps plucks.
1 ox liver.
3 stones of beef.
2 cases livers.
1 case frozen rabbits.
10 stones dabs.
8 stones skate.
8 stones cat fish.
5 stones plaice.
1 trunk haddocks.
1 trunk plaice.
1 trunk codling.
147 lbs. fresh water eels.
34 gallons whelks.
1 sack winkles.
21 cases oranges.
10 boxes apples.
2 barrels grapes.
4 sacks peas.
1 lb. macaroni.

*Affected with Tuberculosis.

SECTION VI.

PREVALENCE OF, AND CONTROL OVER, ACUTE INFECTIOUS DISEASES.

During the year 997 cases of Infectious Diseases were notified.

Each house invaded was visited, and enquiries were made as to the probable sources of infection.

All the Scarlet Fever and Diphtheria patients isolated at the Sanatorium were removed under the care of a Nurse, and Typhoid patients are received into the local General Hospital, where two beds are at the disposal of your Authority. The cases of Acute Pneumonia went to the Hospital or Infirmary.

Cases of Erysipelas are seldom removed to Hospital except by the Poor-Law Authorities.

In many instances persons are notified as suffering from this disease, and when visited are surprised to learn that they are suffering from an illness necessitating a visit from the Public Health Authority.

Full instructions, verbally and in writing, as to the precautions to be taken against the spreading of infection, are given to the persons in charge of home-nursed cases. This is supplemented by revisits, to ensure that the instructions given are carried out.

When necessary or desirable, Medical Officers of other districts are notified of the possibility of infection spreading through other members of the family.

Children from infected homes and contacts are not permitted to attend the Day or Sunday Schools for varying periods. The Superintendents of the latter invariably co-operate in this exclusion.

It would be an advantage if compulsory powers were in force to prevent such children going to parties and cinemas and to maintain segregation in their own homes until the incubation period was passed.

At the beginning of each school term the Head Teachers are advised to examine the children for any signs of recent illness indicative of Scarlet Fever or Diphtheria, and to exclude all suspects until seen by me.

Records are kept to show the incidence of these and other diseases at each School, and, when necessary, particular class-rooms are

visited, and children with suspicious symptoms are excluded. Disinfection of the cloak-rooms of the Elementary Schools is on rare occasions carried out at the request of the Head Teachers and is only done to allay fear as no useful purpose is served by such a procedure.

The provisions as to work in infected dwellings are enforced in accordance with the Factory and Workshop Act, 1901.

Following removal or recovery, disinfection of premises was carried out by the Council's employees, and infected clothing, bedding, etc., were treated by steam under pressure.

Outfits for early Diphtheria, Phthisis and Typhoid diagnoses are kept at the Public Health Offices, and anti-diphtheritic serum may be obtained during the day at Lloyd Park, and at all hours from the Fire Station.

The serum is supplied gratuitously to those unable to pay for its cost or administration, and during the year the local practitioners were supplied with 80 bottles of 4,000 Units each for injection of poorer patients, and 93 injections for prophylactic or curative purposes were made by me or one of the School Doctors.

Arrangements have been made for the removal of Scarlet Fever and Diphtheria patients at any hour in case of urgency and the medical practitioners have been given instructions as to the procedure to be adopted.

The Regulations issued for the better control of infectious diseases among school children have been strictly carried out. All contacts are seen by me as are the patients discharged from the Isolation Hospital, and children are not re-admitted to School until I satisfy myself that they are free from infection.

This practice has been followed for the past fourteen years and no difficulty is now experienced in procuring the attendance of contacts at the Public Health Offices.

There is little doubt that the procedure is a wise one, and the work entailed, though considerable, is worth doing, more particularly in connection with Diphtheria.

Resulting from this procedure 42 cases of Scarlet Fever and 53 of Diphtheria have been brought to light during the year and many cases notified as primary were found to be really secondary.

Scarlet Fever is less amenable to control in this way as many mild cases of this disease go undetected and are never notified.

The Schick and Dick tests have not been used, nor has artificial immunization been attempted.

The practice of gratuitous distribution of disinfectants to ratepayers is still maintained although very considerably curtailed. When I first became Medical Officer of Health the yearly outlay under this heading was between one and two hundred pounds; probably now it does not exceed ten. It should be discontinued; it costs money and is useless if not dangerous by giving a false sense of security to persons who still believe that Diphtheria, Typhoid, etc., are the results of bad smells from drains or foul sinks.

The disinfection by the Public Health Authority of rooms occupied by persons who contract Scarlet Fever or Diphtheria has very little more to recommend it.

These infections are personal, and nothing is really needed but free ventilation of the room and its thorough cleansing by the householder.

The bedding and clothing of the patient perhaps might be steam-cleansed, as it requires more courage than the ordinary official possesses to ignore entirely the practices of our grandparents and the prejudices of the public.

There is no provision for the cleansing and disinfection of verminous persons and their belongings.

The non-provision of "a cleansing station" was much felt on three occasions in dealing with old persons under Section 48, Public Health Act, 1925, who refused removal from surroundings that were extremely repugnant.

From the following Table giving the Notifications since 1890, it will be seen that the Infectious Sickness Rate for Scarlet Fever and Diphtheria has been an improving one since 1900 with the exception of Scarlet Fever in the epidemic years 1921 and 1922.

In 1925 with 130,000 people there are only 196 cases of Diphtheria compared with 516 in 1900 with a population of 91,000.

The following Table shows for London and certain large Metropolitan areas the number of cases of Scarlet Fever and Diphtheria notified in 1925 to the Ministry of Health, with the number of deaths as ascertained from the Registrar-General's returns and the case death-rate per 100 attacked:—

	Number notified.		Deaths.		Case rate per 100.	
	S.F.	Dip.	S.F.	Dip.	S.F.	Dip.
London	12,287 ..	12,583 ..	100	481 ..	.8	3.8
Croydon	343 ..	102 ..	1	9 ..	.3	8.8
Willesden	264 ..	304 ..	2	10 ..	.7	3.2
Tottenham	428 ..	248 ..	—	9 ..	—	3.6
Edmonton	112 ..	208 ..	—	26 ..	—	12.5
West Ham ..	478 ..	766 ..	5	19 ..	1.0	2.4
East Ham	219 ..	251 ..	4	11 ..	1.8	4.3
Leyton	206 ..	289 ..	—	14 ..	—	4.8
Walthamstow ..	350 ..	198 ..	1	7 ..	.3	3.5

The following Table shows the estimated population, the number of cases of Diphtheria and Membranous Croup, the attack rate since 1890, and the death-rate since 1898.

Years.	Population.	Number of Diphtheria Cases.	Rate per 1,000	Membranous Croup Cases.	Diphtheria and Croup Death-rate per 1,000 population
1890	46500	129	2.50	3	—
1891	47000	153	3.22	9	—
1892	49400	137	2.77	17	—
1893	52000	142	2.73	11	—
1894	57000	129	2.26	15	—
1895	61000	198	3.24	10	—
1896	65000	124	1.90	6	—
1897	70000	152	2.17	6	—
1898	77000	225	2.90	9	.59
1899	83000	338	4.00	7	.88
1900	91000	516	5.60	11	.86
1901	95131	322	3.40	11	.40
1902	97700	142	1.50	8	.21
1903	100400	147	1.46	5	.16
1904	103200	177	1.70	13	.28
1905	106000	254	2.40	4	.26
1906	108500	287	2.70	6	.52
1907	111500	251	2.20	6	.32
1908	114900	220	1.90	3	.19
1909	117800	182	1.50	—	.14
1910	121280	138	1.10	—	.12
1911	124597	287	2.20	—	.23
1912	128480	233	1.80	—	.17
1913	131636	319	2.40	—	.15
1914	131980	318	2.40	—	.21
1915	131718	199	1.51	—	.09
1916	139425	412	2.95	—	.14
1917	132994	382	2.87	—	.20
1918	127701	239	1.87	—	.14
1919	133008	425	3.19	—	.14
1920	132771	375	2.82	—	.14
1921	127441	380	2.98	—	.09
1922	129800	300	2.31	—	.20
1923	129700	212	1.63	—	.04
1924	130000	257	1.97	—	.03
1925	130800	196	1.5	—	.05

TABLE XIII.

Estimated Population, Number of Infectious Diseases notified, with "Infectious Sickness Rate," and the Mean for the Years under consideration.

Years.	Population.	Scarlet Fever.	Small-pox.	Diphtheria.	Croup.	Typhus Fever.	Enteric Fever.	Continued Fever.	Erysipelas.	Puerperal Fever.	Totals.	Infectious Sickness Rate per 1000 Pop.
1890	46500	129	0	160	3	1	117	3	31	0	444	9.5
1891	47000	125	0	153	9	0	59	4	44	3	397	8.4
1892	49400	399	6	137	17	0	28	0	94	3	684	13.8
1893	52000	597	8	142	11	0	60	4	134	5	961	18.5
1894	57000	247	11	129	15	0	66	0	75	3	546	9.5
1895	61000	263	1	198	10	0	95	6	85	4	664	10.8
1896	65000	315	0	124	6	0	193	2	122	5	767	11.8
1897	70000	492	0	152	6	0	88	0	78	7	823	11.7
1898	77000	293	0	225	9	0	75	0	82	3	688	8.9
1899	83000	332	0	338	7	0	118	1	112	5	913	11.0
1900	91000	347	0	516	11	0	86	1	87	8	1056	11.6
1901	95131	608	3	322	11	0	73	0	111	10	1138	11.9
1902	97700	560	146	142	8	0	89	0	131	7	1083	11.1
1903	100400	292	2	147	5	0	88	0	117	6	657	6.5
1904	103200	527	49	179	13	0	56	0	143	10	975	9.4
1905	106000	756	0	254	4	0	50	0	122	2	1188	11.0
1906	108500	809	0	287	6	0	33	1	107	10	1253	11.5
1907	111500	815	0	251	6	0	21	0	105	3	1201	10.7
1908	114900	635	0	220	3	0	37	0	111	8	1014	8.8
1909	117800	506	0	183	0	0	13	0	112	0	814	6.9
1910	121280	232	0	138	0	0	27	0	99	3	499	4.1
1911	124597	387	0	289	0	0	23	0	114	4	815	6.5
1912	128480	287	0	233	0	0	13	1	79	10	623	4.8
1913	131636	450	0	247	0	0	12	0	80	10	799	6.0
1914	131980	399	0	318	0	0	16	0	97	2	833	6.3
1915	131718	320	0	199	0	0	11	0	72	3	605	4.5
1916	128146	344	0	412	0	0	5	0	71	4	836	6.5
1917	119307	187	0	382	0	0	13	0	39	2	623	5.2
1918	113973	124	0	239	0	0	4	0	38	2	407	3.5
1919	131718	319	0	425	0	0	4	0	74	6	828	6.4
1920	132771	670	0	375	0	0	3	0	68	7	1123	8.9
1921	127441	983	0	380	0	0	3	0	58	5	1429	11.2
1922	129800	578	0	300	0	0	1	0	36	4	919	7.1
1923	129700	351	0	212	0	0	5	0	48	6	622	4.8
1924	130000	185	0	257	0	0	6	0	53	3	504	3.9
1925	130800	358	0	196	0	0	2	0	50	4	610	4.6

TABLE XIV.

Cases of Infectious Disease notified during the Year 1925.

The following table shows the numbers and the Infectious Diseases notified for the whole District and for the Wards, and the number removed to Hospital:—

Notifiable Disease.	Cases Notified in Whole District.								Total Cases Notified in each Locality.						Total Cases Removed to Hospital.
	All Ages.	At Ages—Years.							St. James Street.	High Street.	Hoe Street.	Wood Street.	Hale End.	Higham Hill	
		Under 1	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 and upwards.							
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cholera	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Plague	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria (including Membranous Croup)	196	3	62	106	14	10	1	—	82	16	20	32	14	32	170
Erysipelas	50	—	2	4	5	13	25	1	13	11	2	6	6	12	19
Scarlet Fever	358	2	93	230	28	5	—	—	81	79	51	40	30	77	289
Typhus Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Enteric Fever	2	—	—	—	1	—	1	—	2	—	—	—	—	—	2
Relapsing Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Continued Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Fever	4	—	—	—	1	3	—	—	—	1	—	1	1	1	4
Cerebro-spinal Meningitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Poliomyelitis	1	—	—	1	—	—	—	—	—	—	—	—	—	1	1
Ophthalmia Neonatorum	14	14	—	—	—	—	—	—	2	2	3	1	1	5	—
Pulmonary Tuberculosis	209	1	2	25	51	95	31	4	54	34	31	26	25	39	—
Other forms of Tuberculosis	58	—	13	23	11	10	1	—	14	6	7	7	9	15	—
Encephalitis Lethargica	4	—	1	—	—	1	1	1	1	2	—	—	—	1	3
Malaria (Imported)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery ,,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia	101	1	9	19	13	24	30	5	35	20	11	6	7	22	35
Totals	997	21	182	408	124	161	90	11	284	171	125	119	93	205	523

TABLE XV.

The following Table shows the drainage and other defects in houses from which cases of Infectious Diseases were notified, and will help to show their relationship.

Total Number Notified.	Disease.	No of houses invaded.	No. with Defects.	No. showing Defects as to		Dirty Condition of House.	Dirty or uncovered Drinking Water Cisterns.	Defective Roofs, etc.	Defective Paving, etc.	Dampness.	Percentage showing Defects in—		Dirty Condition of House.	Dirty or uncovered Drinking Water Cisterns.	Defective Roofs, etc.	Defective Paving, etc.	Dampness.
				Drains.	Traps, Fittings, etc.						Drains.	Sanitary Fittings, etc.					
358	Scarlet Fever ..	304	167	29	16	87	19	21	14	11	9.5	5.2	26.6	6.2	6.9	4.6	3.6
196	Diphtheria ..	156	112	24	9	57	6	11	8	5	15.3	5.7	36.5	3.8	7.0	5.1	3.2
2	Enteric Fever ..	2	1	—	—	1	—	—	—	—	—	—	—	—	—	—	—
50	Erysipelas ..	48	18	—	2	8	—	—	5	2	—	25.0	16.6	—	—	10.5	4.1
4	Puerperal Fever	4	1	—	—	1	—	—	—	—	—	—	—	—	—	—	—
610	Totals	514	299	53	27	154	25	32	27	18	10.3	5.2	29.9	4.8	6.2	5.2	3.5

Bacteriological Work.—The work carried out under this heading during the year was less than in 1924. This is due to the arrangements made by the County Council of Essex under which practitioners in the Area can have all their pathological specimens examined gratuitously at the County Laboratory. Our work, therefore, was limited to the examination of Diphtheria swabs.

The following shows the bacteriological work carried out:—

	At the Public Health Offices.	County Laboratory.
Diphtheria Swabs ..	2,008	127
Sputa specimens ..	—	1,014
Typhoid ,, ..	—	40
Ringworm specimens ..	—	2
Miscellaneous	—	28

The number of contacts swabbed was 193 and 28 of these were found to be positive.

The number of School children swabbed was 838, and the examinations made for the local doctors were 625.

Isolation Hospital.—This institution is situated in the Chingford Parish, and is about three miles from the centre of our District.

It provides for 85 beds on the 2,000 cubic feet basis, and is used mainly for the isolation and treatment of patients suffering from Scarlet Fever or Diphtheria.

Upon occasions, bad cases of Ophthalmia Neonatorum are removed—the mother accompanying the baby—and a few cases of Chicken Pox and Measles, for whom Hospital treatment could not be obtained otherwise, have been treated in the cubicle block.

The Staff consists of a Resident Medical Officer, Matron, twenty-six Nurses, a Cook, Needlewoman, Storekeeper, in addition to seventeen Maids engaged in the administrative and hospital blocks, and 4 Maids in the Laundry.

The Hospital is self-contained, with producer gas and electrical plant for heating and lighting.

There are fifteen acres of land attached to the Hospital, five acres of which are enclosed by a 6 ft. close-boarded fence.

About eight acres are under cultivation for the production of potatoes and vegetables used in the Hospital. A gardener and assistant are constantly employed, and in season additional hands are taken on.

In January, 1914, a pavilion of 14 beds for the treatment of Phthisical patients was opened. This is built on land adjoining, but separated from the enclosed grounds of the Hospital.

The Administrative Block is not sufficiently large for the Staff necessary when the Hospital is running at its maximum capacity, and the block known as the "Observation Ward" of four beds has been converted into eight cubicles and provides sleeping accommodation for eight members of the Staff. This much needed extra accommodation has been most helpful, although, by no means, can it be a substitute for the extensions proposed in 1914.

That further hospital accommodation will be demanded by the public in the near future is probable, considering the large number of houses now in course of erection and the changed view point of our people in the presence of infectious illness in the home.

The cost of building at present seems prohibitive and since the upkeep of the existing Hospital is now £13,000 yearly, compared with £7,500 in 1914, it will be a matter of considerable difficulty to decide on what is the best course to take—to extend the existing buildings and provide for all cases, or give Hospital treatment to those only who are unable to be nursed in their own homes.

The value of Isolation Hospitals in the reduction of Scarlet Fever and Diphtheria incidence has been challenged and the universal opinion is that they have failed to do what was expected of them.

Within the next three years the total capital expended will be paid off and relief to the extent of over £2,000 yearly will be experienced.

The County Council of Essex make a grant of £5 per bed yearly towards the upkeep of the Hospital, but the sum received is quite negligible compared with total expenses.

DISEASES ISOLATED.

Enteric Fever.—By an agreement entered into in March, 1912, with the Walthamstow General Hospital, the Council have two beds for the isolation and treatment of this disease.

Two cases occurred during the year, and both were in Hospitals for some time prior to notification.

Diphtheria.—Twenty-eight beds nominally—at times extended to forty—are provided in two pavilions for this disease.

In addition there are twelve beds in the Cubicle Block which, at times, are used for this purpose.

At no period of the year were all the beds occupied.

The greatest monthly number of notifications (25) was in September and the least (7) in June—the average throughout the year being 16.

In September 13 of the cases were discovered by me or members of the Medical Staff, and were mainly School children.

I have previously ventured to state that our children in attendance at School are less liable to contract this disease than at other times, and many years experience shows that the careful supervision of the children by the Teachers is a very important factor in our control of the disease.

By way of the School Clinics were discovered 57 suffering with Clinical Diphtheria and 53 children with the disease in a non-clinical form.

Scarlet Fever.—In normal times 38 beds—14 for acute and 24 for convalescent cases—are provided for this disease.

Although a smaller number than usual of the cases admitted were found to have Diphtheria bacilli in the Throat and Nose, or both, their stay in Hospital was in consequence prolonged, and the accommodation in the cubicles very materially helped in dealing successfully with these cases.

Throughout the year the number failing with this disease was fairly uniform, the minimum number in any month was 14 in February and the maximum 41 in November. These were followed by 31 in March and 33 in December, but at no period of the year was there any difficulty in isolating and treating the patients in Hospital.

Although the type of case was generally mild, and the number isolated small, the "return cases" were numerous in spite of the precautions taken and their isolation well over the accepted normal safe period.

Length of stay in Hospital nor completion of desquamation has any influence in the prevention of "Return Cases," but the association of these with patients who suffered from a mixed infection was marked.

The following particulars show the month of discharge of infecting cases, the duration of illness, the interval between discharge and

"Return" case and the number of susceptible children in the house:—

Date of Discharge.	Duration of illness.	Interval from Discharge to "Return" case.	No. of susceptible Children in house under 15 years.	Remarks.
15th Mar., 1925	6 weeks	9 days	4	—
17th Mar., 1925	8 weeks	18 days	2	—
3rd Sept., 1925	7 weeks	14 days	3	—
2nd Dec., 1925	8 weeks	14 days	4	—
7th Dec., 1925	8 weeks	9-15-39 days	2	—
29th Nov., 1925	8 weeks	16 days	2	
*3rd Dec., 1925	8 weeks	18 days	2	*The infecting case was discharged from M.A.B. 18 days later was found to have nasal diphtheria.
9th Dec., 1925	7 weeks	20 days	3	

The Resident Medical Officer has furnished me with the following report:—

SANATORIUM REPORT, 1925.

ADMISSIONS, DISCHARGES AND DEATHS.

	Scarlet Fever.	Diphtheria.	Whooping Cough.	Tuberculosis.	Other Diseases.	Total.
Remaining on Dec. 31, 1924	21	56	11	13	2	103
Admitted during 1925 ..	293	173	5	36	9	516
Total	314	229	16	49	11	619
Discharged during 1925 ..	277	209	16	34	10	546
Died during 1925	1	5	—	1	—	7
Remaining on Dec. 31, 1925	36	15	—	14	1	66
Total	314	229	16	49	11	619

SEX AND AGES OF PATIENTS ADMITTED.

Disease.	Under 5 years.		From 5 to 10 years.		From 10 to 15 years.		15 years and upwards		Total of		Total.
	M	F	M	F	M	F	M	F	M	F	
Diphtheria	38	21	25	31	15	20	9	14	87	86	173
Scarlet Fever ..	39	33	64	72	20	36	11	18	134	159	293
Whooping Cough ..	2	3	—	—	—	—	—	—	2	3	5
Chicken Pox	1	—	—	—	—	—	—	—	1	—	1
Scarlet Fever and Measles	—	—	1	2	—	—	—	—	1	2	3
Scarlet Fever and Whooping Cough	—	1	—	—	—	—	—	—	—	1	1
Scarlet Fever and Chicken Pox ..	—	—	—	1	—	—	—	—	—	1	1
Diphtheria & Measles	—	—	—	1	—	—	—	—	—	1	1
Diphtheria & Whooping Cough ..	—	1	—	—	—	—	—	—	—	1	1
Acute Rheumatism ..	—	—	—	—	—	—	1	—	1	—	1
Tuberculosis	—	—	—	—	—	—	—	36	—	36	36
Totals	80	59	90	107	35	56	21	68	226	290	516
	139		197		91		89		516		

SEX AND AGE AT DEATH.

Disease.	Under 5 years.		From 5 to 10 years.		From 10 to 15 years.		15 years & upwards.		Total.
	M	F	M	F	M	F	M	F	
Diphtheria	3	1	—	1	—	—	—	—	5
Scarlet Fever ..	1	—	—	—	—	—	—	—	1
Tuberculosis	—	—	—	—	—	—	—	1	1
Totals	4	1	—	1	—	—	—	1	7

DAILY AVERAGE.

The average number of patients in Hospital during each month was as follows:—

January	69	July	38
February	58	August	33
March	42	September ..	46
April	48	October	49
May	47	November	57
June	41	December	50

Scarlet Fever.—One hundred and seventy-three cases were admitted during the year compared with 151 in 1924, 277 in 1923, and 444 in 1922.

MONTHLY ADMISSION OF SCARLET FEVER CASES.

	Under 5 years.		From 5 to 10 years.		From 10 to 15 years.		15 years & upwards.		Total.
	M	F	M	F	M	F	M	F	
January	4	2	8	2	3	3	2	2	26
February	—	—	5	4	1	2	1	—	13
March	2	4	4	4	3	3	1	1	22
April	1	4	5	7	1	5	1	3	27
May	4	2	5	8	2	4	1	—	26
June	3	2	5	1	3	4	—	2	20
July	4	—	5	4	1	1	—	2	17
August	4	3	2	7	—	2	—	—	18
September	2	1	4	8	3	2	—	2	22
October	8	3	5	12	—	2	1	3	34
November	7	8	10	9	2	7	1	1	45
December	—	4	6	6	1	1	3	2	23
Totals	39	33	64	72	20	36	11	18	293

In addition to the cases of Scarlet Fever complicated by Chicken Pox, Measles and Whooping Cough included in the group "Other Diseases," six cases proved to be incubating Chicken Pox and three cases developed Measles shortly after admission. Seven cases proved on bacteriological examination to be infected with Klebs Loeffler Bacilli though showing no clinical signs of Diphtheria.

One death occurred as a result of Scarlet Fever, giving a case Mortality of 0.34 per cent.

The chief complications were as follows:—Otorrhoea, 7; Simple Arthritis, 4; Suppurative Adenitis, 2; Endocarditis, 2.

Diphtheria.—One hundred and seventy-three cases of Diphtheria were admitted during the year, compared with 232 in 1924, 170 in 1923, and 222 in 1922.

MONTHLY ADMISSION OF DIPHTHERIA CASES.

	Under 5 years.		From 5 to 10 years.		From 10 to 15 years.		15 years & upwards.		Total.
	M	F	M	F	M	F	M	F	
January	2	1	3	2	3	1	—	1	13
February	5	2	5	2	2	1	1	1	19
March	2	1	3	2	—	2	1	2	13
April	4	2	1	2	4	1	—	—	14
May	3	2	2	4	1	3	1	1	17
June	2	2	—	1	1	2	—	2	10
July	2	1	3	3	1	4	2	2	18
August	3	2	1	2	1	2	—	1	12
September	6	4	4	4	1	2	1	1	23
October	2	3	—	5	1	—	—	—	11
November	5	—	1	3	—	1	1	1	12
December	2	1	2	1	—	1	2	2	11
Totals	38	21	25	31	15	20	9	14	173

In addition to those cases of Diphtheria complicated by Measles and Whooping Cough already shown, one case was found to be suffering from Diphtheria and Mumps, and one case had Measles as a concurrent infection on admission.

Two cases proved to be incubating Chicken Pox and three cases developed Rubella, Mumps and Whooping Cough respectively within a week of admission.

Of the 173 cases treated, five proved fatal, equal to case Mortality of 2.89 per cent.

The chief complications were:—Cardiac Paralysis, 7; Strabismus, 3; Palatal Paralysis, 7; Albuminuria, 4.

Staff.—Two Nurses contracted Scarlet Fever and one developed Tonsilitis.

Swabs.—One thousand, five hundred and eighty-nine swabs were taken and examined during the year.

SECTION VII.

MATERNITY AND CHILD WELFARE.

Following the Notification of Births (Extension) Act, 1915, a modest Scheme for Maternity and Child Welfare was brought into operation and in 1919 a more ambitious one embracing all the activities made possible by the passing of the Maternity and Child Welfare Act, 1918, outlined in Circular M. & C.W. 4, was formulated.

Without the provision of a lying-in Hospital or day Nurseries, a considerable amount of work is carried out under all the other headings embraced by the Regulations issued for paying of Grants.

There are now in operation two Centres for Child Welfare work and one for Ante-Natal.

Five whole time fully qualified nurses are employed and two doctors give at least seventeen hours weekly to consultations and treatment. Home Helps are paid for by the Council and Milk supplied to necessitous Mothers and Children.

The Council's Centre—situated in a turning off the main Street in the High Street Ward is convenient and accessible for the majority of those attending.

The Premises are not very suitable for the work carried out. A large Church Hall of corrugated iron, indifferently constructed, very draughty and used for all kinds of social services does not lend itself to conversion on three half-days weekly for the work carried out by the Council, even were the accommodation ample.

The room used for consultation is a mere lobby and the whole place, as to cleanliness and the makeshift arrangements for dressing, undressing and weighing babies, creates a bad impression on the mothers, and complaints from the Voluntary Workers are constant.

It is to be hoped that at the very earliest date, the Ministry will give its sanction to the erection and equipment of a place which will be suitable in all respects for the work already in operation and that adumbrated in previous reports.

Ante-Natal Clinic.—During the year the number of pregnant women seeking advice was 242; these making 360 attendances.

The number of births coming to the knowledge of the Medical Officer of Health, under the Notification of Births Act, 1915, was 914 by Midwives, 880 by Doctors and 49 by Parents, and the Still-births were—12 notified by Midwives and 21 by Doctors.

The total births within the Area were 2,131, so that the requirements of the Act were primarily 86 per cent. fulfilled.

In 1924, 47 still-births were notified, so presumably the Ante-Natal Clinic may take some credit for a reduction in this mortality.

Although only 11 per cent. of our pregnant mothers sought advice, 43 per cent. of the Midwives' cases did.

Home Helps were provided for 7 of the 10 applications made. This provision is well known to our Mothers and the few applications is an indication that the economic conditions generally of our poorer people are not bad.

Infant Consultations.—The following are the quarterly attendances of children throughout the year:—

	New Cases.	Old Cases.
First quarter	161	2,278
Second quarter	230	2,662
Third quarter	202	2,538
Fourth quarter	201	2,637
Totals	794	10,115

Of these, twenty were operated on for the removal of Tonsils and Adenoids, three were sent to Brookscroft with excellent results, four were referred to the Orthopaedic Surgeon for Surgical treatment, and Dental treatment was given to 108 children in addition to 36 mothers.

The Home visits made by the Health Visitors numbered 1,834 for children born in 1924, 1,104 born prior to 1924 and 2,818 to those born during the year.

Six hundred and sixty-three families were assisted with milk and 35,556 pints were distributed as follows:—

Free.	At ½d. per pt.	At 1d. per pt.	At 1½d. per pt.	At 2d. per pt.	At ½-cost
98	2,856	4,816	416	—	140
182	1,792	1,952	1,288	28	56
84	2,940	4,732	252	—	168
140	3,948	3,360	28	—	280
504	11,536	20,860	1,984	28	644

The following tabular statement of the out-door work of the Health Visitors is interesting.

How seriously handicapped many of our mothers are can be seen under the heading "Housing Accommodation."

The parents of a third of the children born during the year lived in one room and another third in two rooms.

In this respect the mothers of the St. James' Street Ward suffered the greater handicap and the contrast made between this and Hoe Street Wards on page 31 must be noted.

TABLE XVI.

Ward.	How Fed.			Sleeping Accommodation.		Condition of Baby.			House Accommodation.					
	Breast.	Breast and Hand.	Hand.	With Mother.	Cot or Cradle.	Good.	Fair.	Bad.	Whole House.	Flat.	Half-House.	1 Room.	2 Rooms.	3 Rooms.
St. James Street ..	306	18	36	234	126	348	10	2	91	38	86	79	46	20
High Street	220	8	23	139	112	243	5	3	42	68	51	39	38	13
Hoe Street	250	8	27	118	167	272	10	3	78	29	71	33	59	15
Wood Street	248	13	39	116	184	276	21	3	65	14	106	61	54	—
Hale End..	216	10	34	83	177	242	17	1	104	11	73	27	42	3
Higham Hill	348	11	61	188	232	411	5	4	140	109	32	65	68	6

"**Brookscroft" Voluntary Centre.**—The Walthamstow Child Welfare Society was founded by Dr. Elliott in 1914 and has since worked in co-operation and on the most friendly and helpful terms with the Public Health Authority.

The original intentions of the Society—"Infant Consultations, a school for mothers and home visiting" —have long since been exceeded and the activities of the Society include "Observation Wards" containing 6 beds for the treatment of children suffering from nutritional and allied disorders on the usual lines, in addition to a special clinic for treatment by Artificial Sunlight. Some excellent results have followed the latter under Dr. Elliott's personal supervision. The paid staff employed for this work consists of a Matron, Sister and three Probationers.

Among the 82 Voluntary Workers at the Centre, 32 hold the Certificate of the Society qualifying them to take part in Clinical work, and 11 have been working with the Society since its initiation.

All the workers are certified by Dr. Elliott as having attained a high standard of efficiency, having been trained under his personal supervision.

The following is extracted from the last Annual Report of the Society:—

"**The Value of the Observation Wards.**—I cannot too often repeat that these are for educational purposes. The mothers are asked to attend regularly to see what is done for their babies. There is no such provision at Hospitals. Infant Consultations and Home Visiting are insufficient to overcome sheer incapability—one of the chief reasons for the admission and long stay of many of the babies in the Wards. The successful results obtained in the Wards are in no small measure due to the skilled attention and untiring devotion of our Matron, Nurse Miller.

"**The Actino-Therapeutic Department.**—The number of out-patient cases receiving Sunlight Treatment during the past year was 66, and the number of baths given 898. The 27 babies in the Wards had 625; these babies are treated three times a week, while out-patients are done twice. In addition to the three Carbon-Arc and six Murray-Levick lamps installed eighteen months ago, the Department has now a Hewittic-Levick-Ulviarc lamp, which is the latest, and by far the best type of mercury arc lamp. Ventilating fans and a large exit ventilator have also been added. The possession of the mercury arc lamp makes it possible to widen the range of treatment, and has led to considerable speeding up of the work.

"Among the cases treated were rickets, various forms of malnutrition, enlarged glands (tuberculous and other), tabes mesenterica

(so called 'consumptive bowels'), anaemia, bronchitis, functional, mental and nervous disorders, mental deficiency, rheumatism, skin diseases, coelic diseases and convalescence from various illnesses."

The general work of the Society summarised was as follows:—

Attendance on Consultation Days	6,942
New Cases, (in addition)	572
Average Weekly Attendance on Consultation days.. (There was no consultation day in Christmas week.)	144
Attendance of old cases between consultation days..	1,686
Attendance at Actino-Therapeutic Department ..	898
Cases seeking advice from Matron between days at Centre	221
Total attendances at Centre	10,305
Homes Visited	2,487
Children seen	3,102

Puerperal Fever.—Four cases were notified and one death was recorded under this heading. The woman was attended by a doctor and the labour was apparently normal.

Ophthalmia Neonatorum.—The cases notified were of a very mild type and the details are as follows:—

Cases.						
Notified.	Treated.		Vision un-impaired.	Vision impaired.	Total Blindness.	Deaths.
	At Home.	In Hospital.				
14	13	1	14	—	—	

Measles and Whooping Cough.—There were six deaths registered from Measles and 26 from Whooping Cough. In 1924, there were 11 and 17; in 1923, 1 and 3; in 1922, 40 and 39; in 1921, 3 and 8; in 1920, 5 and 10, the previous year of greatest mortality being 1915, when 54 deaths occurred from Measles and 31 from Whooping Cough, following a series of years of small mortality.

As neither disease is notifiable, the incidence is known only through the notifications received from the Head Teachers in accordance with the "Regulations as to Infectious Diseases in Schools." In this way the following were notified during the year:—

Measles.. .. 1,177 Whooping Cough 421

All primary cases were visited by the School Nurses who gave appropriate advice and left printed instructions as to isolation, general treatment and nursing.

For this purpose 1,270 visits were made—861 to children with Measles and 409 with Whooping Cough.

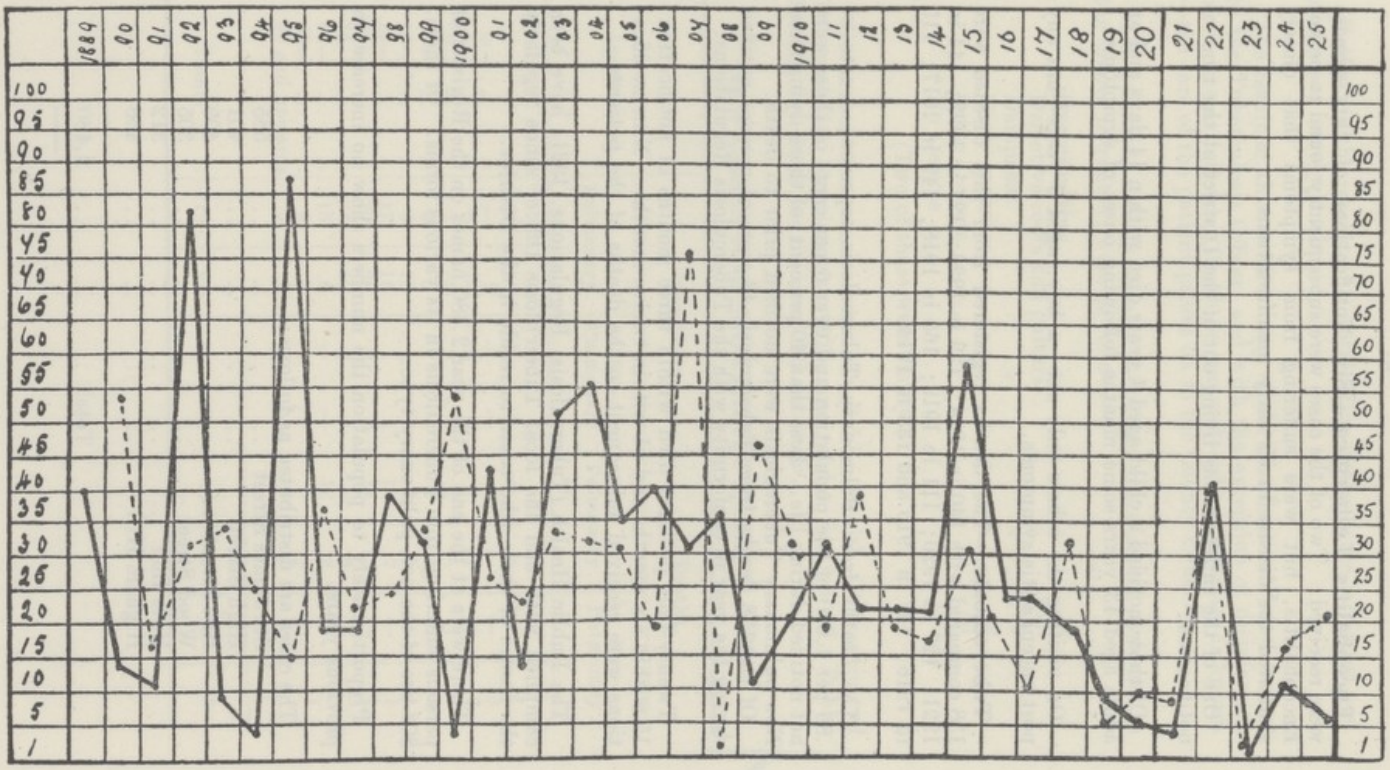
Whooping Cough was epidemic in January, when 248 cases arose, followed by 69 and 43 in February and March, disappearing in August, rising again to 18 in November.

The deaths were mainly in the first months of the year and in children under 5 years of age. Ten occurred in children under one year, nine in those under two years and six between two and five years of age.

The School Nurses have done what was possible in the circumstances by impressing on the Mothers the importance of safeguarding their young children from exposure to either disease, but the belief that Measles and Whooping Cough are trivial ailments dies hard and many Mothers still act on the erroneous views held—once either disease is introduced in the house, it is just as well that all the susceptible children should suffer and get it over. No conduct can be more stupid, for the incidence and fatality of these diseases vanish with age and children under five years should never willingly be exposed to these infections.

The following chart gives the deaths from Measles and Whooping Cough since my appointment:—

Deaths from Measles and Whooping Cough, 1889—1925.



Straight lines indicate Measles. Dotted lines indicate Whooping Cough.

Encephalitis Lethargica.—Six Notifications of this disease were received. Two of the cases were subsequently found to be not Encephalitis, but were suffering from symptoms that closely similated the disease in its early manifestations.

One of the sufferers was living out of the District at the time of notification.

Of those notified a child aged 4 years died within 14 days and an adult aged 43 years some months following onset of symptoms.

On visiting the others only one—a boy, aged 9 years—has any post encephalitis symptoms.

Tuberculosis.—The deaths registered from this disease were 138 compared with 140 in 1924; 129 in 1923; 127 in 1922; 144 in 1921; 127 in 1920; 111 in 1919; 165 in 1918; 149 in 1917; 115 in 1916; 147 in 1915 and 133 in 1914.

The deaths from Pulmonary Tuberculosis represent a rate of .85 per 1,000 of the population and over 6 per cent. of those were not notified during life. Less than 40 per cent. of those dying from Non-pulmonary Tuberculosis were notified prior to death.

Of the 138 deaths from Tuberculosis 46 were of persons notified during the year in conformity with the Tuberculosis Regulations.

Twenty-four patients died within three months of notification; 15 within six months and 51 within twelve months. Nine notifications were received subsequent to the deaths of the patients.

The Public Health (Tuberculosis) Regulations, 1921, have been complied with and the local Tuberculosis Officer sends regularly the names of those who cease to reside in the District.

There were at the end of the year 2,480 names on the Register of persons suffering from Tuberculosis in its various forms. Of these, 806 are of the non-pulmonary type.

Proportionately to population the numbers show no increase on previous years.

The cases are distributed as follows:—

St. James Street	585
High Street	401
Hoe Street	409
Wood Street	305
Hale End	312
Higham Hill	468
Total	2,480

Following the receipt of a notification every house is visited and a sanitary survey made.

The result of this, with a copy of the Notification Form, is sent to the Tuberculosis Officer, and with the exception of disinfection of the rooms following death or removal—when the latter is known —the care of the patient passes on to the County Council.

The principal defects usually favouring the disease, as found in the homes inspected, were as follows:—

Overcrowding	4
Defective roofs and gutters	20
Dampness	19
Dirty premises	49
Other Defects	41
No Defects	155

(Two of these were empty.)

No action was taken under the Public Health (Prevention of Tuberculosis) Regulations, 1925, nor under Section 62, Public Health Act, 1925, as the need did not arise.

NEW CASES AND MORTALITY DURING 1925.

Age Periods.	New Cases.				Deaths.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M	F	M	F	M	F	M	F
0—	—	1	—	—	—	—	—	3
1—	2	—	9	4	2	1	8	2
5—	7	5	8	4	2	—	1	1
10—	8	5	7	4	1	3	2	3
15—	6	10	4	5	5	3	—	1
20—	17	18	1	1	10	7	—	1
25—	30	22	2	5	14	15	—	1
35—	24	19	2	1	9	4	1	—
45—	15	6	—	—	12	8	1	—
55—	6	4	1	—	8	4	—	1
65 and upwards	3	1	—	—	2	2	—	—
Totals ..	118	91	34	24	65	47	13	13

SCHOOL MEDICAL SERVICE.

TO THE CHAIRMAN AND MEMBERS
of the
Walthamstow Education Committee.

Ladies and Gentlemen,

I beg to submit the Annual Report on the work of the School Medical Service as carried out in your District during 1925.

With the exception of the Statistical Tables, prepared under my supervision, and the section dealing with Defective Vision by Dr. Sheppard, the Report has been prepared by Dr. Broderick.

The work of Medical Inspection and that of the Clinics was of the usual routine character, but it will be noticed from a perusal of the Statistical Tables that the numbers medically inspected at the Schools were considerably greater than in 1924, and the re-inspections somewhat less.

The proportion of defects found to the total examined varied little from that of previous years, while the numbers dealt with for minor ailments at the Clinics were considerably greater.

It is difficult to estimate how greatly for the better the after-lives of our children must be influenced by this work; undoubtedly, it is of great value.

In previous Reports, I drew your attention to the lack of Specialist treatment for children suffering from Otorrhœal conditions, and I trust the Committee will, at the earliest moment, make the provision suggested by me in 1923 and 1924.

In other respects, I think the School Medical Service has been very efficient.

Towards the end of the year, provision was made for the special teaching of stammering children.

I have visited the classes, and your Director of Education concurs with me that the work has been a success.

As in previous years, effective co-operation and cordial relations have existed between Teachers, Attendance Officers and Medical Staff.

Mr. Longman has most willingly co-operated in every measure taken for the betterment of the physical condition of the children under your care.

I beg to remain,

Ladies and Gentlemen,

Your obedient Servant,

J. J. CLARKE,

FINANCIAL STATEMENT.

	£	s.	d.	£	s.	d.
	1924			1925		
Rateable value of District	520,754	0	0	529,956	0	0
The average cost of education per child: —						
(1) In the ordinary school	12	1	0	12	17	0¼
(2) Mentally Defective Centre ..	38	6	0¾	37	0	6½
(3) Deaf and Dumb Centre.. ..	28	10	1¼	30	15	0¼
(4) Myope Centre	24	9	6½	30	2	10½
(5) Physically Defective Centre ..	—			63	13	2¾
The education rate for—						
The half year ending March 31st ..	0	1	9	0	2	0¾
,, ,, ,, Sept. 30th ..	0	2	1¼	0	2	1¾
,, ,, ,, March 31st, 1926	0	2	1¼	—		
Total cost of medical inspection for year ..	4,624	3	0½	4,867	9	8
Grant towards the above for year ending March, from Board of Education ..	2,170	12	9	2,209	16	7
Other receipts: —						
Medical treatment	24	3	9	23	5	11
Spectacles	46	14	0	50	0	0
Amount spent on repairs, improvements, etc., to schools for the year	3,954	19	0	5,938	12	1

NUMBER OF SCHOOLS AND ACCOMMODATION.

	Boys	Girls	Infants	Mixed	Seating Accommodation.			
					Boys	Girls	Infants	Mixed
Provided	17	17	16	7	6862	6666	6006	2622
Non-provided	1	2	2	1	244	472	437	314
Special Schools—								
Mentally Defective	—	—	—	1	—	—	—	130
Deaf and Dumb	—	—	—	1	—	—	—	20
Blind and Myope Centre	—	—	—	1	—	—	—	65
Physically Defective Centre	—	—	—	1	—	—	—	75
Total	18	19	18	12	7106	7138	6443	3226

	1925	1924	1923
Number of Children on Register, December 31st	20,962	21,087	21,325
Average Attendance	18,348	18,541.9	19,026.2
Percentage Attendance	87	87.9	90.6
Population (Registrar General's Estimate)	130,800	130,000	130,000
Percentage of School Children to population	16	16.2	16.4

REPORT OF THE WORK OF THE SCHOOL MEDICAL SERVICE.

Arranged according to the Suggestions made by the Board of Education, November. 1925.

1. STAFF.

The whole-time Medical Staff consists of the Medical Officer of Health (who is also School Medical Officer and in this capacity supervises the work of the School Medical Service), three Assistant School Medical Officers, one of whom is engaged in Ophthalmic and also Child Welfare work for the Council, a part-time Ophthalmic Surgeon, a part-time Orthopædic Surgeon, four local Practitioners who undertake Nose and Throat work, a whole-time Dental Surgeon, five School Nurses and a Dentist's Assistant.

2. CO-ORDINATION.

(*a*) As the work of the Ante-Natal Clinic and Child Welfare Centre is undertaken by one of the Assistant School Medical Officers—under the supervision of the Medical Officer of Health—it follows that there is close co-ordination between this branch of the Health Service and the School Medical Service.

(*b*) There are no Nursery Schools in the Area.

(*c*) The care of debilitated children under school age is undertaken by the Welfare Centres in the Town. Dental and Orthopædic cases are referred to the special clinics, swabs are examined at the Municipal Laboratory, and Virol, Parrish's Food, etc., are supplied to the necessitous cases at reduced cost. Massage is given by a voluntary Masseuse.

3. THE SCHOOL MEDICAL SERVICE IN RELATION TO PUBLIC ELEMENTARY SCHOOLS.

School Hygiene.—The cleanliness of the schools is well maintained, the surroundings being quite good, with one or two exceptions where the buildings are quite close to the main roads, making for noise and dust.

The playgrounds are tar paved and have play sheds. There are in all cases receptacles for refuse.

All the schools are well ventilated and lighted. In the older schools the warming is by means of open fires, the newer schools having Central Heating on the low pressure system. The heating

of several of the older schools has been improved by installing short circulations of hot-water pipes and radiators supplied by a boiler fixed at the back of the fire. Now and again it is found difficult to keep the classrooms up to a satisfactory temperature owing to temporary failures in the working of the apparatus.

Dual desks are provided; blackboards are adjusted so as to receive the available maximum of light.

In many cases the walls of the classrooms are tastefully decorated with instructive prints and pictures hung at a suitable height.

In the more recently built schools the sanitary conveniences are on the separate pan system and are flushed by hand or automatically. The trough system with automatic flushing is in use in some of the older schools.

Two sanitary surveys were made during the year, the minor defects found being reported to the Council's Architect.

An adequate supply of water is laid on to the schools. The cloakrooms, though well lighted and ventilated, are not, in many cases, warmed.

The amount spent on repairs, improvements, etc., to the schools for the year was £5,938 12s. 1d.

4. MEDICAL INSPECTION.

Descriptions of arrangements made and methods adopted for the Medical Inspection of the Children.

The sessions are of three hours in the morning and two in the afternoon, an average of nine children being seen per hour. The parents are encouraged to attend these inspections and willingly do so.

When defects exist, After-Care Cards are made out for the purpose of following up by the Doctors and School Nurses. Reference to Table 1 will show the numbers of children inspected during the year.

The Board's schedule of Medical Inspection has been carried out fully.

Arising out of medical inspection during the past year, 101 children were excluded under Article 53 (*b*) for varying periods for the following causes:—

Desquamation	1	Mumps	5
Sore Throat	30	Septic Toe	1
Rheumatism	2	Whooping Cough ..	2
Bronchitis	13	Measles	2
Bronchial Catarrh ..	8	Earache	1
Impetigo	4	Chicken Pox	4
Cold	5	Tonsilitis	1
Ringworm	2	Boils	1
Otorrhoea	4	Glands	2
Heart	1	Sickness	1
Influenza	3	Diarrhoea	1
Puffy Eyes	1	Rash	1
Pyrixia	1	Scabies	1
German Measles ..	1	Various	2

5. REVIEW OF THE FACTS DISCLOSED BY MEDICAL INSPECTION.

Heights and Weights of children inspected.

Boys. A.

Age.	Average Height (inches).	Average Weight. (pounds).	Anthropometric Height.	Standard Weight.
5—6 yrs. ..	41.75	40.0	40.44	37.74
8—9 yrs ..	45.5	49.25	46.94	49.95
12—13 yrs ..	55.5	73.0	55 48	73.86
	B			
5—6 yrs ..	40.5	39.5	40.44	37.74
8—9 yrs ..	47.75	54.0	46.94	49.95
12—13 yrs ..	55.0	73.25	55.48	73.86

Girls. A.

5—6 yrs. ..	41.75	37.75	40.68	36.68
8—9 yrs. ..	49.0	53.0	47.39	52.05
12—13 yrs. ..	55.75	71.75	54.88	72.66
	B.			
5—6 yrs. ..	41.25	38.5	40.68	36.68
8—9 yrs. ..	47.75	47.5	47.39	52.05
12—13 yrs. ..	55.75	74.0	54.88	72.66

A—represents a school serving a clean area.

B.—One whose children are largely drawn from poor homes in mean streets.

6. CLOTHING, FOOTGEAR and NUTRITION.

Entrants.

	Clothing.		Footgear.		Nutrition.	
	Satisfactory. per cent.	Unsatisfactory. per cent.	Satisfactory. per cent.	Unsatisfactory. per cent.	Excellent. per cent.	Normal. per cent.
A.—Girls..	98	2	98	2	22	78
B.—Girls..	97	3	97	3	62	38
A.—Boys..	97	3	98	2	23	77
B.—Boys..	96	4	96	4	57	43

Intermediate.

A.—Girls..	98	2	97	3	26	74
B.—Girls..	93	7	86	14	71	29
A.—Boys..	100	—	100	—	23	77
B.—Boys..	93	7	93	7	35	65

Leavers.

A.—Girls..	96	4	97	3	39	61
B.—Girls..	100	—	88	12	58	42
A.—Boys..	100	—	100	—	35	65
B.—Boys..	93	7	95	5	64	36

Uncleanliness.—The above is discovered at routine medical inspection and re-inspections—at the clinics and by the visits made by the School Nurses. During the year the latter paid on an average, 9 visits per school, examining 93,496 children; of these 2,687 were in an unclean condition or 2.87 per cent. of those examined by them. These cases are treated promptly at the clinics, instructions also being given to the parents for treatment at home. They are not re-admitted to the school until certified by the Medical Staff to be in a clean state.

Children nowadays are better clothed and more attention is paid in the homes to skin, hair and scalp conditions. There is no cleansing station in the Area.

Minor Ailments.—Reference to Official Table 2 attached to this Report will give a summary of these defects. Here it may be noted that in 1925 there were only 0.4 per cent. cases of Ringworm of the scalp, as compared with 0.8 per cent. in 1924; 0.3 per cent. cases of Scabies, as compared with 0.2 per cent. in 1924; 0.5 per cent. cases of Impetigo, as compared with 0.6 per cent. in 1924; 0.2 per cent. cases of External Eye Diseases, as compared with 0.2 per cent in 1924; 0.3 per cent. cases of Ear Diseases, as compared with 0.4 per cent. in 1924.

Tonsils and Adenoids.—During 1925, five hundred and eighty cases of enlarged Tonsils and Adenoids, or both, were discovered at medical inspection, or 6.3 per cent. of the children examined, as compared with 7.1 per cent. last year. Nowadays the incidence of Tonsils and Adenoids is diminishing in the higher-age groups, because of the attention given to children from birth, when at the Child Welfare Centres preventative measures under medical supervision is carried out by the mothers to keep the mouths and nasal passages healthy.

Tuberculosis.—Rarely one finds children of school age suffering from Pulmonary Tuberculosis. The following is the Statistical Table furnished to me by the Tuberculosis Officer :—

(*a*)	Total number of children seen during 1925	151
	Sent by School Medical Officer	43
	Sent by Private Doctors	80
	Contacts	28

(*b*) Classification :—

Sent by School Medical Officer.

	Boys.	Girls.
Pulmonary	4	1
Hip	1	1
Glands	1	1
Spine	0	1
Indefinite	19	14
	25	18

Sent by Private Doctors.

	Boys.	Girls.
Pulmonary	6 (1 died)	6 (1 died)
Glands	4	1
Peritonitis	2	3 (1 died)
Indefinite	31	27
	43	37

Contacts.

	Boys.	Girls.
Glands	1	—
Indefinite	12	15
	13	15

Skin Diseases.—Ringworm, Scabies and Impetigo are the outstanding skin diseases met with. The first two named are a diminishing quantity, the last is still fairly prevalent.

External Eye Diseases.—2.3 per cent. children were found to be suffering from Blepharitis, Conjunctivitis, Corneal Opacities, Keratitis, etc., as compared with 3.1 per cent. in 1924.

Badly lighted, ill-ventilated living and sleeping rooms as well as dusty surroundings contribute to the two first-named.

Defective Vision.—During 1925, 5.78 per cent. of the children examined at routine medical inspection were found to be suffering from defective vision; 4.46 per cent. being treated at the Clinic under the Authority's Scheme.

The following table gives the percentage and sex incidence of those cases seen at Lloyd Park and found to be suffering from errors of refraction:—

	Girls	per cnt.	Boys	per cent.	Totals	per cent.
Hypermetropia ..	74	33.18	40	25.48	114	30.00
Hypermetropic Astigmatism	53	23.77	23	14.65	76	20.00
Myopia	39	17.49	52	33.12	91	23.95
Myopic Astigmatism ..	22	9.87	14	8.92	36	9.47
Mixed ,, ..	32	14.35	24	15.28	56	14.74
Odd Eyes	3	1.34	4	2.55	7	1.84
	223	100.00	157	100.00	380	100.00

By grouping the first two under Hypermetropia and the four latter Myopia and analysing this Table we find that 50 per cent. are Hypermetropes and 50 per cent. Myopes; that the girls are in the majority accounting for 58 per cent. of all cases, and that the percentage of Myopes is lower among the girls, being 42.05 per cent. to the boys' 59.87 per cent.

Nineteen children, 8 girls and 11 boys, on refraction were found to be suffering from no error, their symptoms, headaches, etc., being due to other causes.

The following were found to be suffering from defects other than errors of refraction:—

Diseases or Defects.	Boys.	Girls.
Old Interstitial Keratitis	—	1
Double Coloboma of the Iris	—	1
Nystagmus with double Congenital Cataract	—	1
Retino Choroiditis and Nystagmus ..	1	—
Double Lamillar Cataract	1	—
Right Coloboma and Pupil filled with Calcareous Deposit	1	—
Double Ptosis	—	1
	—	—
	3	4
	—	—

Also one girl apparently physically healthy whose vision was 6/24 on Snellin's Type with a low degree of Hypermetropic Astigmatism, the correction of which did not bring the vision up to normal. However, on being given Thyroid ¼ grain daily for a fortnight she recovered 6/6 vision, only to return to 6/24 on discontinuing the Thyroid. She has now left our School and gone under the County Authority.

External Diseases of the Eye.

Disease.	Boys.	Girls.	Totals.
Nebulae	5	5	10
Blepharitis	20	36	56
Styes	7	9	16
Conjunctivitis (Phlyctenular) ..	10	20	30
,, (Catarrhal) ..	6	11	17
Meibomian Cyst	—	1	1
	—	—	—
	48	82	130
	—	—.	——

Squint.

	Boys.	Girls.
Convergent R	8	10
L	13	21
Divergent R	1	1
L	—	1
Occasional L	6	—
Alternating	5	6

All children suffering from Squints are submitted to refraction, and suitable glasses ordered, and at the same time the mothers are

advised to cover the non-squinting eye from 1 to 2 hours daily to begin with and eventually to keep it covered all the time the child is in the house.

In this way a great improvement in the vision of the squinting eye has been obtained in a number of cases, and where, when first seen the child was 7 years or under, the vision in the majority of cases returned to normal.

Operations by Mr. Lindsay Rea at Western Ophthalmic Hospital.

	Boys.	Girls.
Converging Squint L	—	3
,, ,, R	1	—
Alternating ,, ...	1	—
Needling for Cataract	1	1
Ptosis	—	1

The work of the clinic also includes the following-up of cases until school attendance ceases. In this way, 1,072 children making 2,558 attendances, were seen as per following table. Fifty-seven children from the Myope Centre made 105 attendances. In addition, 706 attendances were made by children requiring treatment. In all, the attendances at the Clinic totalled 3,369.

Diseases.	No. of Children.		No. of Attendances.		Average No. of attendances per child.	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
Myopia	113	86	221	223	2.00	2.60
Hypermetropia ..	92	100	176	236	1.91	2.30
Myopic Astigmatism ..	31	54	86	157	2.77	2.90
Hypermetropic ,, ..	83	118	157	325	1.90	2.70
Mixed ,, ..	30	53	91	140	3.00	2.60
Squints	81	89	209	232	2.57	2.60
Other defects such as Nystagmus, Corneal Opacities, etc. ..	22	27	47	52	2.00	2.00
Odd Eyes	29	21	40	46	1.40	2.00
Glasses not required ..	19	24	62	58	3.00	2.40
	500	572	1089	1469	2.3	2.5

Myope School.—During 1925 Mr. Lindsay Rea paid 7 visits to Walthamstow, and as well as seeing each child at the Myope Centre he passed one girl and two boys for admission there.

On December 31st there were 27 boys and 30 girls on the school register, 19 of these being Blind within the Act, and being taught Braille.

A full account of this school will be found elsewhere in the Report.

Ear Disease and Hearing.—Accumulation of wax and foreign bodies in the cavity of the external ear impair hearing. Bad teeth, unhealthy and septic conditions of the mouth and naso-pharynx tend to infect the Eustachian tube, through which infection reaches the middle ear where an inflammatory condition is set up, often leading to a perforation of the drum and discharge. As some zymotic diseases, notably Scarlet Fever, Diphtheria and Measles attack the Tonsils, Adenoids and accessory sinuses of the nose, it will be seen that the incidence of these fevers bears a direct relation to the occurrence of this troublesome and intractable affection, and that it will always of a necessity be present to a greater or less degree.

Dental Defects.—The good physique of the present day elementary school child due to judicious dietary, rich in vitamines, is reflected in the improved dentures now so noticeable. There are fewer debilitated children, too, requiring less prolonged treatment courses with iron which tends to discolour and erode the teeth.

Crippling Defects.—Crippling defects of all kinds are dealt with under their various headings. Sixteen children suffering from Rickets and Spinal Curvature were discovered at medical inspection.

6. INFECTIOUS DISEASES.

All children found suffering or suspected to be suffering from any infectious disease are at once excluded from school, and are not re-admitted until certified by the School Medical Officer to be free from infection. All contacts are kept under observation, all suspicious throats, nasal and ear discharges are swabbed. Two thousand and eight swabs were examined during the year and 235 contained Diphtheria Bacilli.

All cases of Scarlet Fever and Diphtheria are sent to the Council's Isolation Hospital for Infectious Diseases at Chingford if proper isolation cannot be carried out at home.

1,833 children were excluded under Article 53 (*b*) during the year. Of these, 837 were sufferers from infectious or contagious disease or suspects.

Whooping Cough appeared in epidemic form in the first quarter of the year, and Measles in the second quarter.

The following gives the notifications under the Infectious Diseases Notification Act, received in respect of the diseases named, occurring amongst children of School age:—

	Scarlet Fever.	Diph-theria.	Non-clinical Diph-theria.	Measles.	Whooping Cough.
January ..	21	11	10	1	248
February ..	14	10	7	8	69
March ..	18	10	6	58	43
April ..	22	8	5	132	17
May ..	17	9	1	419	14
June ..	16	4	4	218	9
July ..	12	12	4	165	1
August ..	8	6	—	3	—
September	20	12	6	21	—
October ..	27	7	4	57	2
November ..	34	7	1	54	13
December ..	24	5	—	61	5
	233	101	49	1197	421

7. FOLLOWING UP.

Whether parents are present or not at routine inspection, defects found thereat and requiring treatment are explained to them and also the existing facilities for remedying same. Not only are these noted on the inspection cards but also After-Care Cards are made out. If at re-inspection the doctor finds that no treatment or remedy has been carried out and a reasonable explanation is not given, the School Nurse visits the home, to urge the parents to comply with the recommendation and to break down any objections that may exist.

The tactful Nurse invariably meets with success.

In addition, the School Medical Officer and School Doctors, aided by the Attendance Officers and Head Teachers, help largely in this important work.

During the year, the Nurses paid 3,054 visits to the homes in connection with the following:—

Defective Vision ..	82	Impetigo	32
External Eye Dis. ..	1	Sore Throat ..	7
Defective Teeth ..	132	Rash	8
Otorrhoea and Deafness	21	Colds	7
Ringworm	26	Diphtheria	1
Tonsils and Adenoids ..	359	Whooping Cough ..	409
Pediculosis	6	Measles	885
Mumps	490	Various	135
Chicken Pox	453		

Total number of visits to Schools	396
Average number of visits for the year to each school ..	8.8
Total number of examinations for Uncleanliness (Sect. 87 Education Act, 1921)	93,496
Number of notices sent to parents under above Act ..	122
Number of children found unclean	2,687

8. MEDICAL TREATMENT.

Minor Ailments.—The children are seen at the parents' request or on the advice of the teachers or school attendance officers, or as a result of medical inspection. Each child has a record card kept at the Clinic on which is entered the defect and treatment, and a small clinic card kept at the school on which is noted the time the child spends at the clinic and any information such as exclusion from school or special treatment, such as "no drill," necessary for the guidance of the teachers. This card is brought to the Clinic by the child at each attendance, and in this way a complete record of the individual child's ailments is preserved.

During the year, 14,989 attendances were made at the Clinic, making an average of 96 per session.

Tonsils and Adenoids.—Operation is only undertaken when other measures have failed. When a child is found suffering from these defects with no obvious attendant symptoms—adenoids facies, deafness, or ill-developed chest—conservative means are first employed such as breathing exercises, astringent gargles and nasal douches.

If operation is found to be necessary, it is not undertaken until all oral sepsis has been cleared up and until the child, if debilitated, is got into a better state of health.

Operations are carried out at the Dispensary in Hoe Street, by general practitioners practising in the town, one afternoon weekly, a school nurse being in attendance.

Previous to operation, notices are sent to the parents giving full directions for the preparation of the child and its after-care.

A Sanitary Inspector visits the home, and if the conditions there are not satisfactory the operation is carried out at the Council's Sanatorium, where the child is kept for a few days to convalesce.

No child is operated upon unless a parent or other responsible person is present in the building. The child is detained until all bleeding has ceased and the anæsthetic recovered from. If necessary it is sent home by taxi-cab.

All children are visited next day by the School Nurse and seen in a week's time by one of the Medical Staff.

During the year 235 children received operative treatment, or 40 per cent. of those found to be suffering from these defects—226 under the Authority's Scheme (of these 37 were done at the Sanatorium)—and 9 by private practitioners or hospital.

Tuberculosis.—It is very rare to find a child suffering from definite Pulmonary Tuberculosis. All suspected cases are sent to the Tuberculosis Officer for examination and, if necessary, he keeps them under observation and gives treatment such as Cod Liver Oil, Milk, etc. A report is always sent to the Doctor who sends the case.

A "green" after-care card is made out for such children, and this enables the assistant School Medical Officer to give special attention. A similar coloured card is also made out for a Tubercular Contact.

Nineteen children are at present in Sanatoria or Sanatorium Schools approved by the Board. We have 14 active non-pulmonary cases attending at Sanatoria or Hospital Schools approved by the Ministry. In Brookfield Hospital School we have 1 Tubercular Hip and 1 Tubercular Spine.

Skin Diseases.—A special Ringworm Clinic is held one afternoon weekly. Other skin affections are treated at the Minor Ailments Clinic. Forty-two cases of Ringworm of the Scalp and 69 cases of Ringworm of the body received treatment under the Authority's Scheme, and 5 had X-ray treatment.

Thirty-cases of Scabies and 524 of Impetigo were treated at the Clinic as well as 199 other skin cases.

The Nurses instruct the parents how to carry on the treatment in the interval between the Clinic sessions. Bad cases are brought to the Clinic daily.

External Eye Diseases.—These are seen at the general Clinics and also, if necessary, at the special Eye Clinic.

Vision.—See special Eye Report.

Ear Diseases and Hearing.—Sessions are held at Lloyd Park on two afternoons weekly for the treatment of Otorrhœa and Deafness. During 1925, three hundred and fifteen children suffering from these defects were treated at this Clinic and 12 elsewhere. Otorrhœa forms the bulk of such cases and is a very troublesome condition. A great number of the cases become chronic and have

to attend bi-weekly for months before clearing up, and, occasionally, in spite of treatment, partial deafness results. In some cases it was observed that the hearing was relatively more acute when the ear was discharging than when it was dry.

Many of the discharges are found to contain Diphtheria Bacilli. Local antiseptics and dusting powder are applied, with gentle irrigation. In that way the external ear is kept clean, and free discharge is allowed to take place through the perforated drum. Dampness contributes to the continuance of running ears, and such cases often dry up in the summer weather only to recur in the winter months.

Of those attending the Clinic for deafness a number were completely cured on removing an accumulation of wax. Others showed great improvement after operation for Tonsils and Adenoids.

In the case of partially deaf children, the teachers are instructed that these should sit on the front benches, otherwise they cannot possibly benefit by the same teaching as a child with normal hearing.

Dental Defects.—A Dental Surgeon devotes four mornings and five afternoons weekly to the treatment of these defects, a fifth morning being taken up by inspecting Infants' teeth at the schools. A detailed account of the work done will be found on Table IV, Group IV.

Crippling Defects and Orthopaedics.—See paragraphs on special Cripple School and Brookfield Orthopædic Hospital.

9. OPEN AIR EDUCATION.

Drill classes are taken in the playgrounds all the year round, weather permitting. Classes for ordinary school subjects are also taken there in summer weather but only to a limited extent. Such classes should be encouraged and developed.

School journeys and educational visits were made to the British Museum, London and Bethnal Green Museums, Kew Gardens, Mint, Colonial Institute, Australia House, Docks and occasionally to factories and other places of interest. Nature study rambles are made to Epping Forest, to which we are in close proximity. The children are very interested in these excursions. About £200 a year is spent in Educational visits.

During the time the British Empire Exhibition was opened, 7,394 of our school children in charge of teachers visited Wembley, at a total cost of £493 9s. 1d.

School Camps and Day Open Air Schools.—There are none in connection with the schools in this town.

Open Air Classrooms in Public Elementary Schools.—There are two open-air classrooms; one in Coppermill Road J.M. School, and the other at Forest Road Girls' School. Weakly and debilitated children are usually selected for these classes.

The Head Teachers speak very favorably of the general improvement, and some of the parents are very reluctant to have their children transferred to other classes.

Residential Open Air Schools.—There are none here, but where delicate children require residential open-air treatment, they are usually sent to schools certified by the Board of Education.

10. PHYSICAL TRAINING.

The Board of Education Regulations for physical training in the schools are carried out by the teachers. Organised games too, are under their supervision.

Where children with weak hearts or undue debility exist they are forbidden to take part in these exercises by the school doctors, otherwise the school medical service is not associated with physical training.

There is a physical instructor for the boys in both Central Schools, and a lady instructress for the girls. Both are full-time officials.

11. PROVISION OF MEALS.

Canteens on the school premises have been established at three of the special schools for the supply of dinners to the scholars. Necessitous children attending the ordinary schools are supplied with dinners at three Centres on 6 days a week including holidays. The number of meals provided for this class of child during 1925. was 15,766. The daily average number of children fed is 59.

For debilitated children, milk meals have been supplied for 107 children, on the recommendation of the Medical Staff.

12. SCHOOL BATHS.

Lessons in swimming, at the Public Baths, are given to the girls by the lady instructress, the male teachers undertaking the work for the boys. There is a school bath at the Physically Defective Centre, at Joseph Barrett School.

13. CO-OPERATION OF PARENTS.

Parents avail themselves to a large extent of the opportunity of being present at routine medical inspection and the doctors welcome their presence.

Defects, if any, are explained to them and suggestions for regaining and maintaining good health are given.

During the past year, parents attended at the routine inspection of :—

	Boys.	Girls.
Entrants	80.8 ..	68.6
Intermediate	56.8 ..	65.7
Leavers	25.5 ..	44.1

14. CO-OPERATION OF TEACHERS.

A gratifying feature is the willing help given by the teachers. For this reason the work of the School Medical Service is made more fruitful and pleasant than it would otherwise be.

The Head Teachers always assist at routine medical inspection and re-inspections, and give every assistance to the Nurses at their periodical visits for head inspection and cleanliness.

By their untiring efforts, too, the children keep their appointments punctually, the consent of difficult parents for treatment is obtained, and spectacles are worn according to directions, and any cases of illness or suspected illness is referred to the Clinics.

15. CO-OPERATION OF SCHOOL ATTENDANCE OFFICERS.

The School Medical Service is particularly indebted to the School Attendance Officers. Owing to their intimate knowledge of the children's home conditions their assistance is invaluable in advising the medical staff of cases requiring treatment, and in persuading parents with prejudices against treatment to have same carried out. They help also to bring abnormal children in the area under medical supervision. Fees for spectacles, fees for children in residential institutions and fees for those having orthopædic treatment are collected by them.

16. CO-OPERATION OF VOLUNTARY BODIES.

By an arrangement between the Education Committee and the Invalid Children's Aid Association, 17 children have been provided with treatment in convalescent homes for varying periods. This Association also assists in providing surgical requisites.

The Central Boot Fund Committee (a Sub-Committee of the Education Committee) succeeded in providing 664 pairs of boots for needy school children.

The local Inspector of the National Society for the Prevention of Cruelty to Children has furnished the following report:—

"During the year ending December 31st, 1925, the following cases have been forwarded by the Walthamstow School Officials and dealt with by me:—

Number of Cases.	Nature of Offence.		How dealt with.
28 ..	Neglect ..	25	By warning and supervision.
	Illtreatment	1	
	Exposure ..	2	

Number of children involved:—Boys, 35; Girls, 27.

In connection with the 28 cases, after the first visit of inquiry, I paid 147 supervision visits to see that the promised improvement in the condition of the home and children took place, and in the majority of cases the parents realised we were out for the good of the children and responded to the appeal made to them and took necessary steps to effect a general improvement in the condition of children and home."

17. BLIND, DEAF, DEFECTIVE, AND EPILEPTIC CHILDREN.

A system of scheduling all children in the area exists in the School Attendance Department. When they reach the age of 5 years they are notified to attend school, and any physical or mental defect then noted or suspected is referred to the School Medical Officer who makes an examination.

The School Doctors, with the assistance of the Head Teachers, at the routine medical inspection of the entrants, pick out any children suspected of coming within the above classification. A record of those defective is kept.

Myope and Blind Centre.—This school is situated in Wood Street and has a total capacity for 70 children. It is staffed by a Head Teacher and two assistants. There are three mixed classes.

On December 31st, 1925, there were 27 boys and 30 girls in attendance.

The types of visual defects found are High Myopia, Keratitis, Choroiditis, Cataract, Congenitial dislocation of the Lens Nystagmus, etc.

Mr. Lindsay Rea, F.R.C.S., Surgeon to the Western Ophthalmic Hospital, gave six sessions during the year in connection with these children.

When possible, the ordinary school subjects are taught—arithmetic, history and geography—by means of large type combined with myope desks, a reversible arrangement with table on top and blackboard underneath, designed by Bishop Harmon.

Lessons are also written out by the teachers to provide reading and information to be learned.

Twelve boys and seven girls, blind within the Act, were taught Braille.

Books from the National Lending Library for the Blind, are now obtainable for use of children in the school. This is an advantage as they get a much wider range of literature. The children show great aptitude for this method of reading.

Besides the ordinary alphabet there are between 300 and 400 abbreviations in which they become very proficient.

The "Braille frame" for writing is completed quickly enough and is pretty accurate.

The "Arithmetic frame" is so made that each hole is octagonal and the type used makes 16 characters. All sums can be done by means of this contrivance; moreover, it is found to be a good training for developing memory.

There is a plot of ground adjoining the School where gardening is taught to all classes. Up to March, 1925, this used to be done by the Guild of Blind Gardeners, but since then it is done on pretty much the same lines by the existing teaching staff.

Basket, bent iron work and printing are done by the boys, whilst both boys and girls do handwork, raffia, printing, drawing and typewriting.

The girls, in addition, do cookery, laundry, knitting, and cardboard modelling, whilst the younger children do plasticine, clay modelling, paper-folding and weaving.

A cantata was held at Christmas in which all the children took part, when there was an exhibition of their work and a prize distribution.

The mentality of the children is about average. In spite of their great handicap the aim of the teaching in this school tends to bring them round to the status of the normal child.

A substantial two-course dinner is served on the premises.

On surveying the working of the school one is struck by the training, care and attention given to the children by the Head Teacher and her assistants, and by the happiness the children take in their work.

It is interesting to note that of the 4 boys and 6 girls who left during the year, 1 boy was found unfit for further training, owing to total blindness; 1 girl was likewise unfit for work owing to deficient mentality and great impairment of vision. Of the others, 1 boy is engaged in a garage, 1 at wireless instruments, 1 a French polisher. Of the girls, 2 are employed in camera works, 1 a packer, 1 a greengrocer's help, and 1 in general service.

The children made an average of 85 per cent. attendance during the year.

They go to and from school on the Council's Tramway Cars under the supervision of Attendance Officers.

Deaf Centre.—This school has a capacity for 20 children and is in charge of a Head Teacher and an Assistant. On December 31st there were 18 on the register—3 aphasic and 15 deaf. One is taught by finger spelling. They are taught lip-reading, speech and handwork, comprising cardboard modelling, leather work, basket-making, and raffia on canvas. The boys are also taught woodwork and boot repairing.

Three boys and 2 girls left during the period under review. The two girls were apprenticed to dressmaking. Of the boys, two went to cabinet-making and one to tailoring.

Very comlimentary reports were received by the Head Teacher from the employers of one boy and one girl as to their progress, conduct and diligence.

Mentally Defective Centre.—This Special School is situated in Shernhall Street and has a capacity for 65 boys and 65 girls. The staff consists of a head teacher and two assistants and a cook.

On December 31st there were 31 boys and 34 girls on the register. Also in the Area there are 6 feeble-minded children, 3 boys and 3 girls at no school, as well as three imbeciles, 2 girls and 1 boy, and 1 idiot, a boy, making in all 75 mentally defectives in the area, or 0.3 per cent. of the children of school age.

During the past year the children attending the school have been re-graded into three classes.

The nursery type might with advantage be divided into a separate class to be taught all round general work, e.g., cookery and elementary domestic work.

The Montessori system is followed as far as possible, the scholars making their own apparatus.

The scholars are taught manual work, simple metal work, raffia, housework, gardening, carpentery, and boot repairing.

The Head Teacher selects the pupils for their subjects according to their mental suitability. Good dinners are supplied at the School at the cost of 3d. per head.

The children are conveyed on the Council's trams free of charge and are met at all points by the Attendance Officers.

At their annual Christmas Tree, exhibitions of dancing and singing were given which reflected great credit on their teachers.

All cases are certified by the School Medical Officer before admission.

Family history is in a number of the cases, low grade, several members of the same family attending the school.

There is a voluntary After-Care Committee, which, assisted by the Head Teacher, follows up cases after leaving school.

There would not be much difficulty in finding employment for these children under 16, but after that age they are usually only engaged for casual work.

Physically Defective Centre.—This Centre was opened in 1924, a part of the Infant's Department, at Joseph Barrett School, being used for the purpose.—The staff consists of a head teacher, two assistant teachers, one nurse, two masseuses, and an ambulance driver.

The number of children on the register on December 31st, 1925, was 75, 42 being admitted during the year.

A dining-room and kitchen was built during the year, giving more space for class and exercise rooms.

A midday meal is served on the premises under the supervision of the Head Teacher.

Mr. Whitchurch Howell, F.R.C.S., who has the surgical care of the children, holds two clinics monthly, one at Joseph Barrett

Physically Defective Centre, and the other at Lloyd Park. At the latter clinic, all fresh cases are seen and all physically defective children in the area are kept under observation. Two masseuses attend at the Centre every afternoon.

There is a school bath on the premises. Ventilation, lighting and heating is satisfactory.

Decided mental and physical improvement is noticeable in the children.

Besides the ordinary elementary school curriculum subjects, woodwork, drawing, rug making and raffia are done by the boys and girls, whilst needlework is done by the girls. The children show great aptitude for handicraft.

Rest is ordered when necessary. Recreation consists in indoor games: draughts and cards; the outdoor games: football, cricket, and skipping for the girls. Badminton was introduced during the year.

The medical equipment is adequate, a massage couch, high plinth massage stools, slings and other medical sundries.

The following table shows the defects in the children during the year:—

Diagnosis.	Boys.	Girls.
Pseudo Hypertrophic Paralysis	3	2
Infantile Paralysis	8	17
Hemiplegia	3	3
Diplegia	1	1
Paraplegia	—	2
Erbs Paralysis	1	1
Ataxia	1	—
Congenital Club-foot	1	1
Flat-foot	1	—
Polio-Encephalitis	1	—
Congenital Dislocation of Hip	—	2
Tubercular Spine	4	3
,, Hip	8	1
,, Knee	1	—
,, Ankle	1	—
,, Shoulder	—	1
Scoliosis	1	3
Perthe Hip	1	—
Injury Cervical Spine	1	—
Heart	6	6

The Education Committee's ambulance, supplemented by local motor agents, make three journeys daily to carry the children to and

from school, the times of arrival being 8.45 to 9.45 a.m. They commence leaving school at 3 p.m., the last lot leaving at 4 p.m. There is a midday interval of $1\frac{1}{4}$ hours.

The children are very happy in the school, and whilst such children are probably indulged more by the general public by reason of their defects, there is little doubt but that the establishment of such a centre, whilst freeing them from the competitive strain of more active playmates, gives them a better chance to get equipped for the battle of life. They also have the advantage that their instruments are kept properly adjusted. The average attendance for the year was 78 per cent.

As the school has been opened only since 1924 it is too soon to give a review of the after careers of the children.

Brookfield Orthopaedic Hospital.—This is a voluntary hospital school recognised by the Board of Education, situated at Oak Hill, Walthamstow, amid pleasant surroundings on a healthy site and with such possibilities that an extension is proposed.

Children from the Walthamstow Area have the prior right of admission.

Our Committee sent during 1925, thirteen school children, 6 boys and 7 girls, to this school. Walthamstow children under school age are also admitted.

During the year 19 children in all were treated, suffering from the following defects:—

Tubercular Hip	1
Infantile Paralysis	8
Hemiplegia Spastic	1
Scoliosis	2
Rickets	4
Congenital Deformity of feet	2
Torticollis	1

Fifteen operations, as under, were performed:—

Tenotomy of Tendo Achilles	4
Stoffels Median Nerve	1
Transplantation of Flexor Pollicis for Opponens paralysis	3
Tenotomy of Extensors of toes and plantor fascia	1
Femorah Osteotomy	1
Osteoclasis	2
Torticollis	1
Mid-tarsal Arthrodesis	1
Amputation of toe	1

A charge of 42s. per week is made, the parents contributing according to their means.

Ultra Violet Rays are in use.

18. NURSERY SCHOOLS.

There are no nursery schools in the Area, but the Board of Education have sanctioned the plans for building one, and we are awaiting the sanction of the Ministry of Health for a loan.

19 and 20. SECONDARY CONTINUATION SCHOOLS.

The organisation of Secondary and Continuation Schools in the Area is carried on under the supervision of the Essex County Council.

21. EMPLOYMENT OF CHILDREN AND YOUNG PERSONS.

During 1925, one hundred and ninety-eight children made application for employment cards and were medically examined for the purpose of the Employment of Children and Bye-laws. Of these, 196 were found fit and 2 were rejected.

Generally speaking the employers meet the requirements of the Bye-laws and provide waterproof clothing during inclement weather. Some cases are called up periodically for examination.

No ill-effects have been noticed from such occupations which consist chiefly in milk and newspaper deliveries and general errands.

22. SPECIAL ENQUIRIES.

There were none made during the year.

23. MISCELLANEOUS.

Thirty-three reports were made on teachers and other staff on prolonged absences from school through illness, and 64 medical examinations were made on 64 new appointments.

In September, 1925, a class was formed in Marsh Street School for 10 of the most pronounced cases of stammering boys known in the District. Satisfactory progress is being made.

24. STATISTICAL TABLES.

The above tables required by the Board of Education are given at the end of this Report. In them are shown in summary form the defects found, the treatment received and the abnormal children in the Area.

TABLE I.

Return of Medical Inspections.

A.—Routine Medical Inspections.

Number of Code Group Inspections.				Number of other Routine Inspections.
Entrants.	Intermediates.	Leavers.	Total.	
3086	2311	3466	8863	250

B.—Other Inspections.

Number of Special Inspections.	Number of Re-Inspections.	Total.
2831	21,573	24,404

TABLE II.

Return of defects found in course of Medical Inspection in 1925.

Defects or Disease.		Routine Inspections.		Special Inspections.	
		Number of Defects.		Number of Defects.	
		Requiring Treatment.	Requiring to be kept under observation but not requiring Treatment.	Requiring Treatment.	Requiring to be kept under observation but not requiring Treatment.
1		2	3	4	5
Malnutrition		2	1	—	—
Uncleanliness, Scalp (See Table IV., Group V.)		—	—	—	—
Skin.	Ringworm, Head	2	—	42	—
	,, Body	1	—	69	—
	Scabies	2	—	28	—
	Impetigo	17	2	505	—
	Other Diseases (Non-Tuberculous)	47	3	191	—
Eye.	Blepharitis	25	3	53	—
	Conjunctivitis	5	1	51	—
	Keratitis	—	—	1	—
	Corneal Opacities	2	1	—	—
	Defective Vision (excluding Squint)	326	1	147	1
	Squint	42	5	5	—
	Other Conditions	15	1	61	—
Ear.	Defective Hearing	17	7	57	—
	Otitis Media	23	5	161	—
	Other Ear Diseases	10	3	93	—
Nose and Throat.	Enlarged Tonsils only	101	263	2	—
	Adenoids only	10	21	10	—
	Enlarged Tonsils and Adenoids	40	41	92	—
	Other Conditions	32	12	—	—
Enlarged Cervical Glands (Non-Tuberculous)		10	28	36	—
Defective Speech		15	16	7	—
Teeth—Dental Disease (See Table IV., Group IV.)		1678	—	—	—
Heart and Circulation.	Heart Disease, Organic	11	32	2	—
	,, ,, Functional	9	333	17	—
	Anæmia	26	2	22	—
Lungs.	Bronchitis	191	77	8	—
	Other Non-Tuberculous Diseases	10	18	—	—
Tuberculosis.	Pulmonary, Definite	—	1	1	—
	,, Suspected	14	12	—	—
	Non-Pulmonary Glands	3	6	—	—
	,, Spine	—	1	—	—
	,, Hip	—	—	—	—
	,, Other Bones & Joints	—	—	—	—
	,, Skin	—	—	—	—
	,, Other Forms	2	1	—	—
Nervous System.	Epilepsy	1	2	3	—
	Chorea	1	3	5	—
	Other Conditions	9	7	—	—
Deformities.	Rickets	—	5	—	—
	Spinal Curvature	2	1	1	—
	Other Forms	4	8	—	—
Other Defects and Diseases		59	53	684	—

Number of Individual Children having Defects which required Treatment (Excluding Uncleanliness and Dental Diseases.)

Group.	Number of Children.		Percentage of Children found to require Treatment.
	Inspected.	Found to require Treatment.	
1	2	3	4
Code Groups:—			
Entrants	3086	943	30.6
Intermediates	2311	738	31.9
Leavers	3466	854	23.2
Total (Code Groups)	8863	2537	28.6
Other Routine Inspections	250	143	57.2

TABLE III.

Numerical Return of all Exceptional Children in the Area in 1926.

			Boys.	Girls.	Totals.
Blind including partially blind).	(*i*) Suitable for training in a School or Class for the totally blind.	Attending Certified Schools or Classes for the Blind	10	7	17
		Attending Public Elementary Schools	—	—	—
		At other Institutions	1	1	2
		At no School or Institution	—	—	—
	(*ii.*) Suitable for training in a School or Class for the partially blind.	Attending Certified Schools or Classes for the Blind	16	22	38
		Attending Public Elementary Schools	—	—	—
		At other Institutions	—	—	—
		At no School or Institution	—	—	—
Deaf (including deaf and dumb and partially deaf).	(*i.*) Suitable for training in a School or Class for the totally deaf or deaf and dumb.	Attending Certified Schools or Classes for the Deaf	9	4	13
		Attending Public Elementary Schools	—	—	—
		At other Institutions	—	—	—
		At no School or Institution	—	—	—
	(*ii.*) Suitable for training in a School or Class for the partially deaf	Attending Certified Schools or Classes for the Deaf	3	2	5
		Attending Public Elementary Schools	—	—	—
		At other Institutions	—	—	—
		At no School or Institution	—	—	—
Mentally Defective.	Feebleminded (cases not notifiable to the Local Control Authority)	Attending Certified Schools for Mentally Defective Children	35	30	65
		Attending Public Elementary Schools	—	—	—
		At other Institutions	—	—	—
		At no School or Institution	—	—	—
	Notified to the Local Control Authority *during the year*.	Feebleminded	—	—	—
		Imbeciles	1	2	3
		Idiots	1	—	1

			Boys.	Girls.	Totals.
Epileptics.	Suffering from severe epilepsy.	Attending Certified Special Schools for Epileptics	3	2	5
		In Institutions other than Certified Special Schools	—	—	—
		Attending Public Elementary Schools	—	—	—
		At no School or Institution	3	4	7
	Suffering from epilepsy which is not severe.	Attending Public Elementary Schools	2	3	5
		At no School or Institution.. ..	—	—	—
Physically Defective	Infectious pulmonary and glandular tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board..	5	4	9
		At other Institutions	—	—	—
		At no School or Institution	—	—	—
	Non-infectious but active pulmonary and glandular tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board..	3	7	10
		At Certified Residential Open Air Schools	—	—	—
		At Certified Day Open Air Schools ..	—	—	—
		At Public Elementary Schools ..	62	73	135
		At other Institutions	—	—	—
		At no School or Institution	1	1	2
Physically Defective (*continued*)	Delicate children (*e.g.*, pre- or latent tuberculosis, malnutrition, debility, anaemia, etc).	At Certified Residential Open Air Schools	—	—	—
		At Certified Day Open Air Schools ..	25	65	90
		At Public Elementary Schools ..	—	—	—
		At other Institutions	3	6	9
		At no School or Institution	6	7	13
	Active non-pulmonary tuberculosis.	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board	11	3	14
		At Public Elementary Schools ..	—	—	—
		At other Institutions	—	—	—
		At no School or Institution	—	—	—
	Crippled Children (other than those with active tuberculous disease), *e.g.*, children suffering from paralysis, etc., and including those with severe heart disease.	At Certified Hospital Schools ..	5	3	8
		At Certified Residential Cripple Schools	2	2	4
		At Certified Day Cripple Schools ..	40	35	75
		At Public Elementary Schools ..	—	—	—
		At other Institutions	—	—	—
		At no School or Institution	1	2	3

TABLE IV.

Disease or Defect.	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme.	Otherwise.	Total.
Skin—			
Ringworm—Scalp..	37	5	42
Ringworm—Body	69	—	69
Scabies	29	1	30
Impetigo	521	3	524
Other skin diseases	196	3	199
Minor Eye Defects (external and other, but excluding cases falling in Group II.)	182	5	187
Minor Ear Defects	315	12	327
Miscellaneous (*e.g.*, minor injuries, bruises, sores, chilblains, etc.) ..	595	109	704
Total	1944	138	2082

GROUP II.—DEFECTIVE VISION AND SQUINT (excluding minor Eye Defects treated as Minor Ailments—Group I.).

Defect or Disease.	No. of Defects dealt with.			
	Under the Authority's Scheme.	Submitted to refraction by private practioner or at hospital, apart from the Authority's Scheme.	Otherwise.	Total.
Errors of Refraction (including Squint) (Operations for squint should be recorded separately in the body of the Report) ..	550	34	—	584
Other Defect or Disease of the Eyes (excluding those recorded in Group I.) ..	10	—	—	10
Total	560	34	—	594

	Under the Authority's Scheme.	Otherwise.
Total number of Children for whom spectacles were prescribed	672	10
Total number of children who obtained or received spectacles	660	10

Group III.—Treatment of Defects of Nose and Throat.

Number of Defects.				
Received Operative Treatment.				
Under the Authority's Scheme, in Clinic or Hospital.	By Private Practitioner or Hospital, apart from the Authority's Scheme.	Total.	Received other forms of Treatment.	Total number treated.
226	9	235	—	235

Group IV.—Dental Defects.

(1) Number of Children who were:—

(*a*) Inspected by the Dentist:

Aged:

Routine Age Groups	5 .. 837	Total ..	3318	
	6 .. 1313			
	7 .. 1084			
	8 .. 55			
	9 .. 29			
	10 .. —			
	11 .. —			
	12 .. —			
	13 .. —			
	14 .. —			
Specials				2955
		Grand Total		6273

(*b*) Found to require treatment 5691

(*c*) Actually treated 4092

(*d*) Re-treated during the year as the result of periodical examination 1205

(2) Half-days devoted to:—

Inspection	.. 37			
Treatment	.. 395	Total	..	432

(3) Attendances made by children for treatment 5297

(4) Fillings:—

Permanent teeth	428			
Temporary teeth	2470	Total	..	2898

(5) Extractions:—

Permanent teeth	924			
Temporary teeth	5294	Total	..	6218

(6) Administrations of general anaesthetics for extractions .. 2712

(7) Other operations:—

Permanent teeth	11			
Temporary teeth	406	Total	..	417

Inspection is also made of Urgent Cases at the Dental Clinic on Monday, Tuesday, Wednesday and Friday Mornings.

Group V.—Uncleanliness and Verminous Conditions.

(i.) Average number of visits per school made during the year by the School Nurses 9

(ii.) Total number of examinations of children in the Schools by School Nurses 93496

(iii.) Number of individual children found unclean 2687

(iv.) Number of children cleansed under arrangements made by the Local Education Authority .. .. —

(v.) Number of cases in which legal proceedings were taken:—

(*a*) Under the Education Act, 1921 .. .. .. —

(*b*) Under School Attendance Byelaws 2

NON-NOTIFIABLE INFECTIOUS DISEASES.

Walthamstow Education Committee's "Regulations as to Infectious Diseases in Schools."

Notifications received from Head Teachers during period from January 1st to December 31st 1925.

District.	School.	Department.	Measles.	Whooping Cough.	Mumps.	Chicken Pox.	Ringworm.	Sore Throat.	Impetigo and Pediculosis	External Eye Disease.	Totals.
N.W.	Blackhorse Road	Boys	1	—	1	—	—	—	—	—	2
		Girls	1	—	—	—	—	—	—	—	1
		Infants	90	27	1	17	—	1	1	—	137
	W. E. Whittingham	Boys	1	—	2	—	—	—	—	—	3
	Higham Hill	Girls	4	—	1	—	—	3	—	—	8
		Infants	119	8	24	50	2	3	5	—	211
		Junior Mixed	—	—	—	—	1	—	2	—	3
		Temporary Infants	5	10	13	—	1	1	—	—	30
C.	Pretoria Avenue	Boys	—	—	—	—	—	—	—	—	—
		Girls	—	1	—	—	—	—	—	—	1
		Infants	101	54	11	2	1	—	3	—	172
	Higher Elementary	Boys	—	—	—	—	—	—	—	—	—
		Girls	—	—	—	—	—	—	—	—	—
	Coppermill Road	Boys	1	—	—	—	—	—	—	—	1
		Girls	—	—	—	2	—	—	—	—	2
		Junior Mixed	103	23	3	78	1	—	—	—	208
		Infants	50	5	1	26	1	2	—	—	85
N.E.	Wood Street	Boys	—	—	—	—	—	—	—	—	—
		Girls	—	—	—	—	—	—	—	—	—
		Infants	29	11	6	9	—	—	—	—	55
	Joseph Barrett	Boys	—	—	—	—	—	—	—	—	—
		Girls	2	3	6	6	1	4	—	—	22
		Infants	6	17	12	23	—	23	3	1	85
E.	Maynard Road	Boys	3	—	4	6	1	—	—	—	14
		Girls	3	—	2	—	—	2	—	—	7
		Infants	35	43	107	59	4	17	23	2	290
	St. Mary's	Girls	—	—	4	—	—	—	—	—	4
		Infants	31	49	11	9	—	—	2	—	102
	St. George's	Mixed	—	—	2	—	—	—	—	—	2
	Shernhall Street	Boys	—	—	—	—	—	—	—	—	—
		Girls	—	—	—	—	—	—	—	—	—
W.C.	William Morris	Boys	—	—	—	—	—	—	—	—	—
		Girls	—	—	—	—	—	—	—	—	—
		Junior Mixed	10	1	1	4	—	—	1	—	17
	Marsh Street	Boys	—	—	—	—	—	—	—	—	—
	Mission Grove	Girls	3	—	—	2	—	—	—	—	5
		Infants	76	8	5	38	—	1	—	—	128
	Deaf and Dumb	Mixed	—	—	—	—	—	—	—	—	—
	Edinburgh Road	Junior Mixed	—	—	—	—	—	2	—	—	2
S.W.	Markhouse Road	Boys	—	—	—	—	—	—	1	—	1
		Girls	11	2	—	—	—	—	—	—	13
		Infants	75	—	—	1	—	—	—	—	76
		Junior Mixed	—	—	—	—	—	—	—	—	—
	St. Saviour's	Boys	—	—	—	—	—	—	—	—	—
		Girls	—	—	—	—	—	—	—	—	—
		Infants	81	22	2	20	—	6	2	—	133
E.C.	Forest Road	Boys	—	—	—	—	—	—	—	—	—
		Girls	—	—	—	—	—	—	—	—	—
		Infants	95	68	17	70	4	4	4	—	262
	Winns Avenue	Boys	—	—	—	—	—	—	—	—	—
		Girls	—	—	—	—	—	—	—	—	—
		Infants	14	8	59	92	1	1	—	—	175
		Junior Mixed	6	2	92	13	4	1	1	—	119
N.	Chapel End	Boys	—	—	—	—	—	—	—	—	—
		Girls	—	—	—	—	—	—	—	—	—
		Infants	28	47	58	42	—	—	—	—	175
		Junior Mixed	8	3	3	6	1	—	—	—	21
	Selwyn Avenue	Boys	—	—	—	—	—	—	—	—	—
		Girls	—	—	—	—	—	—	—	—	—
		Infants	60	8	71	36	1	—	1	—	177
S.	Gamuel Road	Boys	—	—	—	—	—	—	—	—	—
		Girls	23	—	1	3	—	—	—	—	27
		Infants	94	—	6	9	—	—	1	—	110
	Queen's Road	Boys	—	—	—	—	—	—	—	—	—
		Girls	—	—	—	—	—	—	—	—	—
		Infants	28	1	—	17	1	—	—	—	47
		TOTALS	1197	421	526	640	25	71	50	3	2933

RETURN showing the number of Cases of SCARLET FEVER and DIPHTHERIA notified in each month of Children attending the PUBLIC ELEMENTARY SCHOOLS, 1925.

	SCHOOL.	DEPARTMENT.	JAN.		FEB.		MAR.		APRIL.		MAY.		JUNE.		JULY.		AUG.		SEPT.		OCT.		NOV.		DEC.		TOTALS.	
			S.F.	D.	S.F.	D.	S.F.	D.	S.F.	D.	S.F.	D.	S.F.	D.	S.F.	D.	S.F.	D.	S.F.	D.	S.F.	D.	S.F.	D.	S.F.	D.	S.F.	D.
		Boys	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—
	Blackhorse Road ..	Girls	—	—	—	—	—	—	1	—	1	—	1	1	—	—	1	—	—	1	1	—	—	—	—	—	5	2
		Infants	1	—	—	—	1	—	2	—	2	—	—	—	—	—	—	—	—	—	1	—	2	—	2	—	11	—
N.W.	W. E. Whittingham .	Boys	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	2	—
		Girls	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1	—	—	1	1
		Infants	1	—	3	1	2	—	—	—	—	—	—	—	1	—	—	—	4	—	1	—	1	—	1	—	14	1
	Higham Hill	Junior Mixed ..	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—
		Temp. Infants ..	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—
		Boys	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—
	Pretoria Avenue ..	Girls	1	—	1	—	—	—	3	—	1	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	7	1
		Infants	1	—	—	—	2	—	2	—	1	—	1	—	—	1	—	—	—	—	2	—	2	—	2	—	13	1
		Boys	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—
C.	Higher Elementary ..	Girls	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	—
		Boys	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	1	—	—	—	2	1
	Coppermill Road ..	Girls	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1
		Infants	1	—	—	—	—	—	—	—	—	—	1	—	2	—	1	—	2	1	3	—	2	—	2	—	14	1
		Junior Mixed ..	—	—	—	—	1	—	2	—	—	—	—	—	—	—	—	—	—	—	1	—	2	—	—	—	6	—
		Boys	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	1	—	3	1
	Wood Street	Girls	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	2	—	—	—	2	—	—	—	4	1
N.E.		Infants	—	—	—	1	—	—	—	—	1	—	—	—	—	2	—	—	—	—	1	—	2	—	—	—	4	3
		Boys	1	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1	2
	Joseph Barrett ..	Girls	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	2
		Infants	—	1	—	1	—	1	1	1	—	1	1	—	—	—	—	—	—	—	3	—	—	—	1	—	6	5
		Boys	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	—
	Maynard Road ..	Girls	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	2	—
		Infants	—	—	—	—	—	—	—	1	1	—	—	—	1	—	2	—	—	—	—	—	1	—	1	—	6	1
		Girls	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
E.	St. Mary's	Infants	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	—	—	—	—	—	—	—	2	—
	St. George's ..	Mixed	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—
		Boys	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Shernhall Street ..	Girls	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		Boys	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	2	—
	William Morris ..	Girls	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—
W.C.		Junior Mixed ..	—	1	—	—	—	—	1	—	—	—	—	—	—	—	1	—	2	—	1	—	—	—	—	—	5	1
	Marsh Street ..	Boys	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	—	—	—	1	1
	Mission Grove ..	Girls	—	—	—	—	1	—	—	—	—	—	1	—	—	—	—	—	—	1	1	1	—	—	—	—	3	2
		Infants	—	—	1	—	—	—	—	—	—	—	2	—	—	—	1	—	—	1	1	—	1	—	—	—	6	1
	Deaf and Dumb ..	Mixed	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
	Edinburgh Road ..	Junior Mixed ..	—	—	—	—	—	2	—	—	1	—	1	—	—	—	—	—	—	1	—	—	1	—	—	3	3
		Boys	1	—	—	—	—	—	—	1	—	—	—	—	—	1	2	—	—	—	—	—	1	—	—	—	4	2
	Markhouse Road ..	Girls	1	—	—	—	—	—	—	—	—	—	1	—	—	1	—	—	—	—	—	—	3	—	—	—	5	1
S.W.		Infants	—	—	—	—	—	1	—	—	1	2	—	—	1	—	—	—	1	2	1	3	2	—	1	1	7	9
		Junior Mixed ..	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1	—	—	1	1
		Boys	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
	St. Saviour's ..	Girls	—	1	1	—	—	—	—	—	—	—	—	—	—	2	—	—	—	1	—	—	—	—	—	—	1	4
		Infants	1	—	—	—	—	—	1	—	—	1	—	—	—	—	—	1	—	—	1	—	—	—	—	—	2	2
		Boys	—	—	—	—	—	—	1	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1
	Forest Road	Girls	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	—	1	2	1	6	2
E.C.		Infants	2	1	2	—	—	—	1	—	—	—	—	—	—	—	—	2	—	—	1	—	—	1	2	1	8	5
		Boys	—	—	1	1	2	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	2	3
	Winns Avenue ..	Girls	—	1	—	1	2	2	2	—	—	2	—	—	2	2	—	2	—	—	—	—	—	—	—	—	6	10
		Infants	—	1	—	—	3	1	—	1	—	1	—	—	1	—	—	—	1	—	—	—	2	1	—	—	7	5
		Junior Mixed ..	1	—	2	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—	—	5	—
		Boys	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	2	1
	Chapel End	Girls	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	1	—	1	1
N.		Infants	2	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1	—	2	—	6	—
		Junior Mixed ..	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—
		Boys	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—
	Selwyn Avenue ..	Girls	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		Infants	—	—	—	—	1	—	1	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	2	—	6	—
		Boys	—	1	—	1	1	1	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	4
	Gamuel Road ..	Girls	—	2	—	1	—	—	2	—	—	—	—	—	—	—	—	—	—	1	—	1	—	—	1	—	3	5
		Infants	1	1	—	1	—	—	1	—	3	—	1	—	—	1	—	—	1	—	1	1	1	—	—	1	9	5
S.		Boys	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	—	—	—	—	3	—
	Queen's Road ..	Girls	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—	—	—	2	—
		Infants	—	—	—	—	—	—	1	—	—	—	—	—	—	2	—	—	2	—	2	1	—	1	—	1	6	5
N.E.	Myope Centre ..	Mixed	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1
		TOTALS ..	21	11	14	10	18	10	22	8	17	9	16	4	12	12	8	6	20	12	27	7	34	7	24	5	233	101
	TOTAL	CASES NOTIFIED ..	32	17	18	23	31	18	34	17	29	18	22	7	20	17	22	15	28	25	43	12	46	15	33	12	358	196