

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

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Metropolitan Borough of Hackney.

REPORT
ON THE
SANITARY CONDITION

of the Metropolitan Borough of Hackney
FOR THE YEAR 1930

BY

G. H. DART,

M.D., M.R.C.P., Edin.; D.P.H., D.T.M. & H. Camb.,
Barrister-at-Law.

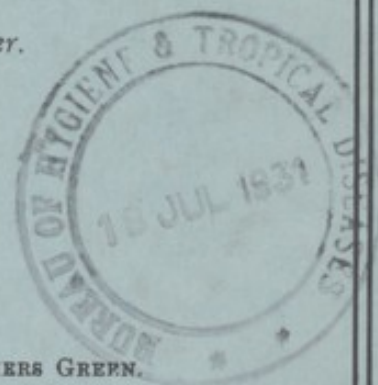
Medical Officer of Health.

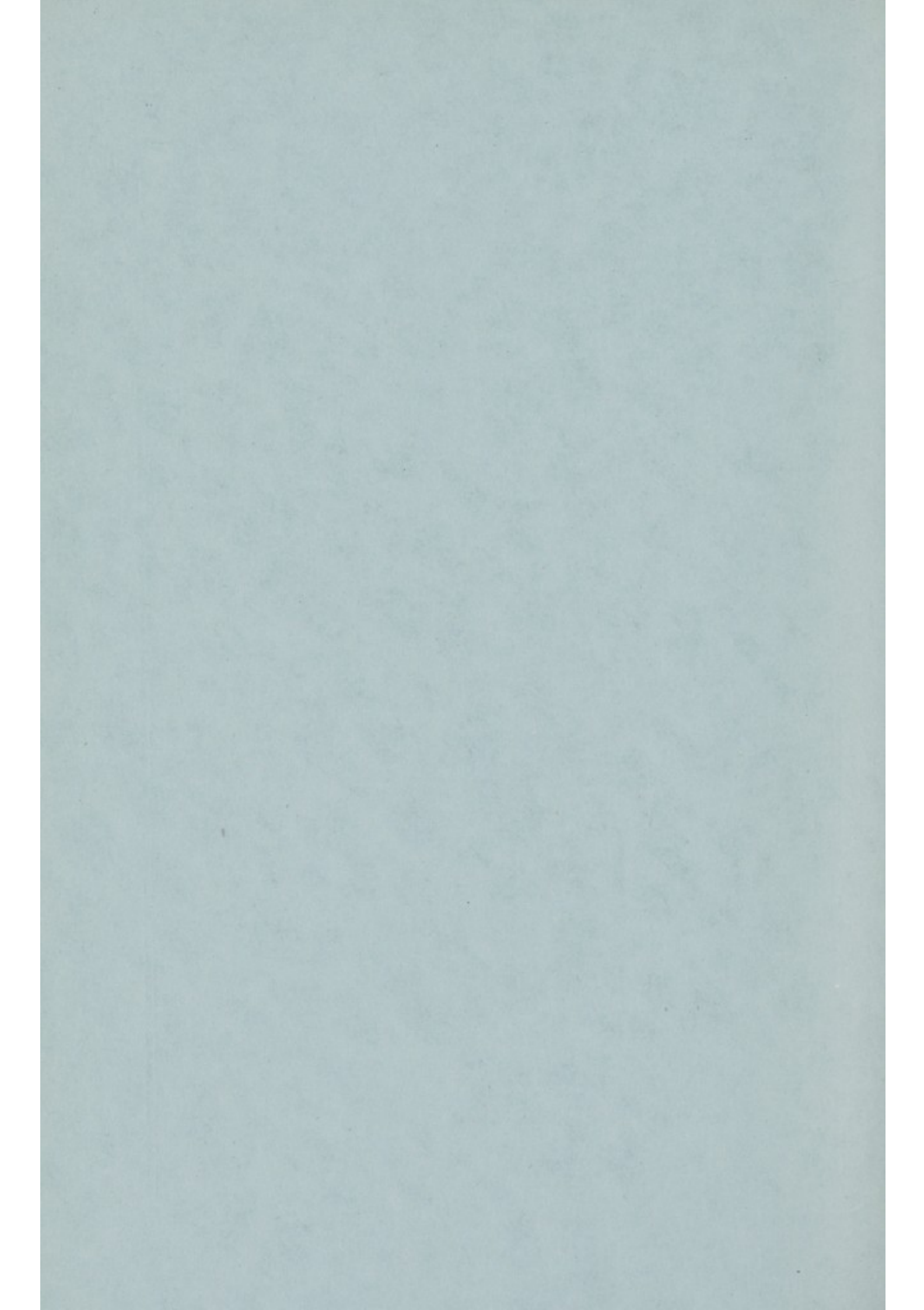
Administrative Maternity and Child Welfare Officer.

Administrative Tuberculosis Officer.

CRUSHA & SON, LTD.,
TOTTENHAM, ENFIELD, WOOD GREEN AND PALMERS GREEN.

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1931.



Metropolitan Board of Health

REPORT

SANITARY CONDITION

FOR THE YEAR 1850

G. H. DART

Sanitary Engineer and Surveyor

London

Printed by J. G. & J. S. Smith, Stationers

15, Abchurch Lane, London, E.C.

1851

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PUBLIC HEALTH DEPARTMENT.

Public Health and Maternity and Child Welfare Committees.

Public Health Committee.

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Chairman—Councillor G. A. SMITH.

Vice-Chairman—Alderman T. CHAPMAN, J.P.

Councillor ASHDOWN, Mrs. F. M.	Councillor MAYNARD, F.
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„ BOTHWAY, Mrs. N. G.	Alderman RUSHBROOKE, T., J.P., M.A., M.R.C.S., L.R.C.P.
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„ HART, A. T.	Councillor SEYMOUR, H. C.
„ HUGHES, W.	„ TRITT, T.
„ LANGTON, J., F.R.G.S.	„ WALDMAN, M. E.
„ LAYLAND, H. (Lieut., T.F.R.)	„ WALKER, Mrs. R. D., J.P.
„ LUSHER-PENTNEY, G. J., J.P.	

Maternity and Child Welfare Committee.

Consisting of Members of the Public Health Committee, and three persons being women and not Members of the Council.

Chairman—Councillor (Mrs.) N. G. BOTHWAY.

Vice-Chairman—Councillor (Mrs.) F. M. ASHDOWN.

Members of the Committee—as set out above with the addition of
Miss B. W. Payne, Mrs. N. Philp, and Mrs. T. Smith.

STAFF OF THE PUBLIC HEALTH DEPARTMENT.

Sanitary Inspectors.

G. F. HIGH.	G. FOWLER.
A. J. BOBBITT (Cowhouses, Milk-shops, Slaughterhouses, etc.)	E. A. HILLIER.
H. BODY.	C. F. LONG.
R. J. SHEPPARD.	J. E. TRUSLOVE.
R. H. BEW.	J. NIGHY (Workshops, etc.).
W. PEVERETT (Food Premises).	W. E. GALVIN.
W. C. VOBÉ.	H. K. SMITH (House-to-House Inspection).
E. S. CROOK (also Canal Boats Inspector).	G. T. ALEXANDER.
W. GOLDSWORTHY.	W. A. BROWN (House-to-House Inspection).
A. SADLER.	Miss MABEL PORTLOCK (Outworkers' Premises).

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Miss M. CHITSON.	Miss N. V. HOBBS.
Miss A. K. ROCHE.	Miss E. E. WILLIAMSON.
Miss D. F. VIDAL.	Miss G. S. THOMAS.
Miss M. K. COCKLE.	Miss J. D. KIMPSFORD.
Miss S. E. LOVE.	Miss N. BURR.

Miss M. HOWMAN.

Miss G. M. SERVANTE	} Tuberculosis cases.
Miss M. CLARKE	

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J. D. ROSS, L.R.C.P., L.R.C.S.	M. ANDERSON, M.R.C.S., L.R.C.P.

Deputy Public Vaccinators.

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A. E. ROSS, M.R.C.S., L.R.C.P.	JAMES TURTLE, M.R.C.S., L.R.C.P.

Vaccination Officers.

H. F. BALLARD.

W. R. EVE.

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EILEEN S. P. BARLOW, M.B., CH.B.	MONTAGUE SMITH, M.R.C.S., L.R.C.P., Anaesthetist.
REGINALD BROWN, M.R.C.S., L.R.C.P.	
DOROTHY B. GERE, M.R.C.S., L.R.C.P.	H. C. MIDDLETON, L.D.S., R.C.S.(Edin.), Dental Surgeon.
EVA MORTON, M.R.C.S., L.R.C.P.	
BEATRICE M. SMITHIES, M.R.C.S., L.R.C.P., D.P.H.	

Consultant Gynaecologists and Obstetricians.

LADY FLORENCE BARRETT, M.D., M.S.

MARGARET BASDEN, M.D., F.R.C.S.

Deputy Medical Officer (Infectious Diseases).

A. M. BARLOW, M.R.C.S., L.R.C.P.

Tuberculosis Dispensary Medical Officers (Metropolitan and City of London Hospitals).

F. W. HAMILTON, M.D., M.R.C.P.

H. TYLFORD HOWELL, M.R.C.S., L.R.C.P.

Diphtheria Immunisation Clinic Medical Officer.

F. PORTER SMITH, M.R.C.S., L.R.C.P.

Joint Public Analysts.

LEO TAYLOR, F.I.C.

D. T. LUCKE, B.SC., A.I.C.

Disinfecting Station Superintendent and Caretakers.

E. G. HASLER.

Mrs. E. HASLER.

*Central Maternity and Child Welfare Clinic Caretaker—W. E. JOLLY.**Mortuary Keeper—S. W. BOXELL.**Messenger—H. STOREY.**Clerical Staff.*

P. A. HITCH (Chief Clerk).

V. R. WELHAM.

J. C. MINTER.

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H. R. SANDFORD.

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A. YOUNG.

C. J. HAYNES.

T. CONINGTON.

Medical Officer of Health.

G. H. DART,

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Barrister-at-Law.

Metropolitan Borough of Hackney

REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1930.

PUBLIC HEALTH DEPARTMENT,
TOWN HALL, HACKNEY, E.8.

*To the Mayor, Aldermen and Councillors
of the Metropolitan Borough of Hackney.*

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to submit, in accordance with the instructions of the Ministry of Health, the Annual Report on the health of the Metropolitan Borough of Hackney for the year 1930.

The Ministry of Health has given instructions that the Annual Report for 1930 shall be in some measure a "*Survey Report*," describing the measure of progress and the extent and character of the changes made during the *preceding five years* in the Public Health Services of the Borough, "together with any further action of importance contemplated by the Local Authority or considered desirable by the Medical Officer of Health."

There is from time to time mention in the Press of proposals for setting up Governmental enquiries, "axe" committees and other measures directed towards national economy. I am not, of course, able to estimate what the Borough can afford in the way of public health expenditure, but I am entirely convinced that the present expenditure in this Borough is not only necessary but is really inadequate if viewed solely from the point of view of the preventable disease, suffering and ill-health in the Borough, and that is the only point of view with which I am concerned as Medical Officer of Health.

The aims which the Public Health Services have in view are that every useful member of the community shall have a healthy home, that food shall be clean and wholesome, that an adequate medical service, including specialists' services, shall be available

for those in need, that there shall be instruction in the elementary laws of health and that epidemic and preventable diseases which account for so terrible a waste of life, health and national resources shall be prevented. No doubt a very considerable increase in medical knowledge is necessary before such conditions as rheumatism, measles, influenza and whooping cough follow cholera, plague and typhus into the category of diseases which no longer cause suffering and death in this country. But even with the limited resources at the disposal of the Local Authority, and our real ignorance as regards such diseases as measles, a great deal can be done, and in the year 1930 the Council's scheme for co-operation with the School Authorities as regards measles showed a very encouraging return for the expenditure incurred, as can be seen from the description on page 104.

Particularly is extension required in the services for the care of children between the ages of one and five years. Since the age period between one and five does not receive sufficient attention, considerable damage is done before children attend school. *Medical Inspection of Children* below school age reveals many defective conditions which, generally speaking, will not receive attention until school age is reached. This inspection can be conveniently carried out in clinics held in connection with the usual maternity and child welfare work. To quote from a report concerning two such clinics recently opened:—

“Out of 362 children examined in these centres, there were discovered 62 cases of dental caries, 36 of tonsils and adenoids, 36 of rickets, 5 of ear discharge, 15 of impetigo, 14 of bronchitis, 18 of anorexia, 14 of malnutrition and 14 of debility. Mortality tables of children of this age further show that quite a considerable number die from accident, scalds and burns, in addition to the ordinary varieties of diseases from which children of all ages suffer, and which are obviously preventable.”

Clinics of this description are required in Hackney. *Joint Treatment Centres* are required for these children and school children. Such a centre is already in action at Woolwich and in the absence of such centres years may pass before treatment is obtained for children of the pre-school period. *Nursery Schools* are particularly necessary in crowded districts where the only playground is the sidewalk and gutter. Since 1923 the Council have been endeavouring to bring about the establishment of nursery schools in the Borough. On the 10th April, 1923, the Council sent a deputation to attend a conference at Islington on the subject, and at various times since that date the matter has been considered. On March 6th, 1929, the Ministry of Health informed the Borough Council, who wished to establish such a school, that the County Council is the responsible authority in this respect, and the County Council was accordingly informed that the Borough Council were prepared to co-operate with them in the establishment of a nursery

school and to assist in any endeavour to find a site, and also to consider contributing to the cost, subject to the consent of the Minister of Health, and that the Borough Council are willing to help in any other way possible. The County Council have not yet arrived at a final decision on the matter. *The Maternity and Child Welfare Centres* should be improved. As already pointed out in previous Reports, it is very rarely that an existing building can be adequately adapted and equipped. To be thoroughly satisfactory, premises should be built for the purpose, and the use of church halls merely hired for the occasion cannot be satisfactory. The work at the specially adapted building at Lower Clapton Road is carried out under infinitely more satisfactory conditions than can be possible at the other centres. Many boroughs have now built premises exclusively for maternity and child welfare work. The Council have now the opportunity, in connection with their clearance schemes, to build centres of this description which need not be expensive buildings. On January 15th, 1930, the Council agreed to rent premises for this purpose to be erected by the County Council when the Northwold Road area had been cleared. It is to be hoped that the Council will build maternity and child welfare centres when clearing other unhealthy areas in the Borough. *The Council have agreed to a most comprehensive scheme of clearance and rehousing to which I will refer later, and the wonderful opportunity thus afforded of establishing a complete and adequately equipped maternity and child welfare service should not be forgotten in this connection.* It is hard to give by a statement only of figures and diseases an adequate impression of the value of the centres; full statistics will be found later on in the Report. Many letters are received expressing appreciation of the centres; the following, dated December 12th, 1930, has a very human ring about it and will please those interested in this work; it expresses, I believe, the gratitude felt by many for the assistance given by the Council:—

“12th December, 1930.

“I am writing this letter to you to thank you for your great kindness in all you have done for me for giving me my teeth and I must tell you it was completely out of my reach to ever think of getting them although I knew quite well that the terrible teeth I had was causing all my illness and bad health and I cannot hardly realise that I have got them they are a lovely set I look ever so much better and I am hoping that my health will now get better also. Well I must again thank you God knows what some of us poor mothers would do at times without the welfare centres it is one of our greatest helps in our difficulties with our children and ourselves.

“I remain Yours

“Most Gratefully,

_____.”

There can be no doubt that not only the material assistance but the help and encouragement given from the centres is often a matter of great importance to families living under conditions of

great stress and anxiety. A very great step forward has been taken by the Council recently in adopting a scheme for the prevention of maternal mortality, in spite of the fact that until the block grant is reviewed no additional assistance will come from the Ministry of Health. The scheme put forward by the Maternity and Child Welfare Committee covered all points suggested by the Ministry of Health in its Memorandum and Circular of December 11th, 1930, on this subject, except that dealing with examinations by medical practitioners which raises many debatable points, and was adopted entirely by the Council. A full description of the scheme will be found on page 66.

The inclusion of percentage grants for health services in the block grant under the Local Government Act was viewed with particular dismay by the Associations concerned with maternity and child welfare, as it was felt that any move in the direction of reducing health service expenditure would be assisted by this procedure. The Association of Infant Welfare and Maternity Centres adopted a resolution which stated that the Association viewed with grave apprehension the proposal to substitute block grants for the percentage grants "believing that in their present form the provision would not make allowance for much needed expansion within the next five years." The Metropolitan Boroughs' Standing Joint Committee also concurred in this view, and agreed on February 4th, 1929, to inform the Ministry accordingly.

The Public Health Services, whether County or Borough, are, however, partnership services as regards expenditure. Indeed as regards tuberculosis only one quarter of the Tuberculosis Dispensary expenditure in reality falls directly on the rate, as three-quarters is returned in contribution from the Ministry of Health and the London County Council. There is also a tendency to forget that one-half of the expenditure on salaries of sanitary staff, other than clerical, is still a contribution from Government funds in addition to the block grant.

The estimate of the amount to be provided out of the rate for this department during the year 1931-32, omitting the maternal mortality scheme referred to previously, is stated to be £36,908, of which £11,689 is allocated to maternity and child welfare. This amounts to a rate of approximately 4½d. for public health and 2d. for maternity and child welfare. It was mentioned in a report to a Committee in 1921, by the Electrical Engineer, that if every householder in Hackney could be induced to burn his waste paper and other inflammable rubbish, instead of putting it in the dustbin for removal to the destructor, the rates (at that time) could be reduced by 3½d. in the £1. Of course prices have considerably altered since that date but the comparison of cost is interesting.

As regards the maternity and child welfare expenditure, since the last percentage grant from the Ministry of Health was received in the financial year 1929-30 and amounted to £5,148, and since an equal amount must be contained in the block grant, the actual amount from the rate for the current financial year is not £11,689, but £6,541. In other words the 1929-30 figure of £5,148 should be compared against £6,541 for 1931-32, not against £11,689, the comparison recently given in Council in reply to an enquiry, and reported in the local Press on February 27th, 1931. On the other hand the new scheme for the prevention of maternal mortality, which amounts during a full financial year to £1,725, will fall directly on the rate, and contribution will not be received until the block grant is reconsidered by the Ministry of Health.

Prior to 1918 the expenditure on maternity and child welfare was nominal. There was, indeed, no expenditure whatever in pre-war years. In fact, the Maternity and Child Welfare Act, 1918, may be considered the foundation of the present service, though a certain amount of work was done under the Notification of Births Act. In 1918 the infantile death rate was 111, in 1929 it had fallen to 57 and in 1930 to 49 per 1,000 births. If the rate of crippling to deaths is three to one, as stated in a Governmental Enquiry Report on Infantile Mortality, there must have resulted a considerable saving in that direction also. It is also an undeniable fact that a high infantile mortality rate carries with it a high mortality rate during the 1 to 5-year age period.

It is unhappily true that only since Government financial assistance has been forthcoming were appreciable steps taken to deal with many of the public health needs that are now receiving attention. The Tuberculosis Regulations of 1912 gave wide powers to Local Authorities, but it was several years later and after a scheme of Government contribution had been arranged, that the Tuberculosis Dispensaries were established. Prior to the system of Government contributions to housing, nothing of any importance was contemplated as regards large areas of worn-out housing in this Borough. A very great deal was done as regards nuisances and the closing of houses, but it can fairly be said that the Housing of the Working Classes Acts, and the Housing and Town Planning Act, 1909, in no way stimulated Local Authorities to deal with overcrowding and slum clearance on an adequate scale; the difficulties were too enormous. For instance, Dr. King Warry "Represented" Duncan Square as an Unhealthy Area in 1900 and his "Representation" was apparently simply ignored. Recent Housing Acts, however, endeavoured to remove the difficulties of the Local Authorities from the financial aspect and this has resulted in the preparation of housing and clearance schemes. The principle of direct Government contribution, according to work done, has

in fact been extended from time to time as regards housing; indeed, Circular 1138 of August 18th, 1930, of the Ministry of Health, states with regard to the Housing Act, 1930,

"To meet the economic difficulty of rehousing the poorest inhabitants of the slums at rents which they can afford, increased financial assistance on a new basis has been provided. This will be available in aid of the expenses of the Local Authority in 'rehousing' persons displaced not only from clearance and improvement areas but also from individual houses which are demolished."

"... It is contemplated that Local Authorities will take full advantage of the financial assistance under the Act of 1924 to meet their ordinary housing needs, while the assistance which the new Act provides will enable them to meet the economic difficulty which at present prevents a proportion of the dwellers in unhealthy areas and in insanitary houses from moving to better homes."

Some of the difficulties that have been experienced will be found described in my report on Housing on page 122. It will also be seen from my report that a really adequate programme of "Clearance" schemes for the Borough has been approved by the County and Borough Councils, and under the Housing Act, 1930, rehousing accommodation must equal that demolished. Not only will the demolition of so much worn-out and badly planned houses be a great improvement to the Borough, but the provision of adequate decent housing will enable parents to separate their elder children according to sex and to avoid the necessity in some cases of keeping growing children in their parents' bedrooms, which it is thought often results in much emotional damage to children, and the mental strain which must often verge on the intolerable resulting from several families living in overcrowded conditions in houses containing sanitary and other conveniences for only one family; the elimination of these and other evils must mean improvement in health and a better outlook generally for the rising generation.

On December 17th, 1930, the Housing Committee reported to the Borough Council that the London County Council had agreed to include in the provisional programme to be submitted to the Minister of Health under the Housing Act, 1930, the Duncan Square, Warburton Square, Morning Lane and Northwold Road areas, which I had represented on November, 26th 1929, under the 1925 Housing Act, the County Council having agreed to deal with these areas, but action having been held up by the new Housing legislation. The Borough Council also agreed, on the recommendation of the Housing Committee, to deal with Abbot Street, Banister Street, Berkshire Road, Broadway, Clarence Terrace, East Street, Elsdale Street, Fulham Place, High Hill Ferry, Middlesex Wharf, Nisbet Street, Otley Terrace, Pear Tree Court and Queen's Court areas as Clearance Areas under the Housing Act, 1930.

It has always been a matter of surprise to me that the "Vital Statistics" are so remarkably good even in the worst areas. A great deal is due, I consider, to the excellent work of the staff of the Public Health Department, and fortunately it is no longer necessary to produce a long mortality list as proof that wretched, worn-out, badly planned houses are unhealthy.

The fact that during the past five years a total of 47,349 notices (Intimation and Statutory) have been served to enforce the abatement of nuisances under the Public Health (London) Act, and that police court proceedings have been taken in 305 instances points out the value of the work of the department in neutralising to some extent the effects of the poor housing conditions. The work arising from sanitary inspection can only be realised by carefully considering the tables of inspections of food premises, sampling, drain testing and other details set out in the body of the report. Thus during 1930, for instance, no fewer than 289 premises have been cleared of rats, 636 rooms sprayed and otherwise cleared of vermin, 143,452 articles disinfected at the Disinfecting Station, and 3,832 adults and children cleansed from parasitic infections, by the staff of the Public Health Department. At the Isolation shelter 650 persons—166 men, 160 women and 324 children—were accommodated during the year to permit of their homes being disinfected and cleaned.

In conclusion, I have to thank the Public Health and Maternity and Child Welfare Committees for their support and kind consideration, and I also express my appreciation of the manner in which my staff have performed their duties.

I am,

Yours obediently,

G. H. DART,

Medical Officer of Health.

Comparative Table, Year 1930.

Estimated Population.		Birth-rate.		Death-rate.		Infantile Mortality Rate.	
Wandsworth ..	346,700	City of London ..	8.3	Lewisham	9.7	Chelsea	40
Islington ..	319,800	Westminster ..	10.5	Greenwich	9.99	Woolwich	42
Lambeth ..	294,400	Holborn ..	10.5	Poplar ..	10.5	Lewisham	42
Camberwell ..	256,900	Hampstead ..	11.8	Wandsworth ..	10.59	Greenwich	45
Stepney ..	241,800	St. Marylebone ..	12.1	St. Marylebone ..	10.6	Hackney	49
Hackney ..	214,400	Chelsea ..	12.7	Fulham ..	10.8	Camberwell ..	51
Lewisham ..	207,900	Wandsworth ..	13.1	Woolwich ..	10.9	Stoke Newington ..	54
St. Pancras ..	203,900	Stoke Newington ..	14.6	Camberwell ..	10.9	Battersea ..	54
Southwark ..	178,500	Kensington ..	14.6	Hackney ..	11.1	Wandsworth ..	55
Kensington ..	175,800	Camberwell ..	14.8	Bethnal Green ..	11.1	Poplar ..	55
Battersea ..	161,800	Lewisham ..	15.1	Stepney ..	11.2	Lambeth ..	56
Poplar ..	160,000	Paddington ..	15.1	Deptford ..	11.3	Fulham ..	57
Fulham ..	153,700	Fulham ..	15.3	Battersea ..	11.4	Southwark ..	57
Paddington ..	142,800	Greenwich ..	15.3	Hampstead ..	11.5	Hampstead ..	58
Woolwich ..	141,600	St. Pancras ..	15.4	Westminster ..	11.7	Westminster ..	59
Hammersmith ..	136,900	Woolwich ..	15.5	Hammersmith ..	11.7	Bethnal Green ..	60
Westminster ..	125,800	Lambeth ..	15.7	St. Pancras ..	11.9	St. Pancras ..	60
Bermondsey ..	113,800	Deptford ..	15.9	City of London ..	12.0	Deptford ..	61
Deptford ..	111,000	Hammersmith ..	15.9	Lambeth ..	12.0	St. Marylebone ..	62
Bethnal Green ..	110,500	Battersea ..	16.4	Islington ..	12.1	Finsbury ..	63
St. Marylebone ..	102,400	Hackney ..	16.4	Stoke Newington ..	12.2	Bermondsey ..	63
Greenwich ..	99,900	Southwark ..	16.8	Shoreditch ..	12.2	Hammersmith ..	64
Shoreditch ..	99,710	Islington ..	17.4	Chelsea ..	12.5	Shoreditch ..	65
Hampstead ..	84,830	Stepney ..	17.4	Southwark ..	12.5	Kensington ..	69
Finsbury ..	70,980	Bethnal Green ..	17.7	Paddington ..	12.6	Islington ..	70
Chelsea ..	62,680	Bermondsey ..	18.1	Kensington ..	12.7	Stepney ..	76
Stoke Newington ..	50,040	Poplar ..	19.1	Holborn ..	12.7	Paddington ..	78
Holborn ..	33,380	Finsbury ..	19.4	Bermondsey ..	13.1	Holborn ..	89
City of London ..	10,980	Shoreditch ..	20.1	Finsbury	13.8	City of London ..	89
County of London .. 4,417,900		15.7		11.4		59	

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

The Metropolitan Borough of Hackney covers an area of 3,292·389 acres (land and inland water 3,287·192 acres and tidal water 5·197 acres), and is divided into four Registration Sub-districts—North, Central, South-West and South-East Hackney.

POPULATION.

The population of the Borough, as ascertained at the last Census (1921), was 222,142. The Registrar-General has estimated that at mid-1929 the population was 214,400. This latter figure gives a density of population of 65·1 persons per acre. The following table shows the estimated population and density of population of London, Hackney and each of the Registration Sub-districts of the Borough:—

	London.	Hackney.	Registration Sub-district.			
			North.	Central.	South-west.	South-east.
Estimated population ..	4,417,900	214,400	54,280	50,690	54,980	54,450
Area in acres	74,816	3,292	1,083	858	586	765
Persons per acre ..	59·0	65·1	50·1	59·0	93·8	70·6

PHYSICAL FEATURES AND GENERAL CHARACTER OF THE AREA.

The Borough varies in elevation between 16 feet and 110 feet above ordnance datum. The north-west portion lies on yellow clay, and there is a considerable area on a bed of gravel and sand of varying depths. Other portions are on brick earth and in the Lee Valley there is a bed of alluvial gravel. Underlying the whole of the Borough is the London blue clay which in a few places appears near the surface.

Number of inhabited houses (Census 1921) ..	33,495
Number of inhabited houses (end of 1930)	
according to Rate Books	35,514
Number of families or separate occupiers (1921)	56,020
Rateable value (December, 1930) ..	£1,342,573
Sum represented by a penny rate	£5,816

SOCIAL CONDITIONS.

The population is mainly working class and the chief occupations are the manufacture of boots, shoes, cabinets and pianos and the production of tailored clothes. The factories and workshops are in very good condition, and the sanitary arrangements are kept under constant supervision.

REGISTER OF RAINFALL DURING THE YEAR AT CLAPTON POND.

Month.	Total rainfall.	No. of days on which rain fell.	Heaviest fall.
	ins.		ins.
January	2.25	16	0.31
February	1.06	6	0.58
March	1.33	10	0.66
April	1.38	15	0.38
May	2.83	18	0.38
June	2.38	7	0.95
July	1.69	12	0.42
August	2.69	16	0.53
September	3.18	17	0.66
October	0.83	14	0.12
November	3.83	17	0.59
December	1.74	16	0.38
	25.19	164	..

EXTRACTS FROM VITAL STATISTICS OF THE YEAR.

Total. M. F.

Live Births:—

Legitimate .. 3,363 1,767 1,596 } Birth-rate 16.4

Illegitimate .. 152 73 79 }
Still Births .. 141 78 63 } Rate per 1,000 total
births 17.2

Deaths 2,381 Death-rate 11.1

Percentage of total deaths occurring in public institutions .. 56.7

Number of women dying in, or in consequence of, childbirth:—

From Sepsis 2 From other causes .. 4

Death-rate of Infants under one year of age per 1,000 live births:—

Legitimate, 47 .. Illegitimate, 112 .. Total, 49.

Deaths from Measles (all ages) 45

,, ,, Whooping Cough (all ages) 4

,, ,, Diarrhoea (under 2 years of age) .. 26

MARRIAGES AND MARRIAGE-RATES.

During 1930 there were 1,970 marriages solemnised in the Borough of Hackney. The rate for persons married during this period is therefore 18.4 per 1,000 of the population.

The following table gives the number of marriages and marriage-rates for the Borough of Hackney and London during the years 1920-30:—

Year.	Borough of Hackney.		London.
	Marriages.	Marriage rate.	Marriage rate.
1920	2,380	21.1	21.7
1921	2,358	21.0	19.6
1922	2,212	19.6	18.3
1923	1,971	17.4	17.3
1924	2,024	17.8	17.3
1925	2,039	17.8	17.2
1926	1,888	16.5	17.2
1927	2,014	17.9	17.9
1928	2,052	18.8	18.6
1929	2,071	19.3	15.8
Average, 1920-1929	2,000	18.7	18.0
1930	1,970	18.4	19.4

BIRTHS AND BIRTH-RATE.

The births registered in the Borough of Hackney during the year 1930 numbered 4,238, of which 2,197 were males and 2,041 females. The total shows a decrease of 29 compared with the number registered during 1929, but of these a certain number must be transferred to other districts, and certain births, which occurred in outlying districts, must be transferred to Hackney in order to get an accurate birth-rate for the Borough. The Registrar-General has supplied the number of these transferable births, viz., 1,279 births to be transferred to other districts and 556 to Hackney. After these necessary corrections have been made, the correct total of registered births amongst Hackney residents is 3,515.

The large number of births occurring in the Borough to women who do not normally reside in the area is accounted for by the fact that the Salvation Army Mothers' Hospital is situated within the district. During 1930 no less than 1,547 infants were born in this Institution. Of this number 1,098 were transferable to districts outside Hackney.

Distributed according to sex and legitimacy the births were as follow:—

	Male.	Female.	Total.
Legitimate	1,767	1,596	3,363
Illegitimate	73	79	152
Totals	1,840	1,675	3,515

The following table shows the births and birth-rates for the year in the Borough and the various Electoral Wards:—

District.	Births.	Birth-rates.
The Borough	3,515	16.4
Stamford Hill	562	16.8
West Hackney	304	16.4
Kingsland	286	15.5
Downs	338	16.7
Clapton Park	659	16.1
Homerton	399	16.7
South Hackney	575	17.6
Hackney	382	15.0

The number of births and the birth-rates in England and Wales, London and Hackney in 1930, together with the rates for the previous four years are shown below:—

District.	1930.		Birth-rates in previous years.			
	No. of Births.	Birth-rate.	1929.	1928.	1927.	1926.
England and Wales ..	649,430	16.3	16.3	16.7	16.7	17.8
London	69,449	15.7	15.7	15.9	16.1	17.1
Hackney	3,515	16.4	15.9	16.0	15.7	17.2

Section 7 of the Births and Deaths Registration Act, 1926, requires the registration of every still-born child. The number of still-births registered in the Borough during the year was 175. Of this total 58 have been allocated by the Registrar-General to other districts, whilst the births of 24 still-born children in outlying areas have been transferred to Hackney. The corrected figure is, therefore, 141. This represents a rate for the Borough of 0.65 per 1,000 of the population, as compared with 0.56 for London as a whole.

The total number of illegitimate births registered in the Borough during the year 1930 was 386, but of these the Registrar-General states that 269 should be transferred to districts outside the Borough, as the mothers were not Hackney residents, and 35 births which took place in other districts should be transferred to Hackney. These corrections having been made, there remain 152 illegitimate births amongst Hackney residents. This is equivalent to an illegitimate birth-rate of 43.2 per 1,000 births.

Notification of Births Act, 1907.—Under the provisions of this Act 4,236 notifications of live births and 131 still-births were received during the year. The following table shows the sources from which the notifications were received:—

Year 1930.	Medical Practitioners.				Midwives.				Parents and others.				Total.			
	Live Births.		Still Births.		Live Births.		Still Births.		Live Births.		Still Births.		Live Births.		Still Births.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Totals ..	276	242	11	11	1674	1499	49	45	269	276	9	6	2219	2017	69	62

DEATHS.

The deaths registered in the Borough during 1930 numbered 2,662, but of these 688 were deaths of non-residents who died *inside* the Borough. There were, however, 407 residents of Hackney who died during the year *outside* the Borough. On making the necessary corrections, the corrected number of deaths amongst Hackney residents is 2,381. This is a decrease of 608 upon the number of deaths occurring during 1929. The general death-rate from all causes for the year 1930 is 11.1 per 1,000 of the population.

The following table shows the number of deaths and the death-rates in England and Wales, London, Hackney and the Registration Sub-districts of the Borough in 1930, and the rates for the previous four years:—

District.	1930.		Death-rates in previous years.			
	No. of Deaths.	Death-rate.	1929.	1928.	1927.	1926.
England and Wales	455,397	11.4	13.4	11.7	12.3	11.6
London	51,184	11.4	13.8	11.6	11.9	11.4
Hackney	2,381	11.1	13.9	11.7	11.6	10.8
Sub-districts:—						
North	616	11.3	12.5	11.5	11.7	10.4
Central	572	11.3	13.9	11.6	11.2	9.7
South-west	612	11.1	14.8	11.9	11.3	11.1
South-east	581	10.7	14.4	11.7	12.1	11.9

Death Rates in Parliamentary Districts.

District.	Area (acres).	Population (estimated).	Death-rate.	Infantile Death-rate.
North	1,294	67,700	11.2	60
Central	918	73,610	11.5	53
South	1,080	73,090	10.5	36
Whole Borough ..	3,292	214,400	11.1	49

The following table shows the deaths and death-rates for the year in the Borough and the various Electoral Wards:—

District.	Deaths.	Death-rates.
The Borough	2,381	11.1
Stamford Hill	402	12.0
West Hackney	206	11.1
Kingsland	272	12.4
Downs	179	10.4
Clapton Park	389	9.5
Homerton	370	10.7
South Hackney	247	11.3
Hackney	316	11.8

Deaths in Public Institutions.—There were 1,689 deaths in public institutions in the Borough during 1930; of these 681 were residents of other districts, and the remaining 1,008 were residents of Hackney.

The following lists give the names of the institutions within the Borough receiving persons from both within and without the Borough, and also the institutions outside the Borough, receiving sick and infirm persons from the Borough, with the number of deaths in each institution during the year:—

Number of deaths in Institutions within the Borough.

Name of Institution.	Persons belonging to the Borough.	Persons not belonging to the Borough.	Total Deaths.
Brooke House, Upper Clapton Road ..	1	9	10
Eastern Fever Hospital, Homerton ..	25	105	130
French Hospital, Victoria Park Road ..	3	3	6
German Hospital, Dalston	65	85	150
Hackney Hospital, Homerton	735	182	917
Hackney Central Institution, Homerton ..	91	32	123
Metropolitan Hospital, Kingsland ..	41	113	154
Nursing Home, 46, Amhurst Park ..	3	—	3
Do. 7, Dunsmure Road	—	—	—
Do. 11, Powell Road	5	1	6
Do. 18, Southwold Road	—	—	—
Do. 4, Navarino Road	—	—	—
Do. 2, Queensdown Road	1	1	2
Do. 122, King Edward Road ..	2	1	3
St. Francis Home, Richmond Road ..	—	1	1
St. Joseph's Hospice, Mare Street ..	25	123	148
St. Mary's Home, 153, Stamford Hill ..	1	—	1
Salvation Army Maternity Hospital, Lower Clapton Road	10	24	34
Salvation Army Home, 9, Amhurst Park ..	—	—	—
Do. 181, Amhurst Road	—	—	—
Do. 122, Lower Clapton Road ..	—	—	—
Do. 55, Downs Road	—	1	1
Maternity Home, 6, Pembury Road ..	—	—	—
	1,008	681	1,689

*Deaths of Persons Belonging to the Borough in Various Institutions
Outside the Borough.*

Asylums.

Bexley Mental	5	Leavesden Mental.. .. .	2
Camberwell House	1	Metropolitan, Caterham	2
Claybury Mental	12	Tooting Bec Mental	11
Darenth Training Colony	2	West Park Mental	3
Hanwell Mental	4	Miscellaneous	1
Horton Mental	3		
Hundred Acres	4		— 50

Hospitals for Infectious Diseases.

Joyce Green, Dartford	1	South-Eastern, Deptford.. .. .	1
London Fever	1	Southern, Dartford	1
North-Eastern, Tottenham	13	Western, Fulham	2
North-Western, Hampstead	2		— 24
Park, Lewisham	3		

General Hospitals.

Battersea	1	Royal Northern	3
Charing Cross	1	St. Bartholomew's	16
Guy's	2	St. George's	1
Hampstead.. .. .	2	St. Mark's	1
King's College	1	St. Peter's	3
London	40	St. Thomas's	1
Middlesex	8	University College	4
Mildmay Mission	5	Westminster	5
Mildmay Memorial	1	Willesden	1
Prince of Wales's, Tottenham	15		— 118
Royal Free.. .. .	7		

Special Hospitals.

Brompton	2	Lambeth	1
Cancer	1	London Jewish	5
Central London Throat and Ear.. .. .	3	National, Queen's Square	2
Children's, Great Ormond Street	7	Northern	1
City of London Maternity	3	Queen Mary's, Wandsworth	1
Colindale	6	Queen Mary's, Carshalton	3
Downs	1	Queen's, Hackney Road	27
East Ham Memorial	1	Royal London Ophthalmic	1
Elizabeth Garrett Anderson	1	St. Columba's, Hampstead	3
Grove Park.. .. .	5	St. George's Home	1
High Wood	1	St. Luke's, Paddington	1
Home for Jewish Incurables	4	Victoria Park	17
Home Hospital for Women, Stoke Newington	4	West End	1
Homeopathic	2	Whipps Cross	1
Hospital for Women, Westminster	1	Miscellaneous	2
Infants, Vincent Square	4		— 113

Other Institutions.

Bethnal Green Hospital	4	24, North Side, Wandsworth ..	3
Friern Barnet Infirmary	5	St. Leonard's Hospital, Shore-	
North Middlesex Hospital,		ditch	2
Edmonton	3	77a, Highgate Hill	1
8, Alexandra Road, Stoke New-		24, Underwood Street, Stepney..	1
ington	2	Miscellaneous Institutions ..	46
Bancroft Lodge	1		— 75
4, Dorset Square	1		
107, Nightingale Road, Wands-			380
worth	6		

INFANTILE MORTALITY.

During the year there were 3,515 births and 174 deaths of children under the age of twelve months in Hackney. These figures give an infantile mortality rate (deaths of infants under twelve months of age in relation to each 1,000 births) of 49.

The following is a table of the infantile deaths and death rates in England and Wales, London and Hackney in 1930, together with the infantile death rates in five-year periods.

District.	1930.		Infantile Mortality Rates in five year periods.	
	Number of deaths of children under 1 year of age.	Infantile Mortality Rate.	1926-30.	1921-5.
England and Wales	38,790	60	68	76
London	4,191	59	62	70
Hackney	174	49	59	64

The following table shows the infant deaths and infantile mortality rates for the year in the Borough and the various Electoral Wards:—

District.	Infant Deaths.	Infantile Mortality rate.
The Borough	174	49
Stamford Hill	34	60
West Hackney	16	52
Kingsland	19	56
Downs	16	56
Clapton Park	31	47
Homerton	26	45
South Hackney	18	47
Hackney	14	35

The causes of death are set out in the following table:—

Cause of Death.	Under 24 hrs.	1 day to 1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 4 weeks.	1-3 months.	3-6 months.	6-9 months.	9-12 months.	Total.
Measles	..	..	..	..	..	..	..	..	1	8	9
Scarlet Fever	..	..	..	..	..	..	..	..	..	..	..
Whooping Cough	..	..	..	..	..	..	..	..	1	..	1
Diphtheria	..	..	..	..	..	..	1	..	1	..	2
Erysipelas	..	..	..	..	..	..	..	..	1	..	1
T.B. Meningitis	..	..	..	..	..	..	..	..	..	2	2
Meningitis	..	..	..	..	..	..	..	..	..	2	2
Convulsions	..	..	..	..	..	..	4	1	..	..	5
Bronchitis	..	..	..	..	..	..	..	2	..	2	4
Pneumonia	..	..	1	3	1	5	6	5	10	10	36
Diarrhoea	..	..	..	..	..	..	6	14	4	..	24
Syphilis	..	..	..	..	..	..	..	..	..	..	..
Suffocation (overlying)	..	..	..	..	..	..	..	..	..	..	..
Injury at Birth	..	2	..	..	..	2	..	..	..	..	2
Atelectasis	1	1	1	..	..	3	..	..	..	..	3
Congenital defects	4	9	1	..	..	14	6	..	..	..	20
Premature Birth	16	15	2	..	1	34	3	..	..	..	37
Marasmus	1	..	..	2	..	3	2	..	2	..	7
Other causes	1	10	1	2	..	14	5	..	..	..	19
Totals ..	23	37	6	7	2	75	33	22	20	24	174

MATERNAL MORTALITY.

During 1930 there were six deaths of Hackney women from causes directly connected with childbirth. This represents a death rate of 1·7 mothers per 1,000 births.

The actual causes of death were:—

Puerperal sepsis	2
Cerebral embolism	1
Post-partum haemorrhage	1
Pulmonary embolism	1
Pulmonary oedema	1
Total	6

The maternal deaths and death rates in the years 1926 to 1930 in England and Wales, London and Hackney were as follow:—

				1926.	1927.	1928.	1929.	1930.
England and Wales	{	Number of Deaths ..	..	2,860	2,690	2,920	2,787	—
		Death Rate ..	..	4.1	4.1	4.4	4.3	—
London	{	Number of Deaths ..	..	264	213	260	253	220
		Death Rate ..	..	3.3	2.9	3.6	3.6	3.2
Hackney	{	Number of Deaths ..	..	12	9	15	16	6
		Death Rate ..	..	3.0	2.6	4.3	4.7	1.7

The special arrangements made by the Borough Council for the investigation of maternal deaths and cases of puerperal fever and puerperal pyrexia are described on page 41 of this Report.

SENILE MORTALITY.

The deaths which occurred in Hackney at 65 years of age and upwards during 1930 numbered 1041, and of these 507 were between the ages of 65 and 75 years, 398 between 75 and 85 years, and 136 at 85 years and upwards. The annual mortality rate of persons at 65 years and upwards is 4.8 per 1,000 inhabitants.

VITAL STATISTICS OF WHOLE DISTRICT FOR 1930 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 Number.	Rate.	Number.	Rate.	of Non-residents registered in the District.	of residents not registered in the District.	Under 1 year of Age		At all Ages.	
									Number.	Rate per 1,000 Nett Births.	Number.	Rate.
1	2	3	4	5	6	7	8	9	10	11	12	13
1921	224,142	5,437	4,978	22.2	2,757	12.6	648	471	329	66	2,580	11.5
1922	225,400	5,270	4,743	21.0	3,098	13.7	678	459	344	72	2,879	12.7
1923	226,400	5,065	4,433	19.6	2,561	11.3	554	399	257	58	2,406	10.6
1924	226,900	4,802	4,214	18.5	2,844	12.5	680	424	254	60	2,588	11.4
1925	228,300	4,806	4,093	17.9	2,866	12.5	696	444	268	65	2,614	10.9
1926	228,500	4,763	3,949	17.2	2,751	12.0	678	399	234	59	2,472	10.8
1927	224,700	4,389	3,535	15.7	2,883	12.8	691	419	227	64	2,611	11.6
1928	217,200	4,373	3,477	16.0	2,902	13.3	764	413	236	67	2,551	11.7
1929	214,400	4,267	3,423	15.9	3,302	14.0	771	458	194	57	2,989	13.9
1930	214,400	4,238	3,515	16.4	2,662	12.4	688	407	174	49	2,381	11.1

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

STAFF OF THE PUBLIC HEALTH DEPARTMENT.

As suggested by the Minister of Health in Circular 1,119, the staff engaged in the health service of the Borough Council has been enumerated at the beginning of this Report (see page 8).

PROFESSIONAL NURSING IN THE HOME.

(a) *General*.—This is carried out in the Borough by the Hackney District Nursing Association, which employs a staff, including the Superintendent, of 22 trained nurses who attend at the houses of the sick, at such times as are necessary, to carry out skilled nursing.

(b) *Infectious Diseases*.—Arrangements have existed for some years between the Association and the Borough Council for nursing selected cases of infectious disease, the agreed working being as follows:—

Nursing assistance is granted under the maternity and child welfare scheme in cases of ophthalmia neonatorum, puerperal fever, measles and German measles, whooping cough, epidemic diarrhoea and polio-myelitis.

A grant towards the expenditure under this head is made by the Ministry of Health, and is included in the General Exchequer Contribution under the Local Government Act, 1929.

Except as regards ophthalmia neonatorum and puerperal fever, no attempt is made to grant routine nursing assistance to any but emergency cases; by emergency I mean that only where representation is made by a member of my staff or by medical practitioners that nursing is an urgent necessity is this assistance granted; the scheme does not permit the granting of routine nursing assistance.

Of these diseases ophthalmia neonatorum, puerperal fever and polio-myelitis only are notifiable in this Borough.

This assistance is also granted under the various regulations, etc., to cases of tuberculosis, pneumonia, dysentery, etc., and here again nursing assistance is only granted to those most urgently requiring this assistance.

The agreed amount to be paid to the Nursing Association is 1s. 3d. per visit.

A return is rendered by the Superintendent of the Association, giving the details of the cases nursed as regards name, age, sex, address, disease, number of visits made and amount, if any, of contributions given to the Association by those in charge of the patients nursed.

Where the patients or their relatives are able to make a contribution to the Nursing Association, the amount so contributed is deducted from the amount payable by this Council to the Nursing Association.

Payments by the Borough Council to the Association during the year were as follow:—

	£	s.	d.
Maternity and Child Welfare ..	158	0	9
General Nursing	358	7	9
Total	£516	8	6

The following table shows the number of cases attended and the visits paid by the nurses during the year:—

	No. of Cases Nursed.	No. of Visits Paid.
Infantile Diarrhoea	2	42
Maternity Nursing	101	1,510
Measles	78	912
Ophthalmia Neonatorum	14	265
Pneumonia	141	2,288
Polio-myelitis	1	63
Tuberculosis	39	2,486
Whooping Cough	4	65
Other Ailments	103	1,221
Totals	483	8,852

MIDWIVES.

There are no whole-time midwives employed by the Council. The fees of midwives attending the confinements of necessitous persons are paid as regards cases approved by the Maternity and Child Welfare Committee. There are 99 midwives practising in the Borough.

DISINFECTION.

(a) *Rooms Disinfected.*—During 1930 there were 3,233 rooms fumigated in the Borough by the staff of the Public Health Department. In this total is included disinfections after measles and whooping cough, in addition to those in connection with the present notifiable infectious diseases.

The number of rooms fumigated during each month of the year is set out in the following table:—

January	..	..	..	..	..	378
February	..	..	..	..	..	364
March	..	..	..	..	..	370
April	..	..	..	..	..	311
May ..	..	..	..	..	..	298
June ..	..	..	..	..	..	238
July ..	..	..	..	..	..	247
August	..	..	..	..	..	174
September	..	..	..	..	..	177
October	..	..	..	..	..	255
November	..	..	..	..	..	237
December	..	..	..	..	..	184
Total	..	..	..	..	..	3,233

(b) *Articles of Clothing, Furniture, etc.*—The number of articles under this head disinfected during last year was 143,452. This is an increase of 77,111 upon the number disinfected during 1929, which only amounted to 66,341. A table is here given showing details of the articles disinfected during each month of the year. The increase was the result of the outbreak of smallpox.

Description of Articles.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Totals.
House Linen and Furniture	6405	6375	7554	5983	6052	5529	4708	3084	3351	4776	4053	3337	61207
Men's Clothing	2113	1996	3185	2920	2380	1395	1098	594	591	700	666	699	18337
Women's Clothing	2333	2069	3596	2537	2627	2031	1075	1031	842	1077	799	898	20915
Children's Clothing	844	893	1829	1405	1151	621	550	347	324	629	510	476	9579
Other Articles	3843	3761	6353	4029	4266	3007	1799	758	1832	1654	1034	1078	33414
Totals ..	15538	15094	22517	16874	16476	12583	9230	5814	6940	8836	7062	6488	143452

(c) *Articles Destroyed.*—In addition to the articles disinfected there were 1,381 destroyed on request by the owners. These are set out in the following table:—

Beds	104
Bolsters	31
Mattresses	24
Pillows	121
Sundry Articles	1,101
Total	1,381

(d) *Public Library Books*.—The disinfection of Public Library books may be described under two heads:—

- (i) books from homes in which infectious disease has occurred, and
- (ii) books not known to have been exposed to infection.

During the past year 10,050 books were disinfected, 570 being found in infected houses and 9,480 being collected from the shelves of the Public Libraries.

Isolation Shelter.

During the year 650 persons were admitted to the shelter while their homes were being disinfected. This total consisted of 166 men, 160 women, and 324 children. The cost of maintenance of these persons was £80 9s. 10d.

Cleansing of Persons Act, 1897.

The baths provided by the Borough Council under the above Act, for the cleansing of verminous persons, were in constant use. The total number of baths given during the year was 3,832 (267 to adults and 3,565 to children). This total shows a decrease of 147 upon the number given during 1929.

Of the 3,832 baths given, 735 were sulphur baths for scabies, and 3,097 were hot baths for pediculi. The great majority of the persons presenting themselves for baths were children from the elementary schools in the Borough. The children received 3,565 baths, a decrease of 226 upon the number given during 1929.

The following are the schools from which children were sent to the Cleansing Station, with the number of baths given:—

Schools.	Hot Baths.	Sulphur Baths.
Ballance Road	—	13
Benthal Road	53	20
Berger Road	317	11
Berkshire Road	3	—
College Lane	4	—
Craven Park	18	3
Dalston Central	5	—
Daubeney Road	335	—
Detmold Road	222	—
Eleanor Road	2	4
Gainsborough Road	1	—
Gayhurst Road	47	—
Glyn Road	132	—
Hackney Parochial	116	—
High Street, Stoke Newington	2	—
Holy Trinity	2	—
Homerton Row	383	—
Laura Place	1	—
Lauriston Road	1	—
London Fields	1	—
Mandeville Street	310	10
Millfields Road	37	1
Morning Lane	199	—
North Hackney Central	24	—
Northwold Road	79	5
Percy Road	29	—
Queen's Road	40	—
Ram's	9	—
Rushmore Road	62	—
St. Joseph's	3	—
St. Michael's	26	—
St. Scholastica's	29	—
Shacklewell	1	—
Sidney Road	188	—
Sigdon Road	84	3
South Hackney Central	12	14
The Orchard	186	12
Tottenham Road	8	—
Upton House	27	—
Wilton Road	24	—
Other young children	20	427
Total	3,042	523

The following table gives particulars of the persons who were bathed and cleansed at the Cleansing Station during the year.

				January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Totals.
Receiving Hot Baths	{	Men	.. ..	3	7	4	4	8	1	1	4	5	3	3	3	46
		Women	.. ..	..	..	1	..	..	4	..	2	1	..	1	..	9
		Children	.. ..	167	254	360	116	324	276	297	52	347	339	332	178	3042
Receiving Sulphur Baths	{	Men	.. ..	1	11	10	11	15	12	4	4	2	15	17	12	114
		Women	.. ..	5	12	3	1	7	..	7	23	18	17	3	2	98
		Children	.. ..	7	17	42	27	41	91	123	7	53	38	55	22	523

MORTUARY.

Number of bodies deposited in the mortuary	366
1. To await inquests—	(a) Infectious 1
	(b) Non-Infectious 209
2. To await burial	19
3. Result of death certified by Coroner	137
Number of post mortem examinations made	191

Inquests.

Verdict.	Sex.	
	Male.	Female.
Natural Causes	26	14
Accidental Death	60	39
Suicide	21	21
Open Verdict	13	8
Manslaughter	—	—
Murder	—	—
Misadventure	3	5
Totals	123	87

Table showing nature of Suicidal and Accidental Deaths in the Borough of Hackney during the year.

Nature of Suicide.	No.	Nature of Accidental Death.	No.
Gas Poisoning	18	Shock from Fall	35
Poisoning	14	Street Accidents	34
Drowning	4	Shock from Scalds	6
Cut Throat	4	Gas Poisoning	1
Hanging	1	Asphyxia	7
Shooting	1	Shock from Burns	6
		Others	10
	42		99

LABORATORY FACILITIES.

Arrangements have been made with the Camberwell Research Laboratories and the Royal Institute of Public Health for bacteriological examinations at the following charges:—

Camberwell Research Laboratories.	Diphtheria swabs 3s. 0d., sputa 3s. 0d., blood of suspected enteric fever cases 3s. 6d., plus charges for telephone and telegraph, the Laboratories providing outfits.
Royal Institute of Public Health.	Diphtheria swabs 3s. 0d., sputa 3s. 0d., blood of suspected enteric fever cases 3s. 0d., plus charges for telephone and telegraph. Council charged for outfits.
	Special examinations 1 to 2 guineas.

Full details of bacteriological examinations during the year will be found in the section of this Report dealing with infectious diseases.

The bacteriological examination of foodstuffs is also carried out at these Laboratories as required.

A minimum of 900 samples are purchased annually under the Food and Drugs (Adulteration) Act, 1928, and submitted for chemical analysis to the Joint Public Analysts, Leo Taylor, Esq., F.I.C., and D. T. Lucke, Esq., B.Sc., A.I.C.

Particulars of the samples collected during the year, together with the results of the analyses made, appear on pages 85 and 86.

INSULIN TREATMENT OF DIABETES.

During the year under review the sanction of the Ministry of Health was obtained to the proposal to supply, under Section 77 of the Public Health (London) Act, 1891, insulin for the treatment of poor persons suffering from diabetes. The Minister's approval of the scheme covers an experimental period of twelve months.

Under the arrangements made by the Council, applications for the supply of insulin without cost to the patients are submitted to the Public Health Committee upon receipt of a recommendation from a physician of any hospital.

The hospital authorities are required to submit the following information before payment is made for the treatment given:—

1. The number of doses of insulin administered.
2. Whether any tests were made of the urine or blood of the patient, and, if so, by whom and with what result.
3. The progress of the patient during the period under report.

The cost of the insulin is 1s. 0d. per 100 units.

At the end of the year one patient was being treated at the expense of the Council.

LEGISLATION IN FORCE IN THE AREA.

ACTS OF PARLIAMENT.

Metropolis Management Act, 1855.
 Canal Boats Acts, 1877-1884.
 Sale of Horse Flesh Regulation Act, 1889.
 Public Health (London) Act, 1891.
 Diseases of Animals Act, 1894.
 London County Council (General Powers) Acts, 1894, 1896, 1897, 1902, 1903, 1904, 1907, 1908, 1909, 1920, 1922, 1925, 1926, 1927, 1928 and 1929.
 Public Health Act, 1896.
 Cleansing of Persons Act, 1897.
 Factory and Workshops Acts, 1901-1907.
 Notification of Births Act, 1907.
 Rag Flock Acts, 1911 and 1928.
 Milk and Dairies (Consolidation) Act, 1915.
 Maternity and Child Welfare Act, 1918.
 Rats and Mice (Destruction) Act, 1919.
 Increase of Rent and Mortgage Interest (Restrictions) Acts, 1920 and 1923.
 Milk and Dairies (Amendment) Act, 1922.
 Housing Acts, 1925 and 1930.
 Hackney Borough Council Act, 1926.
 Merchandise Marks Act, 1926.
 Public Health (Smoke Abatement) Act, 1926.
 Births and Deaths Registration Act, 1926.
 Food and Drugs (Amendment) Act, 1928.
 Agricultural Produce (Grading and Marking) Act, 1928.
 Local Government Act, 1929.
 Artificial Cream Act, 1929.

REGULATIONS.

Canal Boats Regulations, 1878.
 Sale of Milk Regulations, 1901 and 1912.
 Sale of Butter Regulations, 1902.
 Regulations under Sec. 1 (1) Rag Flock Act, 1911.
 Public Health (Cerebro-Spinal Fever and Acute Poliomyelitis) Regulations, 1912.
 Borough of Hackney, Underground Rooms, 1914.
 Regulations as to Sale of Shell Fish likely to cause danger to public health, 1915.
 Public Health (Smallpox Prevention) Regulations, 1917.
 Public Health (Acute Encephalitis Lethargica and Acute Polio-encephalitis) Regulations, 1918.
 Public Health (Dried Milk) Regulations, 1923 and 1927.
 Public Health (Condensed Milk) Regulations, 1923 and 1927.
 Public Health (Meat) Regulations, 1924.
 Housing (Consolidated) Regulations, 1925.
 Public Health (Preservatives in Food) Regulations, 1925-1927.
 Public Health (Prevention of Tuberculosis) Regulations, 1925.
 Public Health (Imported Food) Regulations, 1925.
 Public Health (Imported Milk) Regulations, 1926.
 Public Health (Ophthalmia Neonatorum) Regulations, 1926 and 1928.

Public Health (Notification of Puerperal Fever and Puerperal Pyrexia) Regulations, 1926 and 1928.

Public Health (Infectious Diseases) (London) Regulations, 1927.

Agricultural Produce (Grading and Marking) General Regulations, 1928.

Agricultural Produce (Grading and Marking) (Apples and Pears) Regulations, 1929.

Agricultural Produce (Grading) (Potatoes) Regulations, 1929.

Agricultural Produce (Grading and Marking) (Wheat Flour) Regulations, 1929.

Agricultural Produce (Grading and Marking) (Beef) Regulations, 1929.

Agricultural Produce (Grading and Marking) (Malt Flour and Malt Extract) Regulations, 1929.

Agricultural Produce (Grading and Marking) (Broccoli) Regulations, 1930.

Agricultural Produce (Grading and Marking) (Eggs) Regulations, 1930.

Agricultural Produce (Grading and Marking) (Tomatoes and Cucumbers) Regulations, 1930.

Public Health (Tuberculosis) Regulations, 1930.

By-Laws.

Hackney Borough Council.

Prevention of Nuisances, Keeping of Animals and Paving of Yards, 1894.

Water Supply to Water Closets and Cleansing of Cisterns, 1894.

Nuisances by Dogs, 1926.

Street Trading, 1927.

London County Council.

Slaughterhouses, 1891 and 1923.

Ashpits, Manure Receptacles, etc., 1893.

Closing and Filling of Cesspools and Removal of Refuse, 1893.

Removal of Offensive Matter, 1901.

Conveyance of Dead Horses, 1904.

Vendors of Fried Fish, 1914.

Fish Curers, 1914.

Dressers of Fur Skins, 1922.

Rag and Bone Dealers, 1923 and 1928.

Slaughterer of Poultry, 1923.

Houses Divided into Separate Tenements, 1926.

Demolition of Buildings, 1929.

Construction of Drains, etc., 1930.

Construction of Water Closets, etc., 1930.

Offensive Trades.

ORDERS.

Sanitary Accommodation Order, 1903.

Home Office Orders, 1908, 1911, 1912, 1913 and 1929.

Sale of Food Order, Part (3), 1921.

Milk (Special Designations) Order, 1923.

Canal Boats Order, 1923.

Tuberculosis Orders (2), 1925.

Milk and Dairies Order, 1926.

Bakehouses Welfare Order, 1927.

Merchandise Marks (Imported Goods) Orders, Nos. 3 and 5, 1928.

Vaccination Order, 1930.

Factory and Workshops (Transfer of Powers) Order.

Health Education.—Lectures are held at Centres and before various Societies and Associations. Pamphlets and booklets with regard to health and infectious disease are distributed.

HOSPITALS.

As desired by the Minister of Health, a statement is given below of the Hospital services within the Borough:—

Name and Situation.	Purpose.	No. of Beds.			Proportion used by Hackney Residents.	Special Departments.	Arrangements for	
			For Males.	For Females.			Operative Surgery.	Pathological Work.
German Hospital, Ritson Road, Dalston, E.8 (Voluntary Hospital)	General ..	Medical ..	23	23	75 per cent.	X-Ray Dental Ophthalmic Aural Artificial Sun-light Diathermy	3 Theatres, 1 for major operations 1 for septic cases 1 for Ophthalmic cases 5 Surgeons for general work & 1 each in Dental, Ophthalmic and Aural Departments	A laboratory is provided in which pathological work is carried out.
		Surgical ..	35	23				
		Children ..	12	14				
		Chronic sick ..	—	8				
		Aural ..	3	3				
		Ophthalmic ..	2	2				
		Paying patients	6	6				
			81	79				
			160					
Hackney Hospital, High Street, Homerton, E.9 (London County Council General Hospital)	Information not yet available							
Eastern Hospital, Homerton, E.9 (London County Council Fever Hospital)	Ditto.							

Name and Situation.	Purpose.	No. of Beds.			Proportion used by Hackney Residents.	Special Departments.	Arrangements for	
			For Males.	For Females.			Operative Surgery.	Pathological Work.
Metropolitan Hospital, Kingsland Road, Dalston, E.8 (Voluntary Hospital)	General ..	Medical .. Surgical .. Children .. Venereal disease .. Tuberculosis .. Orthopaedic .. Aural Puerperal Fever and Pyrexia Ophthalmia Neonatorum	30 37 Total 17 As required Do. Do. Do. Do. Do. Do. 150	30 36 Do. Do. Do. Do. Do. Do. Do. Do. Do. 150	33 per cent.	Gynaecological Aural Ophthalmic Dental X-Ray, Massage and Electrical	1 Theatre 5 Surgeons for general work and 1 in each special department	A laboratory is provided in which all pathological work is carried out.
Mothers' Hospital, Lower Clapton Road, E.5 (The Salvation Army)	Maternity	..	..	90	25 to 30 per cent.	Ante-Natal V.D. Ante-Natal Post-Natal Dental Infant Welfare	1 Theatre 4 Surgeons	Mostly carried out at Royal Free Hospital. Specimens from V.D. Dept. are sent to Charing Cross Hospital. Remaining specimens are examined at the Hospital.
St. Joseph's Hospice for the Dying, Mare Street, E.8 (Voluntary Institution)	Hospice for the Dying	Tuberculosis .. General ..	16 21 37	22 16 38 75	33 per cent.	None	None	None

ARRANGEMENTS FOR THE INVESTIGATION OF MATERNAL DEATHS AND CASES OF PUERPERAL FEVER AND PUERPERAL PYREXIA.

In accordance with Ministry of Health Circular 888, dated 23rd April, 1928, the Council appointed Dr. Dorothy B. Gere to conduct enquiries into every death in the Borough of women in childbirth.

In Circular 722, dated 9th August, 1926, relating to the Public Health (Notification of Puerperal Fever and Puerperal Pyrexia) Regulations, 1926, the Minister authorised the maternity and child welfare authorities to make provision for the special treatment of women suffering from puerperal pyrexia, for consultation with an obstetric specialist, for skilled nursing and for institutional treatment.

Following upon the issue of this Circular the Council appointed Lady Florence Barrett, M.D., M.S., and Miss Margaret Basden, M.D., F.R.C.S., to act as obstetric consultants.

Details of the use made of the Council's provision in this respect during the past year appear on page 103 of this Report.

CONSULTANTS FOR DIFFICULT MATERNITY CASES.

The Ministry of Health has approved the arrangements proposed by this Council for the calling in of Obstetric Specialists by medical practitioners in cases of difficult labour, and has also approved the appointment of Lady Florence Barrett, and Dr. Margaret Basden as her deputy.

The proposed fee is five guineas for each case as in practically every case operative assistance is required.

With regard to the recovery of cost or part cost from the patient, as these cases are obviously emergency cases, general practitioners and myself decide the payment to be made by the patient according to the circumstances of the family, the patient paying the family contribution direct to the Consultant and the Council paying the balance of the fee, the circumstances of each case being reported to the Maternity and Child Welfare Committee for consideration and approval.

INSTITUTIONAL PROVISION FOR UNMARRIED MOTHERS, ILLEGITIMATE INFANTS AND HOMELESS CHILDREN.

The following institutions are subsidised by the London County Council, but not by the Borough Council, with the exception of the Salvation Army Mothers' Hospital, Clapton, and afford, in most instances, accommodation for both married and unmarried mothers:—

Name and Situation.	Nature of Accommodation.	By whom provided.
Hope Lodge, 4, Clapton Common	Home for 22 mothers and 10 babies	Salvation Army.
Cotland, 9, Amhurst Park ..	Home for 30 mothers and 18 babies	Salvation Army.
Cotswold, Downs Road ..	Home for 37 mothers and 26 babies	Salvation Army.
Hillsborough House, 181 & 183, Amhurst Road	Home for 29 mothers and 18 babies	Salvation Army.
Lorne House I., 16, Rectory Road	Home for 12 mothers and 8 babies	Salvation Army.
Lorne House II., 126 & 128, Lower Clapton Road	Home for 24 mothers and 20 babies	Salvation Army.
Sapsworth House, 122 & 124, Lr. Clapton Road	Home for 28 mothers and 19 babies	Salvation Army.
Mothers' Hospital, 153, Lr. Clapton Road	Maternity Hospital for 90 mothers and 90 babies	Salvation Army.
Hostel for East End Mothers and Babies, Richmond Road	Home for 10 mothers and 10 babies	Church of England.
St. Mary's, 153, Stamford Hill	Home for 28 mothers and 40 babies	Church of England.
Maternity Refuge, 6, Pembury Road	Home for 24 mothers and 24 babies	Church of England.

AMBULANCE FACILITIES.

(a) *For infectious cases.*—Provided by the London County Council. Ambulance Station: Eastern Hospital, Homerton Grove.

(b) *For non-infectious and accident cases.*—The London County Council has recently established an ambulance station in Paragon Road.

CLINICS AND TREATMENT CENTRES.

Name and Situation.	Nature of Accommodation.	By whom provided.
<i>(a) Infant Welfare Centres.</i>		
"The Grove Mission I.W.C." Grove Mission, Brooksby's Walk, Homerton	One clinic weekly (Doctor)	Borough Council.
"The Lower Clapton I.W.C." 28, Lower Clapton Road	One clinic weekly (Doctor)	Borough Council.
"The Mayfield Road I.W.C." Wesleyan Church Schools, Mayfield Road, Dalston	Two clinics weekly (Doctor)	Borough Council.
"The Northwold Road I.W.C." St. Michael's Hall, Northwold Road, Upper Clapton	One clinic weekly (Doctor). One clinic weekly "weighing" (Health Visitors)	Borough Council.
"The Pedro Street Settlement I.W.C." Rushmore Road, Clapton	Two clinics weekly (Doctor)	Borough Council.
Eton Mission, Gainsborough Road, Hackney Wick	One clinic weekly (Doctor) One clinic weekly "weighing"	Eton College, subsidised by Borough Council.
Hackney Mothers' and Babies' Welfare, Mission House, 23, Hackney Grove	One clinic weekly (Doctor) One clinic weekly "weighing" (Health Visitors)	Hackney Mothers' and Babies' Welfare, subsidised by Borough Council.
St. Martin's Mission, Ada Street	One clinic fortnightly "weighing" (Health Visitors) One clinic fortnightly (Doctor)	Hackney Mothers' and Babies' Welfare, subsidised by Borough Council.
West Hackney, Rectory Road	One clinic weekly (Doctor)	West Hackney Infant Welfare Committee, subsidised by Borough Council.
<i>(b) Ante-Natal Clinics.</i>		
Grove Mission, Brooksby's Walk, Homerton	One clinic fortnightly (Doctor)	Borough Council.
28, Lower Clapton Road ..	Two clinics weekly (Doctor)	Borough Council.
St. Michael's Hall, Northwold Road	One clinic weekly (Doctor)	Borough Council.
Pedro Street Settlement ..	One clinic weekly (Doctor)	Borough Council.
Eton Mission, Gainsborough Road, Hackney Wick	One clinic weekly (Doctor)	Eton College, subsidised by Borough Council.

Name and Situation.	Nature of Accommodation.	By whom provided.
<i>(c) Dental Clinic.</i>		
28, Lower Clapton Road ..	Two clinics weekly (Dentist) One clinic monthly (Dentist and Anaesthetist)	Borough Council.
<i>(d) Artificial Sunlight Clinic.</i>		
28, Lower Clapton Road	One clinic weekly (Doctor)	Borough Council.
<i>(e) Diphtheria Immunisation Clinic.</i>		
28, Lower Clapton Road ..	One clinic weekly ..	Borough Council.
<i>(f) Tuberculosis Dispensaries.</i>		
Metropolitan Hospital, Kingsland Road	Tuberculosis Dispensary ..	Borough Council.
City of London Hospital, Bonner Road, E.2	Tuberculosis Dispensary ..	Borough Council.
<i>(g) School Clinics.</i>		
Cleansing Station, Millfields Road, E.5	Cleansing of verminous persons and inspection and treatment of skin conditions	Borough Council.
Treatment Centre, Clapton Square	Minor ailments	London County Council.
Treatment Centre, Cadogan Terrace,	Minor ailments	London County Council
<i>(h) Venereal Diseases Treatment Centre.</i>		
Metropolitan Hospital, Kingsland Road, E.8	Treatment Clinic	London County Council.
<i>(i) Orthopaedic Clinic.</i>		
Dalston Lane	Massage and remedial treatment	British Red Cross.

SANITARY CIRCUMSTANCES OF THE AREA.

WATER SUPPLY.

The water supply of the Borough is under the control of the Metropolitan Water Board. Two complaints from householders regarding the condition of the water were investigated. There were no adverse reports of the samples taken for analysis.

Complaints of defective water fittings at 248 premises were forwarded to the Metropolitan Water Board during the year.

SEWERS.

During the year the Sanitary Inspectors reported 5 premises on which sewers were defective and repairable by the Borough Council. These were referred to the Borough Engineer for his attention.

REFUSE REMOVAL AND DISPOSAL.

The work of refuse removal and scavenging is under the control of the Borough Engineer and Surveyor.

House refuse is collected in electrically-propelled vehicles at least once a week, more frequent collections being made in certain streets and from blocks of flats.

All the refuse collected is destroyed in the Council's Destructor at Millfields Road.

Street scavenging in this Borough has for years past been carried out under contract, but on the 1st April, 1930, this work was taken over from the contractors and performed by direct labour. Seven electrically-propelled low-loading vehicles and 40 hand-barrows have been purchased and put into commission.

A system of cleansing of streets during the night has also been put into operation during the year. The time of the men engaged in this night work is taken up principally in the cleansing of the street markets.

One hundred and ninety-two litter baskets have been fitted to lamp columns in suitable places and have been extensively used.

The Council's decision to carry out street cleansing by direct labour has resulted in a saving of approximately £6,000 per annum.

During the year the Public Health Department dealt with 1,416 complaints received from the Borough Engineer and Surveyor of houses without dustbins, or with defective dustbins.

Seven hundred and nineteen informal notices were served, and further action taken as required.

SANITARY INSPECTION OF THE AREA.

A summary of the inspections, etc., carried out by the Sanitary Inspectors during the year appears on pages 148 to 163 of this report.

Public Health (London) Act, 1891.

Complaints of Nuisances.

During the year 1930 there were 4,576 complaints of nuisances made to the Public Health Department and investigated by the Sanitary Inspectors of the Borough. Defects or nuisances were discovered in 3,692 of the complaints. Notices for the remedy or abatement of these were served upon the owner or person responsible under the above Act.

Drainage.

Two hundred and sixteen plans and notices to execute drainage work and works of construction under the supervision of the Sanitary Inspectors at 277 premises were reported to the Public Health Committee during the year.

Smoke Nuisance.

In addition to 200 observations of chimneys of large works in the Borough, made by the Sanitary Inspectors, 1,104 observations on 71 premises were made by an Assistant detailed for that purpose. Twenty-nine intimation notices were served on the persons responsible for the issue of black smoke in contravention of the Public Health (London) Act, 1891, and the Public Health (Smoke Abatement) Act, 1926. Five statutory notices were served. One prosecution was instituted.

Infectious Diseases.

The occupied dwellings inspected during the year after infectious disease numbered 2,495. This is an increase of 897 upon the number inspected during 1929. Any nuisances or sanitary defects found were dealt with under the provisions of the above Act.

Inspections other than on Complaint.

The number of inspections, other than those arising on complaint, after infectious disease, and under the Housing and Town Planning Regulations, made by the Inspectors during the year was 8,341, and the nuisances or sanitary defects found were dealt with in the same manner as those on complaint.

Nuisances or defects found on inspection were remedied in most cases on service of an intimation notice only. The total number of such notices served during 1930 was 5,125. The number of statutory notices served was 1,516; and summonses were issued in 55 cases.

Offensive Trades.

The only offensive trades carried on in the Borough are those of fur skin dressing and poultry slaughtering. These are controlled under special by-laws. They number at present—fur skin dressers, 16; poultry slaughterers, 1. Thirty-one inspections were made during the year. There were no contraventions of the by-laws.

London County Council (General Powers) Act, 1904.

During the year attention was drawn by the Medical Officer (Education) of the London County Council to 17 homes in the Borough from which children in a verminous condition were attending school, asking that steps be taken to deal with them under the above Act. These homes were inspected, with the following results:—

No. of Homes Inspected.	No. of Homes where Rooms alone were found Verminous.	No. of Homes where Bedding or Clothes and Rooms were found Verminous.	No. of Homes not Verminous.
17	3	4	10

The verminous bedding and clothing were taken to the disinfecting station and steamed, and the verminous rooms fumigated or sprayed, and, where necessary, notices were served upon the owners to cleanse and strip the rooms if vermin was afterwards found present.

There were also 27 notices received from the London County Council in respect of children suffering from scabies, and 16 notices from hospitals in respect of out-patients. Two cases were referred for treatment by private practitioners. The bedding in these cases was disinfected on receipt of information and again 10 days later.

In addition to the cleansing of verminous rooms or premises by owners and tenants after service of notice by the Sanitary Inspectors,

636 rooms at 411 premises, where neither tenant nor owner could be shown to be directly responsible, were cleansed of vermin by spraying by the staff of the Public Health Department.

During the year, owing to the difficulties in obtaining reliable insecticide and the apparatus with which to apply it, arrangements were continued to loan hand-sprayers and sell insecticide at cost price to owners and tenants in order to assist them in clearing their premises of vermin. Material to the value of £210 13s. 4d. was sold for this purpose. This consisted of 3,361 pints of insecticide and 649 sprayers loaned or sold.

Rats and Mice Destruction Act, 1919.

The number of complaints received during the year of premises being infested with rats was 394. These complaints were effectually dealt with in most cases by the repair or reconstruction of defective sewers, drains and sanitary fittings, under the supervision of the Sanitary Inspectors.

In 51 cases it was necessary to serve notices under the Act upon the occupiers of the land or premises.

Three premises were cleared under the agreement with Messrs. Howard & Son (Ratcatchers), under the supervision of the Council's Sanitary Staff.

Three hundred and ninety-four poison baits were provided and laid down under the supervision of the Sanitary Inspectors. By this means 289 premises have been effectively cleared of rats and 6 premises were under observation and treatment at the end of the year. This method has proved to be very successful, and has resulted in the extermination of a very large number of rats without any complaints of smells after the rats have been poisoned.

Rent and Mortgage Interest (Restriction) Acts, 1920 and 1923.

The number of certificates granted under the Increase of Rent and Mortgage Interest (Restriction) Acts during the year was 9. In 6 cases the work required on the notice was carried out, and in the remaining cases the rent was reduced following action in the County Court. In one case a certificate was applied for but not granted, as formal notice of intention to increase the rent had not been given by the landlord. Under Section 5 of the Rent and Mortgage Interest (Restriction) Act, 1923, it is not now necessary for the tenant to take proceedings at the County Court, but a copy of the certificate must be served on the landlord, who may, if the work is completed satisfactorily, obtain a certificate to this effect from the Sanitary Authority on payment of one shilling.

Housing (Consolidated) Regulations, 1925.

House to House Inspection.

The prevalence of smallpox has interfered very largely with the making of house-to-house inspections under these Regulations. A detailed house-to-house inspection has, however, been carried out in order to obtain the particulars required to support clearance schemes in several districts of the Borough.

Dangerous Structures.

Complaints of alleged dangerous structures at 313 premises were forwarded to the London County Council during the year.

Rag Flock Acts, 1911 and 1928.

There is only one factory in the Borough where rag flock is manufactured. One inspection was made during the year, and the conditions were found to be satisfactory.

Two samples of flock in course of manufacture were taken from this factory during the year. On examination, one sample proved to be satisfactory, whilst the second sample contained 49 parts of soluble chlorine per 100,000, or 19 parts in excess of the permissible quantity. A cautionary letter was addressed to the manufacturer.

Premises and Occupations (other than Food Premises) controlled by Statute, By-laws or Regulations.

			No.
Factory and Workshop Act, 1901	..	Workshops and Workplaces	647
Do. do.	..	Outworkers' Premises	2,143
London County Council By-laws	..	Houses let in separate Tenements	170
Do. do.	..	Rag and Bone Dealers	21
Do. do.	..	Offensive Trades—	
		Fur Skin Dressers	16
		Poultry Slaughterers	1
Local Regulations	.. ..	Underground Rooms (approx.)	7,700

REPORT OF THE CANAL BOATS INSPECTOR.

Number of visits to waterways	.. .. .	19
Number of boats inspected	.. .. .	14
Number of boats not registered	.. .. .	—
Number of boats conforming to Acts	.. .. .	14
Number of boats infringing the Acts	.. .. .	—
Number of Certificates examined	.. .. .	14
Number of persons for which boats were registered—		
Adults	.. .. .	45
Children	.. .. .	—
Number of persons living on boats so registered—		
Men	.. .. .	28
Women	.. .. .	—
Children	.. .. .	—
Number of Notices issued	.. .. .	—
Number of Notices complied with	.. .. .	—
Legal proceedings taken	.. .. .	—

SUMMARY OF LEGAL PROCEEDINGS DURING 1930.

Inspector.	Address.	Complaint.	Magistrate's Decision.	Fine.	Costs.
				£ s. d.	£ s. d.
E. A. H.	401, Wick Road ..	General insanitary condition	Summons withdrawn (work done)	}	1 11 6
E. A. H.	409, Wick Road ..	Do. do.	Do. do.		
J. E. T.	9, Gilpin Road ..	Roof, rain - water pipe, and sink waste pipe defective	Ordered to abate nuisance within 7 days		
C. F. L.	7, Cornwall Road	General insanitary condition	Ordered to abate nuisance within 14 days	..	1 3 0
C. F. L.	159, Victoria Park Road	Do. do.	Do. do.	..	1 1 0
C. F. L.	8, Frampton Park Road	Do. do.	Summons withdrawn (work done)	..	0 2 0
W. G.	5, Urswick Road	Dense volumes of smoke emitted from factory chimney shaft	Adjourned <i>sine die</i> on defendants undertaking to prevent recurrence	..	..
W. G.	19, Tresham Avenue	Drains defective and leaky	Summons withdrawn on defendants undertaking to complete work	..	0 10 6
W. G.	21, Tresham Avenue	Do. do.	Do. do.	..	0 10 6
W. G.	23, Tresham Avenue	Branch drains defective and leaky	Do. do.	..	0 10 6
W. C. V.	133, Rendlesham Road	General insanitary condition	Ordered to abate nuisance within 14 days	..	1 1 0
R. J. S.	56, Tudor Road	Do. do.	Ordered to pay costs (work done)	..	1 1 0
R. J. S.	17, Shore Road ..	Do. do.	Do. do.	..	1 1 0
J. E. T.	18, Gilpin Road	Rain - water pipe leaky; scullery ceiling and walls dirty	Do. do.	..	1 1 0
G. F.	59, Durlston Road	General insanitary condition	Ordered to abate nuisance within 7 days	..	1 1 0
W. E. G.	21, Fremont Street	Keeping, or permitting to be kept, an animal (dog) in such manner as to render room, etc., filthy	Ordered to discontinue keeping a dog on the premises	..	..
W. C. V.	44, Hindrey Place	General insanitary condition	Summons withdrawn (work done)	..	1 1 0
J. E. T.	13, Gilpin Road	Do. do.	Ordered to pay costs (work done)	..	2 2 0
G. F.	25, Northwold Road	Do. do.	Do. do.	..	1 1 0
C. F. L.	7, Cornwall Road	Non-compliance with Magistrate's order	Fined	3 0 0	2 4 0

Inspector.	Address.	Complaint.	Magistrate's Decision.	Fine.	Costs.
				£ s. d.	£ s. d.
W.C.V.	133, Rendlesham Road	Non-compliance with Magistrate's order	Fined	2 0 0	1 1 0
H.B.	50, Welbury Street	General insanitary condition	Summons withdrawn (work done)	..	1 1 0
W.E.G.	31, Ada Street ..	Do. do.	Ordered to abate nuisance within 7 days	..	1 1 0
H.B.	314, Kingsland Road	Do. do.	Ordered to abate nuisance within 14 days	..	1 3 0
R.J.S.	17, Antwerp Street	Foul stone sink; Waste pipe defective	Ordered to abate nuisance within 7 days	..	1 1 0
R.J.S.	19, Antwerp Street	Defective and leaky roof	Ordered to abate nuisance within 14 days	..	1 1 0
R.J.S.	27, Antwerp Street	Sink waste pipe defective and choked	Ordered to abate nuisance within 7 days	..	1 1 0
R.J.S.	27, Ada Street ..	General insanitary condition	Ordered to abate nuisance within 14 days	..	1 1 0
R.J.S.	28, Andrews Road	Do. do.	Do. do.	..	1 1 0
R.J.S.	29, Andrews Road	Do. do.	Do. do.	..	1 1 0
H.K.S.	27, Shacklewell Row	Rain-water pipe broken; ceiling dirty	Summons withdrawn (work done)	..	1 1 0
G.F.H.	111, Albion Road	Sink waste pipe and flushing cistern defective; sashcords broken	Ordered to abate nuisance within 7 days	..	1 1 0
J.E.T.	7, Overbury Street	General insanitary condition	Do. do.	..	2 2 0
C.F.L.	164, Victoria Park Road	Walls dirty and defective	Ordered to abate nuisance within 14 days	..	2 6 0
C.F.L.	5, Rockmead Road	Front eaves gutter leaky	Ordered to pay costs (work done)	..	2 2 0
W.E.G.	31, Ada Street ..	General insanitary condition	Do. do.	..	2 4 0
E.A.H.	30, Bower Road	Do. do.	Ordered to abate nuisance within 7 days	..	2 9 0
E.A.H.	31, Bower Road	Addition roof and stove defective	Do. do.	..	2 9 0
C.F.L.	11, St. Thomas's Road	General insanitary condition	Ordered to abate nuisance within 14 days	..	2 11 0
G.F.	33, Cazenove Road	Nuisance (offensive smells), caused by foul clothing and bedding in and about back room and landing	Ordered to abate nuisance within 7 days	..	2 2 0

Inspector.	Address.	Complaint.	Magistrate's Decision.	Fine.	Costs.
				£ s. d.	£ s. d.
J. E. T.	140, Glyn Road	Drains defective and leaky	Ordered to abate nuisance within 28 days	..	..
H. B.	47, Holly Street	General insanitary condition	Ordered to abate nuisance within 14 days	..	2 6 0
H. B.	104, Haggerston Road	Do. do.	Do. do.	..	2 6 0
H. B.	22, De Beauvoir Crescent	Do. do.	Do. do.	..	2 11 0
W. C. V.	14, Nightingale Road	Ceilings and walls dirty and dilapidated	Do. do.	..	2 6 0
W. C. V.	40, Ickburgh Road	Ceilings and walls dirty and dilapidated	Ordered to abate nuisance within 28 days	..	0 4 0
R. H. B.	150, Evering Road	Do. do.	Ordered to abate nuisance within 14 days	..	2 6 0
A. S.	24, Powerscroft Road	General insanitary condition	Ordered to abate nuisance within 7 days	..	2 6 0
J. E. T.	11, Meeson Street	Do. do.	Ordered to pay costs (work done)	..	2 4 0
H. B.	22, De Beauvoir Crescent	An occupied house without proper and sufficient water-supply	Ordered to pay costs (water supply since provided)	..	2 4 0
R. J. S.	20, Fortescue Avenue	General insanitary condition	Ordered to pay costs (work done)	..	1 1 0
G. F. H.	109, Lansdowne Road	Do. do.	Ordered to abate nuisance within 14 days	..	1 1 0
H. B.	12, Mortimer Road	Roof leaky ..	Summons withdrawn (work done)	..	1 1 0
G. F.	159, Stamford Hill	General insanitary condition	Do. do.	..	1 11 6
<i>Metropolis Management Act, 1855.</i>					
J. E. T.	85 & 87, Ballance Road	Did fail to deposit with the Borough Council plans, etc., of drainage reconstruction	Ordered to pay costs (plans since supplied)	..	2 9 0

FACTORIES AND WORKSHOPS.

The number of workshops registered in Hackney at the end of 1930 was 647, a decrease of 94 on the number registered at the end of 1929. Of this total, 426 were workshops in which females were employed.

The factories in the Borough number 436, and are inspected and regulated by H.M. Inspectors under the Home Office. The duty of ensuring the provision of suitable and sufficient sanitary conveniences in factories, however, rests upon the Sanitary Inspectors of the Borough Council.

The chief staple industries are the manufacture of boots, shoes, cabinets and pianos, but there are also extensive productions of the following:—

Tailored clothes for males and females; dresses, shirts, ties, clothing and underclothing generally; millinery, hats, etc., upholstery and furniture generally; lead pencils, brushes, boxes, artificial flowers, toys, leather goods, gas mantles, dolls, rubber goods, scents, drugs, dyes, paints and varnishes, artists' colours, joinery, foundry work (iron), electric signals, electrical instruments, glass, surgical instruments, silk-weaving and embroidery, chemicals; also there are several furriers, and a number of laundries.

Analysis of Occupations carried on in the Registered Workshops of Hackney.

(A) WEARING APPAREL.

Occupations.	No. of Workshops.	Occupations.	No. of Workshops.
Artificial Flower Makers	4	Millinery	20
Blouses	4	Needlework	3
Boot and Shoe Manufacturers or Machinists	56	Shirts	1
Children's Costumes	3	Tailoring	98
Clothing	4	Ties	9
Corsets	4	Trimmings	5
Dressmakers	44	Underclothing	3
Dressing and Tea Gowns	1	Vests	2
Furriers	47	Waterproofs	1
Hats	4	Miscellaneous	4
Infants' Millinery	1		
Mantles	30		
			348

(B) OTHER OCCUPATIONS.

Bakers	24	Motor Repairs	9
Baskets	2	Rag Sorting	2
Box Makers	10	Rubber Goods	1
Brush Makers	6	Toy Makers	5
Cabinet Makers	52	Upholsterers	17
Confectionery	1	Upholsterers' Trimmings	1
Cycle Makers	2	Wireless Goods	2
Fur Skin Dressers	2	Woodwork	19
Leather Goods	19	Miscellaneous	92
Laundries	8		—
Metal Work	7		299
Pianoforte Makers	16		—
Picture Frames	2		

The following tables show the inspections made and the defects found and remedied in the factories and workshops in the Borough:—

I.—INSPECTIONS.

Premises.	Number of		
	Inspections.	Written Notices.	Prosecutions.
Factories (including Factory Laundries)..	553	118	1
Workshops (including Workshop Laundries)	950	247	—
Workplaces (other than Outworkers' premises included in Part 3 of this Report)	7	—	—
Total	1510	365	1

II.—DEFECTS FOUND.

Particulars.	Number of Defects.			Number of Prosecutions.
	Found.	Remedied.	Referred to H.M. Inspector.	
<i>Nuisances under the Public Health Acts—*</i>				
Want of cleanliness	166	147	—	—
Want of ventilation	11	9	—	—
Overcrowding	11	11	—	—
Want of drainage of floors	—	—	—	—
Other Nuisances	82	69	—	1
Sanitary accommodation—				
Insufficient	12	10	—	—
Unsuitable or defective	110	100	—	—
Not separate for sexes	15	14	—	—
<i>Offences under the Factory and Workshop Acts:—</i>				
Illegal occupation of underground bakehouse (s. 101)	—	—	—	—
Other offences (Excluding offences relating to out- work and offences under the Sec- tions mentioned in the Schedule to the Ministry of Health (Factories and Workshops (Transfer of Powers) Order, 1921)	4	4	—	—
Total	411	364	—	1

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

III.—REGISTERED WORKSHOPS.

Workshops on the Register (S 131) at the end of the year.	Number.
For Analyses of Workshops (see page 53)	
Total number of Workshops on Register	647

IV.—OTHER MATTERS.

Class.	Number.
Matters notified to H.M. Inspector of Factories:—	
Failure to affix Abstract of the Factory and Workshop Act, 1901 (S. 133)	42
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Act, 1901 (S. 5) {	
Notified by H.M. Inspector	95
Reports (of action taken) sent to H.M. Inspector	71
Other	—
Underground Bakehouses (S. 101):—	
In use at the end of the year	48

During the year notices and complaints were received from H.M. Inspectors of Factories, as follow:—

Complaints—Factories	46
Complaints—Workshops	49
Notices—Workshops	82

OUTWORKERS.

The number of outworkers on the register at the end of 1930 was 2,143, as compared with 2,304 at the end of the previous year.

The following analysis shows the trades followed by these outworkers:—

Trade.	No. of Outworkers.	Trade.	No. of Outworkers.
Artificial Flowers	19	Furs	69
Baby Linen	22	Gaiters	10
Bedding	2	Gloves	1
Belts and Bags	25	Hats	4
Blouses	69	Hosiery and Knitted Goods ..	4
Boots and Shoes	451	Lace Goods	20
Boxes and Paper Bags ..	152	Lamp Shades	2
Braces	3	Leather Goods	8
Brushes	105	Mantles and Costumes	254
Caps	2	Millinery	55
Children's Costumes	26	Overalls, etc.	8
Children's Millinery	38	Pyjamas and Shirts.. ..	47
Christmas Crackers, etc. ..	27	Shoe Bows	9
Cleaning	4	Tailoring	125
Clock Cases	2	Ties and Neckwear	104
Clothiers and Outfitters ..	72	Trimmings	41
Collars and Bibs	10	Umbrellas	20
Confectionery Packing	3	Underclothing	30
Cushions	3	Upholsterers' Trimmings ..	14
Dolls and Toys	23	Waterproofs	4
Dressing Gowns	27	Miscellaneous	78
Dressmaking and Robes ..	91		
Embroidery	19		2,143
Fancy Goods	18		
Fancy Paper Goods	23		

Employers of outworkers are required to submit to the local Medical Officer of Health twice yearly a list of the outworkers employed by them. The following is a summary of the information secured from these lists during the past year:—

	Residing in the Borough.	Residing outside the Borough.	Total.
Number of outworkers employed by firms in the Borough	983	705	1,688
Number of outworkers employed by firms outside the Borough	1,160	—	1,160
Total number of outworkers whose names were included in lists submitted during the year	2,143	705	2,848

During the year Miss Portlock, the Inspector appointed for the inspection of Outworkers' premises, made 1,132 inspections, and 665 re-inspections. She also made 867 visits without inspection, the outworkers having left the premises (169), or having given up home work (97), or being out at the time of visit (402), or owing to a wrong address being given (91), or the premises being workshops or factories (92), or the outworkers having died (16).

Miss Portlock also discovered 13 new workshops and handed in their addresses for registration. During her visits of inspection she found 328 premises with sanitary defects. For the abatement of these she served 227 intimation notices. Of the 1,132 premises inspected, in only 93 was a room set apart entirely for the work. In the remainder work was carried on in rooms used for other purposes, as under:—

Workroom, bedroom, kitchen and living rooms	56
„ „ and living room	23
„ „ „ kitchen	15
„ and kitchen	772
„ „ bedroom	82
„ „ parlour	75
„ „ scullery	10
„ „ bathroom	2
„ „ shop	4
„ provided separately	93
	1,132

V.—HOME WORK.

NATURE OF WORK.	OUTWORKERS' LISTS, SECTION 107.								OUTWORK IN UNWHOLESOME PREMISES, SECTION 108.			OUTWORK IN INFECTED PREMISES, SECTIONS 109, 110.			
	Lists received from Employers.						Notices served on Outworkers as to keeping or sending Lists.	Prosecutions.		Instances.	Notices served.	Prosecutions.	Instances.	Orders made (Section 110).	Prosecutions (Sections 109, 110).
	Twice in the year.			Once in the year.				Failing to keep or permit inspection of Lists.	Failing to send Lists.						
	Lists.	Outworkers.		Lists.	Outworkers.										
		Con-tractors.	Work-men.		Con-tractors.	Work-men.									
Wearing Apparel— (1) Making, etc.	254	..	2017	27	..	122	235	..	..	..	..	..	3	..	..
(2) Cleaning and Washing	..	..	..	1	..	11	1	..	..	..	..	..	..	..	..
Lace, Lace Curtains and Nets	4	..	26	..	..	..	3	..	..	..	..	..	..	..	..
Furniture and Upholstery	6	..	34	..	..	1	7	..	..	..	..	..	..	..	..
Fur Pulling	4	..	9	..	..	..	5	..	..	..	..	..	..	..	..
Umbrellas, etc.	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Artificial Flowers	4	..	10	1	..	5	8	..	..	..	..	..	..	..	..
Racquet and Tennis Balls	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Paper, etc., Boxes, Paper Bags	32	..	372	2	..	3	28	..	..	..	..	..	..	..	..
Brush Making	20	..	155	..	..	..	16	..	..	..	..	..	..	..	..
Stuffed Toys	2	..	3	..	..	..	4	..	..	..	..	..	..	..	..
Basket Making	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Cosaques, Christmas Crackers, Christmas Stockings, etc.	4	..	71	1	..	9	4	..	..	..	..	..	..	..	..
Totals	330	..	2697	32	..	151	311	..	..	..	..	..	3	..	..

MATERNITY AND CHILD WELFARE.

The work carried out during 1930 under the Council's maternity and child welfare scheme can be conveniently reported upon under the following descriptive titles:—

- (a) Health visiting.
- (b) Infant welfare centres, ante-natal, artificial sunlight and dental clinics.
- (c) Provision of maternity hospital accommodation, convalescent home treatment, midwifery assistance and home helps.
- (d) Nursing assistance.
- (e) Provision of milk and other foods to necessitous mothers and children.

HEALTH VISITING.

A table showing the visits made by the Health Visitors and the attendances of these Officers at the infant welfare centres and other clinics during the year appears on pages 61 and 62.

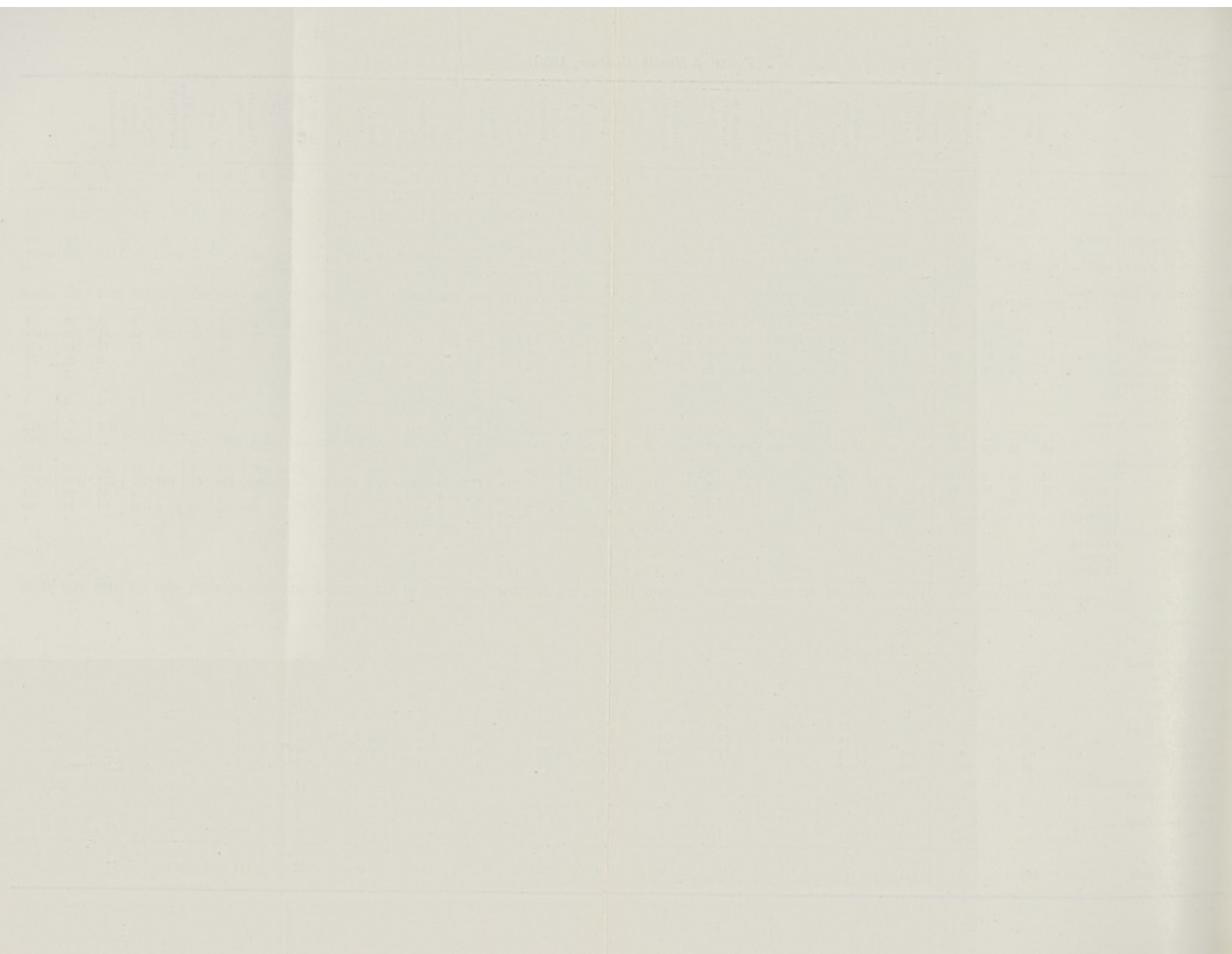
The following table shows the conditions found at the first visit of the Health Visitors to the homes of infants:—

No. of Infants visited.	Method of Feeding.			Separate cot provided for Infant.		Use of Comforter.		Home conditions.		Secondary visits.
	Breast.	Arti- ficial.	Mixed.	Yes.	No.	Yes.	No.	Satis- fac- tory.	Unsatis- fac- tory.	
2754	2436	191	127	2380	374	630	2124	2691	63	21140

1. Primary Visits.
2. Total Visits.

Visits of Health Visitors, 1930.

	Miss N. Burr.		Miss M. Chitson.		Miss M. Cockle.		Miss E. Hamilton.		Miss N. V. Hobbs.		Miss M. L. Howman.		Miss J. D. Kimpford.		Miss S. E. Love.		Mrs. A. Rhodes.		Miss A. Roche.		Miss G. S. Thomas.		Miss D. F. Vidal.		Miss E. E. Williamson.		Temporary Visitors.		Eton Mission (voluntary).		Hackney Grove (voluntary).		Totals.		
	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2	
Infants (Leg.) under 1 year of age	280	1056	137	587	175	439	265	1191	207	372	146	823	186	583	264	544	193	832	148	611	226	754	223	504	196	934	82	306	190	1157	364	1202	3282	1188	
Infants (Illeg.) under 1 year of age	..	..	3	13	..	..	3	3	2	2	2	2	1	1	1	1	1	4	..	..	3	12	7	7	3	3	..	..	7	26	4	15	37	89	
Children, 1-5 years of age	10	912	..	1277	..	841	..	1234	15	946	9	1163	..	906	8	854	9	1339	..	1343	..	930	48	1006	..	1867	38	692	3	2247	5	1447	145	19004	
Total Visits to Infants and Children	290	1968	140	1877	175	1280	268	2428	224	1320	157	1988	187	1490	273	1399	203	2175	148	1954	229	1696	278	1517	199	2804	120	998	200	3430	373	2664	3464	30988	
Still-Births	10	10	6	6	3	3	5	5	5	5	7	7	3	3	9	9	8	8	6	6	7	8	6	6	2	2	4	4	3	3	8	8	92	93	
Expectant Mothers	29	80	84	130	58	72	34	177	40	86	55	124	21	46	30	33	23	34	91	112	68	101	48	64	47	120	32	44	83	155	46	91	789	1469	
Death Enquiries	16	16	10	10	6	6	7	7	14	14	6	6	11	11	15	15	8	8	6	5	5	14	14	9	9	5	5	..	..	11	11	143	143		
Ophthalmia Neonatorum	..	4	8	1	1	..	..	..	..	1	2	2	6	2	4	2	4	..	..	1	4	1	3	2	7	1	7	..	..	5	26	1	4	23	76
Pemphigus Neonatorum	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	4	..	..	..	..	..	..	..	..	..	..	2	4	
Pauperal Fever	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Pauperal Pyrexia	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Other Visits (Outs, Removals, etc.)	..	237	..	216	..	250	..	352	..	529	..	303	..	503	..	332	..	330	..	255	..	344	..	375	..	5	..	191	..	676	..	375	..	5273	
Special	45	56	88	88	52	96	63	101	103	164	56	82	29	37	92	126	34	34	182	237	78	93	168	170	104	134	1579	1845	36	36	..	..	2709	3299	
Measles and German Measles—	14	16	2	2	..	..	..	..	..	..	6	9	..	..	..	..	15	20	4	4	1	1	8	8	8	8	29	38	1	1	15	19	103	126	
Children	27	31	43	43	15	15	4	4	20	20	39	52	15	15	51	52	4	6	104	113	39	40	80	21	21	358	360	141	164	238	251	1199	1267		
Whooping Cough—	2	2	..	..	1	1	..	..	..	..	1	3	..	..	..	..	..	..	3	4	4	4	1	2	4	4	..	..	..	..	6	13	22	33	
Children	..	..	1	1	..	..	..	..	..	..	1	3	..	..	3	3	2	2	..	..	3	3	12	12	6	6	3	3	2	4	31	51	64	90	
Epidemic Diarrhoea—	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	4	..	..	..	..	..	..	..	..	..	..	..	..	2	4	
Children	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Polio Myelitis—	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Children	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Total Visits paid during year..	437	2424	375	2374	311	1725	381	3074	407	2140	330	2583	268	2109	475	1973	297	2617	547	2699	437	2302	617	2255	401	3120	2130	3488	471	4495	731	3489	8615	42869	
Clinics attended:—																																			
Ante-Natal—																																			
Brooksbys Walk	..	..	..	24	..	..	..	..	..	25	..	3	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..	..	..		
Lower Clapton Road	..	..	..	..	..	56	..	..	52	..	..	..	..	..	..	..	..	..	..	..	47	..	53	..	..	..	..	..	..	..	..	..	..		
Northwold Road	47	..	..	..	..	..	..	..	..	..	..	3	..	..	..	..	..	..	..	..	..	45	..	7	..	..	..	..	..	..	..	..	..		
Pedro Street	2	..	41	..	..	..	..	2	..	..	..	..	..	..	..	..	46	..	..	..	4	..	7	..	..	..	..	..	..	..	..	..	..		
Infant Welfare—																																			
Brooksbys Walk	2	..	..	45	19	..	..	46	22	..	..	1	..	..	..	..	46	..	..	4	9	10	..	..	..	..	..	..	..	..	..	..	..		
Lower Clapton Road	..	..	..	..	45	46	16	2	2	6	..	29	..	45	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..		
Mayfield Road	3	1	..	14	47	34	83	93	89	3	..	2	..	31	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..		
Northwold Road	71	6	6	3	..	11	9	4	29	6	6	68	..	37	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..		
Pedro Street	37	88	16	2	..	9	16	..	..	..	..	1	96	14	23	1	51	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..		
Diphtheria Immunisation—																																			
Lower Clapton Road	..	..	..	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	48	..	..	..	..	..	..	..	..	..	..	..	..		
Dental—																																			
Lower Clapton Road	..	..	..	..	..	18	..	..	73	4	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..		
Others	..	..	..	40	..	..	7	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	361	97	..	..	..		
Totals	162	136	131	142	165	148	138	172	130	151	142	148	157	144	361	97	..																		



INFANT WELFARE CENTRES.

The extensions of this service during the last five years are as follow:—

The opening of a weekly weighing session at St. Michael's Hall, Northwold Road, an additional weekly infant welfare session at the Mayfield Road Centre, and an additional weekly dental session at the Lower Clapton Centre. The sessions held previously at All Souls' Church rooms are now held at more suitable premises at the Pedro Street Settlement.

The Voluntary Centres which are subsidised by the Borough Council and carry out their work in co-ordination with the work of the Maternity and Child Welfare Committee in accordance with Circular M.C.W./38 of the Ministry of Health have also extended their activities by the opening of an Infant Welfare Clinic at the Rectory Road Schoolrooms.

The Salvation Army at their Mothers' Hospital in Lower Clapton Road now hold a Child Welfare Clinic weekly.

A list of the infant welfare centres in the Borough, which are nine in number, appears on page 64 of this report. Five of these centres are provided and maintained by the Borough Council, whilst the remaining four, whose work is co-ordinated with that of the Borough Council, are voluntary institutions, supported mainly by voluntary contributions and grants from the Borough Council.

Each of the nine infant welfare centres has been allotted a district and mothers are encouraged to attend the centre serving the area in which they live.

Part-time (temporary, *i.e.*, not on the permanent staff) Medical Officers have been appointed to conduct the work of the consultation centres, the duties of medical officers having been arranged as follow:—

1. To attend the centre on each session.
2. To examine all infants brought to the centre of parents living in the Borough.
3. To advise the parents as to the feeding and care of their infants.
4. Treat minor ailments in the infant when circumstances indicate the need for this.

5. To enter on a case paper to be provided for each infant, certain particulars, with notes on advice and treatment given, and the condition and progress of the infant.
6. To furnish monthly a return to the Medical Officer of Health as to the number of infants seen and treated at the centre.

N.B.—If the ailment of the infant is such as to necessitate continuous medical supervision and treatment, the medical officer must refer the case either to the usual medical attendant or to a hospital for children, such as the Queen's Hospital for Children, Hackney Road. The centre is not intended or fitted to take the place either of the general practitioner or the out-patient department of the hospitals.

The work done at the infant welfare centres during the year is shown in the following table:—

Centre.	No. of sessions held.	No. of children brought to the Centre for the first time.		Total No. of attendances.		Total No. of attendances of infants and children before Doctor.
		Under 1 year.	Over 1 year.	Under 1 year.	Over 1 year.	
1. The Grove Mission ..	51	308	80	3004	1323	2031
2. The Lower Clapton ..	48	361	90	3320	1175	1345
3. The Mayfield Road ..	100	343	56	4429	2032	2730
4. The Northwold Road ..	78	350	104	3677	2330	1739
5. The Pedro Street ..	104	246	24	2614	2175	2681
6. *Eton Mission ..	98	190	3	2837	942	1431
7. *Hackney Mothers' and Babies' ..	50	159	25	2333	750	1312
8. *St. Martin's Mission ..	51	42	6	609	143	467
9. *West Hackney ..	47	114	27	1461	450	1792
Totals ..	627	2113	415	24284	11320	15528

* Voluntary centres.

The following is a summary of the attendances at the infant welfare centres during the past five years:—

Year.	No. of children brought to the Centre for the first time.	Total No. of attendances of children under the age of five years.
1926	2500	32756
1927	2213	34768
1928	2144	35939
1929	2291	32917
1930	2528	35604
Totals ..	11676	171984

It is gratifying to note that despite the fall in the birth-rate from 20.8 in 1926 to 16.4 in 1930 the attendances of children at the infant welfare centres has been fully maintained. Indeed, the number of children attending the centres for the first time in relation to the number of births registered rose from 63.6 in 1926 to 71.9 in 1930.

ANTE-NATAL CLINICS.

The extensions of this service during the last five years are as follow:—

The opening of a Clinic at St. Michael's Hall, Northwold Road, and an additional session at the Lower Clapton Centre. The Salvation Army at their Mothers' Hospital, Lower Clapton Road, hold three sessions weekly.

Special ante-natal clinics are now held at four of the five municipal infant welfare centres and at one of the four voluntary centres in the Borough.

The importance of the periodical examination of expectant mothers from the third month of pregnancy until the birth of the child cannot be exaggerated. Indeed, the Minister of Health, in Memo. 156/M.C.W., dated 11th December, 1930, emphasises the importance of ante-natal examination and places the absence of this precautionary measure first in the list of four main causes of death of women in childbirth into which enquiry has been made.

Consequent upon the issue of this memorandum the Council's Maternity and Child Welfare Committee has taken into consideration the question of extending the ante-natal service of the Borough, and I am able to report progress in this direction. (See page 66.)

The exchange of information between midwives and the ante-natal clinics as to ante-natal examinations and subsequent confinement has continued to operate with success.

The clinics already provided have been fully utilised during the year and, as will be seen from the following tables there has been no diminution in the number of attendances of expectant mothers, despite the decrease in the number of births referred to earlier in the Report.

CENTRES.	No. of times Centre open.	No. of Expectant Mothers attending first visits.	No. of repeated attendances at Centre.	Total attendances.	No. of examinations by Doctor.
1. The Lower Clapton ..	104	449	1081	1530	1403
2. The Pedro Street ..	51	192	437	629	411
3. The Grove Mission ..	27	108	277	385	322
4. The Northwold Road ..	51	146	393	539	464
5. *Eton Mission ..	58	88	216	304	126
Totals	291	983	2404	3387	2726

* Voluntary Centre.

The following figures relate to attendances and physical examinations at the ante-natal clinics during the past five years.

Year.	Primary attendances of expectant mothers.	Total attendances.	No. of physical examinations by Welfare Doctors.
1926	980	2280	1966
1927	851	2297	1807
1928	848	2366	1880
1929	931	3105	2459
1930	983	3387	2726

This table indicates that the ideal of securing the ante-natal observation of every expectant mother is far from consummation at present. However, the Council and Ministry of Health have approved a considerable advance in this direction by adopting my report and authorising the additional expenditure which is set out below:—

MINISTRY OF HEALTH MEMO. 156/M.C.W. AND CIRCULAR 1167.

As requested by the Maternity and Child Welfare Committee, I have prepared the following statement with regard to Circular 1167 and Memo. 156/M.C.W. of the Ministry of Health, dated the 11th December, 1930, regarding maternal mortality and ante-natal services.

The Ministry point out that in practically one-half of the total deaths from childbirth into which enquiry was made, fatality would appear to have been avoidable and that the main causes of maternal death in childbirth were those connected with:—

- (1) The absence of ante-natal care;
- (2) Errors of judgment in practice or treatment by doctors or midwives;
- (3) Lack of reasonable facilities available for effective medical care;
- (4) Negligence of the patient or her friends to adopt or carry out medical advice offered to them.

The Ministry of Health point out the tremendous importance of ante-natal clinic work, but state also that facilities should be granted for proper medical supervision to those women who are disinclined to seek advice at an ante-natal centre. The question of utilising the services of private practitioners, outlined in the Memorandum, raises so many matters of the first importance that it would be better to defer any consideration of it until a later date. It will be considered by the medical societies and associations, and further information will be forthcoming.

Memo. 145/M.C.W., of July, 1929, with regard to ante-natal clinics, which is mentioned in Memo. 156, is complied with by the Hackney ante-natal centres so far as the existing accommodation will permit, but there are some directions in which the present organisation obviously falls short.

Hackney Ante-Natal Clinics:—

The number of Clinics is inadequate for the needs of the Borough if ante-natal supervision is to be extended, as the Ministry suggest, to all expectant mothers; the Council's scheme provides the services of four municipal centres and co-operation with the voluntary centre at Eton Mission. Whereas during the year 1929, 931 expectant mothers attended the ante-natal centres of the Council's scheme (including Eton Mission Centre), and no doubt a considerable number of Hackney mothers attended voluntary centres not associated with the Council's scheme—such as the Salvation Army Centres which, however, cater for mothers living in many London Boroughs, only 553 of the 1,607 births in the Mothers' Hospital during 1929 belonging to Hackney—the number of Hackney births for 1929 was 3,423, of which about 2,000 were notified by midwives.

CENTRES AND CLINICS (ANTE-NATAL).

Brooksby's Walk Centre meets only once a fortnight.

Northwold Road, Lower Clapton Road and Rushmore Road meet once weekly, two clinics (morning and afternoon) being held at Lower Clapton Road on the same day.

Eton Mission Centre meets once weekly.

The returns show that the clinics, with the exception of Eton Mission, are working at full capacity. During 1929, 244 clinics were held, 931 mothers attended 3,105 times and 2,459 examinations were made by the doctors. It is of no use for the Health Visitors to press mothers to attend clinics or to carry on the "campaign of enlightenment" on the subject of ante-natal supervision desired by the Ministry if the necessary clinic accommodation is not available. A particularly unsatisfactory feature is the fortnightly opening of Brooksby's Walk Centre; it is most difficult to carry on an ante-natal centre with such a long interval as a fortnight between clinics. *The Committee will remember that the London County Council have agreed, in the Northwold Road Clearance Scheme, to build a maternity and child welfare centre, and it is to be hoped that the possibility of erecting buildings entirely for the purpose of maternity and child welfare work, and, therefore, adequately equipped for all phases of this work, will be kept in mind by the Maternity and Child Welfare and Housing Committees and the Borough Council when considering slum clearance schemes.* It is very rarely that an existing building can be adequately adapted and equipped, and a considerable number of London Boroughs have now specially built maternity and child welfare centres. With the exception of Lower Clapton Road, centre premises in Hackney are merely hired for the weekly occasion and obviously are unsatisfactory as compared with premises reserved for maternity and child welfare work.

CO-OPERATION OF CLINICS WITH MIDWIVES AND MEDICAL PRACTITIONERS.

The Ministry desire that midwives should be encouraged to bring their patients to the clinics and to do their ante-natal work there under supervision until their knowledge of what is required and their skill in detecting abnormalities are sufficient to enable them to do the routine work in ordinary cases by themselves. It is quite impossible to encourage the midwives to attend with their patients at ante-natal clinics; the County Council instruct midwives to take their patients to the centres, but even if the midwives wished to do so, the centres cannot really make it worth their while to attend, the doctor's time is too taken up and the number of clinics are too few. There are no facilities for medical practitioners to use the centres at the present time, either for the conduct of examinations or for following up their cases and subsequent supervision, as suggested by the Ministry; the centre doctors, however, spare no pains in reporting to doctors and midwives as regards cases sent to the centres for examination, expert advice or treatment.

Supply of Midwives:—

The Ministry state that the services of a qualified midwife should be available for every confinement whether she acts as midwife in charge or as a maternity nurse under the direction of a doctor. The only way in which this can really be brought about is by the employment of whole-time or part-time municipal midwives, an arrangement already carried out by some local authorities and recommended by the Ministry of Health. Many Maternity and Child Welfare Authorities employ whole-time midwives. In London, Bethnal Green have appointed a whole-time midwife who is assisted by a part-time deputy. The Medical Officer of Bethnal Green, in his 1929 Report, states:—

“During the year 120 mothers were attended, 87 by the Borough Midwife and 33 by a private midwife acting as deputy for the Borough Midwife, while 1 patient was removed to hospital in labour. Of the 120 mothers delivered, 7 were primiparae and 113 multiparae. There were 28 expectant mothers on the books at the end of the year.

“The Borough Midwife or her deputy paid 1,490 visits in connection with her practice and 11 other visits. She also conducts a regular weekly session for ante-natal care of her patients, and assists in the work of the Welfare Centre. It is gratifying to record that 36 of the mothers delivered by the Borough Midwife during the year had been previously attended by her, 9 of them on two previous occasions, and one on three occasions.”

Eliminating the “Handywoman” :—

The Ministry of Health suggest that Maternity and Child Welfare Authorities by contributing to the fees of midwives would enable doctors to employ midwives at confinements in the place of “handywomen.” This could be carried out on approximately the same lines of procedure as the provision of a midwife to necessitous cases. The question of the provision of sterilised outfits might then be considered in connection with the work of these midwives, and for issue to any other midwives whose services are supervised to any extent through the Maternity and Child Welfare Scheme. Speaking generally I consider that these outfits should be issued by the London County Council to midwives whose work is entirely supervised by Officers of the County Council, and the Borough Council should issue these outfits to those midwives engaged to attend cases under the Maternity and Child Welfare Scheme of the Borough. A scheme has been put into operation at Lambeth under which maternity outfits, containing sterilised dressings, are supplied to midwives for expectant mothers who are unable to obtain these outfits themselves. The outfits are supplied to Lambeth by Boots

Chemists, at 5s. each, which is 10 per cent. below the usual wholesale rate. During 1929 approximately 270 of these outfits were supplied by Lambeth Borough Council.

Hospital Beds:—

The Ministry of Health strongly urge the provision of more Hospital beds and give instances of remarkable reductions in maternal mortality as the result of hospital supervision of confinements. Several London Boroughs have erected Maternity Homes and 3 London Boroughs have entered into agreements by which maternity beds in hospitals formerly controlled by the Guardians are reserved for Council cases. Poplar Borough have 12 such beds, Hampstead 5 and Camberwell 12.

Hackney Borough Council has an excellent opportunity of obtaining hospital beds owing to the re-organisation of maternity bed accommodation at Hackney Hospital which is now taking place, additional beds will be provided by the hospital in the immediate future and one entire floor of the hospital will be reserved for maternity cases. An arrangement could be made to reserve either one ward of four beds for Hackney cases or to refer cases to the Hospital without the reservation of a special ward for Hackney cases. The London County Council are favourably disposed at the moment to such a scheme. Under the Poor Law, patients were only admitted from Hackney or Stoke Newington to Hackney Hospital. This restriction will shortly be removed, and accommodation which might otherwise be reserved for Hackney may be utilised for cases from Bethnal Green, Stepney or other London areas even further afield. An agreement for reserving beds for Hackney could be made on lines such as follow:—

Patients who, owing to medical reasons or to unsatisfactory home conditions, are not in a position to be confined at home to be admitted to the ward, each patient presenting an admission order, signed by the Medical Officer of Health.

All arrangements with regard to ante-natal supervision of intending patients shall be left to the Medical Officer of Health in consultation with the Medical Superintendent of the Hospital.

The Borough Council to pay to the County Council in respect of each of the beds a sum computed at the rate of nine shillings per day per occupied bed. The charge of nine shillings per day shall include all medical and other attendance including urgent dental attendance while in hospital—but not the provision of dentures—use of labour room, food, bedding and medicines, and washing of personal clothing.

If in exceptional circumstances the Borough Council require beds in excess of the number mentioned, the Borough Council undertakes to make payment to the County Council for any such additional beds at the rate per day as aforesaid.

Conclusions:—

The clearance schemes of the Borough Council will offer an excellent opportunity of instituting really adequate centres for all phases of Maternity and Child Welfare work. As a temporary measure I would suggest that the Committee consider establishing an additional ante-natal clinic at Brooksby's Walk, and an additional clinic elsewhere, say at Mayfield Road, the appointment of an additional health visitor, a midwife, and a clerk to assist in the additional clerical work resulting, financial assistance to midwives in order to displace the "handywoman," provision of 4 hospital beds, and additional nursing assistance to relieve the health visitors at the various infant welfare and ante-natal centres, so that more time can be spent in visiting and instructional work.

I estimate the first annual cost to the Borough, if these suggestions are approved, as follows:—

	£
1 Municipal Midwife	225
Payments to Midwives (acting as Maternity Nurses)	75 (say 50 cases)
1 Health Visitor	225
1 Clerk	169
1 Nurse (Assistant at Centres)	40 (2 sessions weekly)
4 Beds at Hackney Hospital	657
270 Sterilised Maternity Outfits at 5s. each ..	68
Centre Equipment	100
Extra Rent at Brooksby's Walk and Mayfield Road Centres	43
Medical Officers' Fees	123
	£1,725

ARTIFICIAL SUNLIGHT CLINIC.

An artificial sunlight clinic was opened upon the premises of the Infant Welfare Centre at No. 28, Lower Clapton Road on the 14th January, 1926. The cases treated are principally infants and children under the age of five years who are suffering from nutritional disorders.

The following scale of charges was adopted by the Council's Maternity and Child Welfare Committee in December, 1930:—

Income per head of the family per week, after deduction of rent, insurances, etc.	Fee to be paid.
Under 8s.	No payment.
Between—8s. and 10s.	1s. for course.
10s. and 15s.	2s. „ „
15s. and 20s.	3s. „ „
20s. and 25s.	4s. „ „
25s. and 30s.	5s. „ „
30s. and over	6s. „ „

The following is a summary of the work done at the clinic during the past five years:—

	1926	1927	1928	1929	1930
No. of patients under treatment at commencement of the year { Women	..	..	2	4	1
Children	..	54	43	22	25
No. of patients who commenced treatment during the year { Women	2	4	10	5	5
Children	190	158	116	114	77
No. of patients who completed treatment during the year { Women	2	2	8	5	4
Children	97	129	103	72	54
No. of patients who failed to attend for completion of treatment { Women	..	..	..	3	..
Children	39	40	34	39	20
No. of patients under treatment at end of the year { Women	..	2	4	1	2
Children	54	43	22	25	28
Total number of attendances of patients { Women	10	36	88	60	33
Children	1580	2025	1777	1137	886

Payments to the Medical Officer in charge of the clinic and to the Hackney District Nursing Association for the services of a nurse at each session amounted during the year to £98 7s. 6d., whilst a sum of £18 9s. 0d. was received in respect of treatment given during that period.

A report by Dr. Dorothy B. Gere, the Medical Officer in charge, is given here.

Report by Dr. Dorothy B. Gere.

Fewer patients were treated in 1930 than in previous years. This decrease was partly due to the fact that fewer cases of rickets were seen than formerly. The attendances of patients, however, have been much more satisfactory.

Fifty-eight cases completed treatment during the year, and these included:—

Malnutrition	21 cases
Rickets	10 „
Debility	7 „
Failure to gain weight	5 „
Muscular weakness	4 „
Ante-natal	4 „
Marasmus	3 „
Cervical adenitis	2 „
Anaemia	1 „
Chronic bronchitis	1 „
Total	58 cases

Malnutrition—Contrary to the results observed by some other workers, cases of chronic malnutrition are found to respond well to artificial sunlight treatment, provided the condition is not due to a specific cause, such as unhealthy tonsils or threadworms. Only four of the cases treated showed little signs of improvement. The remaining seventeen made an average gain in weight of 9½ ounces a month, as compared with 2 or 3 ounces a month before treatment was commenced.

Failure to gain weight.—Though apparently well nourished, these five children, whose weight had remained stationary for weeks or months, gained on an average 6½ ounces a month after treatment was commenced.

Debility.—The effect of artificial sunlight treatment is always striking in cases of debility following illness, the general tone being rapidly improved. The average gain in weight of the patients treated was 11 ounces a month. One patient, a child of 16 months, had been in hospital for five months with measles, pneumonia, whooping-cough and chicken-pox, and had made no headway in two months following her discharge from hospital and was in very poor condition although it was summer-time. After two months of artificial sunlight treatment he was immensely improved in every way and had gained 2 pounds in weight. Another child of eight months was emaciated and weak after having had diphtheria two months previously and weighed 12 pounds 8 ounces. After treatment she weighed 17 pounds 11 ounces at thirteen months, had cut teeth normally, walked alone and was very active.

Marasmus.—Very good results were obtained in the three cases treated. The children were aged 2 months, 4 months and 4 months, and weighed 7 pounds 12 ounces, 7 pounds 14 ounces and 8 pounds 15 ounces respectively. All were in very good condition on completion of treatment.

Rickets.—Cases of varying severity were treated. In three cases X-ray examinations were made at the British Red Cross Clinic. Really severe cases are rarely seen now—a reflection of the benefit derived from attendance at infant welfare centres and of the attention of health visitors. Most of the cases that are seen come from poor homes, the children of ignorant parents, and it is difficult to secure regular attendance at the Clinic as the parents fail to appreciate the need for treatment. Cases with bony deformity are sent to hospital for orthopaedic treatment when the active disease is cured.

Cervical adenitis.—Two little girls were treated and cured after five and seven treatments respectively. Many other cases occurred among patients being treated for other complaints and these also cleared up rapidly, provided the condition was not due to unhealthy tonsils.

Anaemia.—The child treated for this condition was much improved by treatment.

Chronic bronchitis.—The child who suffered from chronic bronchitis began treatment on the 9th January, 1930. He had a history of frequent attacks of bronchitis. No further attack occurred after treatment was begun and in April when treatment was discontinued, he was very well and his mother reported that "everyone noticed how much better he was."

Muscular weakness.—Great improvement was noted in three cases and very little in the fourth, in which there was also mental defect.

Apart from obvious and tangible signs of improvement in children treated with ultra-violet rays, intelligent women frequently volunteer the information that their children "seem much better," are "less fretful," "more alert," or "sleep better at night" and so on. Months or even years after a course of treatment women have volunteered the remark that they consider the treatment was the "making" of their children.

Ante-natal cases.—Many more expectant mothers would benefit from artificial sunlight treatment, but as they need individual treatment very few can be fitted in during the children's session. One patient suffered from pruritus which disappeared after treatment. Another was debilitated and had rheumatic pain. Her condition was much improved and the pain cleared up after treatment. She was expecting triplets and two were born alive and are now healthy. The third patient was treated for six weeks before her confinement as she had been unable, spite of routine treatment, to feed her two previous children. At her own request treatment was continued for a short time after confinement and she was able to feed the baby for 3½ months. The fourth patient was very poorly and suffered from anaemia and debility. She had treatment for two months before her confinement. She improved rapidly, gained a good colour, and at the time of her confinement was feeling very well. Her confinement was normal and the baby was healthy.

DENTAL CLINIC.

A dental clinic is established at No. 28, Lower Clapton Road, weekly sessions having been held since the 17th December, 1925, until the 12th May, 1930, on which date an additional session was commenced.

Expectant and nursing mothers and children are referred from all the infant welfare centres in the Borough to this clinic for treatment.

Under this scheme the Council's Dental Surgeon, Mr. Middleton, L.D.S., and the Anaesthetist, Dr. Montague Smith, are paid a fee for each attendance at the clinic. Payment is also made to the Dental Surgeon in respect of the supply of dentures.

Those patients who are able to contribute towards the cost of their dental treatment are charged fees of 1s. or 2s. for the course of treatment, excluding dentures.

The scale of charges for the supply of dentures is the same as that operating in the case of the supply of milk to necessitous cases, the maximum charge to those persons coming within the scale being £4 for a complete set of dentures (upper and lower). If, however, the income of the family is more than that allowed under the scale, the National Health Insurance scale is applied, i.e., an amount from £4 10s. 0d. to £6 10s. 0d., according to circumstances.

Every applicant for dental treatment is required to fill in a special "Dental Treatment Application Form," to be obtained only at the welfare centres. The application is then considered and a voucher issued to the applicant authorising treatment at the clinic. This voucher is only available for six months.

The work done at the clinic during the period under review was as follows:—

No. of sessions held	..	..	..	..	81	
				Mothers.	Children.	
No. of primary attendances	..	..	..	114	93	
No. of repeat attendances	..	..	..	556	111	
Total attendances	..	..		670	204	
No. of teeth extracted	..	..	..	..	..	1120
No. of teeth stopped	..	..	..	..	..	81
No. of scalings and dressings	..	..	..	..	..	74
No. of general anaesthetic cases	..	..	..	..	..	209
No. of local anaesthetic cases	..	..	..	..	..	65
No. of patients to whom dentures were supplied	..	..	..	..	..	64 (105 dentures)

The cost of this scheme to the Council during the year was:—

	£	s.	d.
Payments to Dental Surgeon in respect of attendances	124	8	6
Payments to Dental Surgeon for dentures supplied	140	19	3
Payments to Anaesthetist	23	12	6
Total payments	289	0	3

Patients' contributions:—	£	s.	d.	£	s.	d.
For Dentures	45	6	9			
For Extractions, etc. ..	11	13	0			
Total contributions				56	19	9
Net cost to the Council				£232	0	6

In 29 cases dentures were supplied without cost to the patients.

The following table is given in order to show the extent to which expectant and nursing mothers and their children have benefited from the facilities for dental treatment provided by the Council under its maternity and child welfare scheme since the opening of the clinic at the end of 1925:—

Year.	No. of Sessions held.	No. of Attendances.	No. of Extractions.	No. of Fillings.	No. of other treatments.	No. of Persons to whom Dentures were supplied.	No. of Dentures supplied.
1926 ..	53	697	1146	50	85	33	59
1927 ..	51	644	798	21	66	34	61
1928 ..	51	660	762	23	56	44	76
1929 ..	51	544	852	16	61	34	64
1930 ..	81	874	1120	81	74	64	105
Totals ..	287	3419	4678	191	342	209	365

The following is a report by the Council's Dental Surgeon:—

Report by H. C. Middleton, L.D.S., R.C.S. (Edin.).

The Dental Clinic has been working for five years, and I beg to offer some general observations on the work to supplement the actual figures of attendances, treatment, etc., preceding this report.

The adult patients may be roughly divided into two groups.

The first group comprises mothers between the ages of 35 and 45 years. In most cases their mouths present a hopeless spectacle of filthy teeth and septic gums. A complete clearance of such teeth is the only effective treatment. The general health of these mothers improves immediately this is done, even before dentures are fitted to replace the extracted teeth.

The second group comprises mothers between the ages of 18 and 35 years. Some of these mothers show evidence of dental treatment from the school dentist. These are most encouraging cases, as, with a few stoppings and general scaling and cleaning, their mouths can be made efficient and healthy. Here I would point out that the extra session held on Mondays is most useful and of the utmost value. At this session I arrange appointments for selected cases and carry out conservative work which time does not permit of doing at the ordinary Thursday session.

I have been particularly struck by the large amount of "tartar" deposited on the teeth. This, I think, is due to errors in cooking and feeding.

The Extraction of Teeth.—Very little work is done under local anaesthesia for several reasons.

Firstly, the general septic condition of the mouths, and secondly, all these patients are either expectant or nursing mothers, and there is a widespread and ignorant prejudice against having any dental treatment during these times, therefore we try to minimise the element of shock and we, the anaesthetist and myself, find that these mothers take nitrous oxide "gas" extraordinarily well.

Unusual cases are seen now and again, and one mother, who had a large cleft palate, was supplied with a denture and an obturator to replace her soft palate with vast improvement to her speech and, consequently, her general happiness.

With regard to the treatment of children below school age, I find it disappointing work; in most cases, when I see these children, their temporary teeth are beyond repair. Here again extractions under "gas" are carried out, our youngest patient being only 15 months old. No dental chair being small enough for these tiny people, they are duly anaesthetised on the nurse's lap.

Generally speaking, the children I see show evidence of poor calcification of the teeth. This means that the teeth are made of poor materials and do not resist decay. The cause of this again goes back to methods of infant feeding and more particularly to the kind of food given to very young children. Until a great change comes over the feeding habits of the bulk of the people there will be no improvement in the present bad state of the children's teeth. Wholemeal bread, fresh vegetables and fruit should take a much more prominent place in children's diet than they do to-day. I quite understand that economic reasons are the chief hindrance to a more intelligent and varied diet for ordinary people, but this is outside the scope of this report.

PROVISION OF MATERNITY HOSPITAL ACCOMMODATION, CONVALESCENT HOME TREATMENT, MIDWIFERY ASSISTANCE AND HOME HELPS.

Maternity Hospital Accommodation.—The Council pays the sum of one guinea in respect of each necessitous person admitted from the Borough for treatment at either of the undermentioned hospitals. Expectant women are deemed to be eligible for assistance under this scheme if, by reason of poverty or other cause, they are unable to pay an amount equal to one-half the average cost per patient of the maintenance and administration charges of the hospital concerned for the preceding year.

The number of patients assisted under this scheme, together with the cost to the Council during the year, is shown below:—

	Cases.	Cost.		
		£	s.	d.
Salvation Army Mothers' Hospital ..	122	128	2	0
City of London Lying-in Hospital ..	135	141	15	0
	257	£269	17	0

The number of cases assisted during the last five years was 1,140.

Convalescent Home Treatment.—It has not been necessary to make any alteration to the agreement which has existed for some years between the Council and the Invalid Children's Aid Association under which the Association arranges, on behalf of the Council, convalescent home treatment. Under this arrangement the Council is not required to meet any cost other than that which the parents are not able to contribute towards the actual cost of the treatment provided at the convalescent home, or which is not forthcoming from charitable sources.

During 1930 arrangements were made for the convalescence of 35 children. Payments to the Invalid Children's Aid Association during the year amounted to £93 17s. 5d.

During the past five years 151 children have been sent to convalescent homes.

Midwifery Assistance.—The Council does not employ a midwife but, in order to meet the needs of those mothers who desire to be confined in their own homes and are unable to pay a midwife's fee, the Council adopted a scheme in 1920 under which it accepts financial responsibility for the whole or part of the cost of a midwife's services.

Application for assistance under this scheme is made upon a printed form, showing the size and income of the family, the name of the midwife to be engaged, the fee to be charged and other relevant information. The statements made in the form are verified by the Health Visitor, and the Medical Officer of Health considers each application with a view to making an appropriate recommendation to the Maternity and Child Welfare Committee as to the suitability of the case for assistance and the sum to be paid by the Council.

The fees of midwives in attendance on 24 mothers were paid by the Council during the year, the payments by the Council totalling £21 13s. 6d. The number of cases dealt with during the last five years was 179.

Home Helps.—No application was received during 1930 for the assistance of a "home help" under the maternity and child welfare scheme.

Nursing Assistance.—A description of the scheme in operation in the Borough for professional nursing in the homes of sick persons is set out on page 29 of this report.

In order to facilitate reference, however, a table is given here to show the extent to which the services of the nurses employed by the Hackney District Nursing Association have been utilised during the past year under the Council's maternity and child welfare scheme:—

Disease.	No. of Cases Nursed.	No. of Visits Paid.
Infantile Diarrhoea	2	42
Maternity Nursing	101	1510
Measles	78	912
Ophthalmia Neonatorum	14	265
Pneumonia	70	808
Polio-myelitis	1	63
Whooping Cough	4	65
Other ailments	103	1221
Totals	373	4886

The number of visits paid by the nurses of the Association under this scheme during the past five years was 20,718.

PROVISION OF MILK AND OTHER FOODS TO NECESSITOUS MOTHERS AND CHILDREN.

In the consideration of applications received under the Council's scheme for the provision of cow's milk and dried milk to necessitous mothers and children, free of cost or at a reduced price, every source of income, including assistance received from the Local Public Assistance Committee, is taken into account. Health Visitors' reports are obtained in every case with a view to securing verification of the statements made on the application forms and, in cases in which the applicant is in regular employment, the employers are communicated with in order to ascertain the accuracy of the statement of income.

The following is the scale of income under which grants are made:—

Income per head of the family after deduction of rent and insurances.	Proportion of cost to be borne by the applicant.
Up to 7s. 0d. per week	Free.
Over 7s. 0d. but under 8s. 0d. per week ..	25% of cost.
Over 8s. 0d. but under 9s. 0d. per week ..	50% of cost.
Over 9s. 0d. but under 10s. 0d. per week ..	75% of cost.

One pint of milk daily for a period of 28 days or one packet of dried milk weekly for four weeks is granted to each expectant mother after the sixth month of pregnancy and for each child under three years of age. This age limit is extended to five years when the children are attending infant welfare centres and are certified by a centre Doctor to be in need of extra nourishment. Assistance is not given in cases in which the income exceeds 10s. 0d. a week for each member of the family unless there are exceptional circumstances such as heavy indebtedness incurred during long periods of unemployment or sickness.

The following are particulars of the applications received, the assistance granted and the cost of the scheme to the Council during the year:—

Form of Assistance.	No. of Applications.		Cost to the Council.
	Received.	Granted.	
Cow's Milk	4,656	4,580	£ s. d. 1,834 13 4
Dried Milk	1,263	1,254	460 5 7
Totals	5,919	5,834	2,294 18 11

The number of families assisted under the scheme during the year was 1,333.

In addition to the cow's milk and dried milk supplied free of cost or at a reduced price, dried milk is supplied at the infant welfare centres at cost price, whilst other foods, medicines, etc., are supplied free of cost or at cost price. Details of the sale of dried milk and of the sale or free distribution of other foods and medicines are given below:—

Dried Milk, Foods, Medicines, etc., supplied at cost price.

Description of Article.	Value of goods supplied.
	£ s. d.
Cod liver oil and malt	52 6 6
Cow and Gate	529 4 0
Lactagol	18 12 6
Marylebone cream	74 9 9
Ostermilk	66 17 6
Petroleum emulsion	20 2 10
Syrup ferri	13 0 4
Virol	68 17 0
Sundries	109 15 9
Total	953 6 2

Foods, Medicines, etc., supplied free of cost to necessitous mothers.

Description of Article.	Cost to the Council.
	£ s. d.
Cod liver oil and malt	28 5 6
Marylebone cream	20 13 5
Virol	13 7 0
Sundries	32 5 0
Total	94 10 11

INSPECTION AND SUPERVISION OF FOOD AND FOOD PREMISES.

The food premises of the Borough are kept under observation both as to their sanitary condition and cleanliness and the condition and soundness of the food stored, sold or prepared for sale, by two Sanitary Inspectors, who visit the butchers, slaughter-houses, markets, dairies, etc., and generally by the District Sanitary Inspectors.

MILK SUPPLY.

Milk and Dairies Order, 1926.—The Borough Council is required by the provisions of the Milk and Dairies Order, 1926, to keep registers of all persons carrying on in the Borough the trade of cowkeeper or dairyman and of all premises in the Borough which are used as dairies.

The Milk and Dairies Order, 1926, excludes from registration those premises from which milk is not supplied otherwise than in properly closed and unopened receptacles in which it is delivered, but, following upon a decision of the High Court, the Borough Council registers as purveyors of milk those persons who sell milk in sealed bottles within the Borough.

The following summary shows the state of the Registers at the end of 1929, the additions and deletions made during 1930 and the number of entries remaining at the end of 1930:—

	Cowkeepers and Cowhouses.	Dairies and Milkshops.	Dairymen, including those whose premises are outside the Borough.	Purveyors of Milk in sealed bottles.
On Registers on 31st December, 1929	3	196	210	216
Alterations to Registers (transfer of ownership of business)	..	7	..	13
Added to Registers	..	4	6	13
Removed from Registers	..	..	1	1
On Registers on 31st December, 1930	3	200	215	228
Increase (+) Decrease (—) ..	..	+ 4	+ 5	+ 12

Two applications for permission to sell cream in cartons were refused by the Public Health Committee during the year. In one case the premises were deemed to be unsuitable, while in the second case the Committee refused to sanction the sale of cream from a stall in a market street.

During the year 33 inspections were made of the three cow-houses in the Borough and 1,400 visits were paid to the dairies and milkshops. There were four instances in which it was necessary to serve notices regarding the use of dirty utensils and five notices were served requiring the cleansing or repairing of premises used as dairies.

Legal proceedings were instituted during the year against a milk roundsman and his employer for an offence under Article 31 of the Order, which requires that milk shall be bottled only on registered premises. A fine of £3, with £3 3s. costs, was imposed upon the roundsman and the summons against the employer was dismissed.

Milk (Special Designations) Order, 1923.—The special designations under which milk may be sold or offered or exposed for sale in pursuance of this Order are:—

- (a) "Certified";
- (b) "Grade A (Tuberculin Tested)";
- (c) "Grade A"; and
- (d) "Pasteurised."

The Borough Council is authorised to grant licences to any person other than a producer to sell such graded milk. The licences are valid for a period ending on the 31st December of the year in which they are granted.

Applications were received during the year from the under-mentioned dealers, all of whom satisfied the Local Authority that their arrangements for the storage, treatment and distribution of the milk complied with the conditions required:—

Name and Address of Dealer.	Designations of Milk for the sale of which licenses were granted.
J. Akam & Sons, 53, Kynaston Road	(d).
T. Francis, 257, Queens Road	(a).
S. Gardiner, 144, Cassland Road	(b).
I. H. Jones, 7, Church Road	(b).
London Co-operative Society, 140, Stoke Newington Road ..	(b) and (d).
Do. do. Rushmore Road	(b) and (d).
A. B. Mansfield & Sons, 2, Maury Road	(a), (b) and (d).
W. A. Mills, 1, West Side	(b).
F. W. Snewin, 192, Lower Clapton Road	(b).
S. P. Snewin, 67, Oldhill Street	(b).
A. Stapleton & Sons, Ltd., Brookland Farm, Northwold Rd.	(a) and (d).
Do. do. 124, Dalston Lane	(a).
United Dairies (London), Ltd., 85, Amhurst Road	(d).
Do. do. 74, Chatsworth Road	(d).
Do. do. 86, Dunsmure Road	(d).
Do. do. 46A, Leswin Road	(d).
Do. do. 107, Lower Clapton Road	(d).
Do. do. 23, Oldhill Street	(d).
Do. do. 43, Shacklewell Lane	(a), (b), (c) and (d).
Do. do. 90, Stamford Hill	(d).
Do. do. 164, Stamford Hill	(d).
Do. do. 122, Stoke Newington Road	(d).
Do. do. 83, Upper Clapton Road	(a), (b), (c) and (d).
Do. do. 10, Vartry Road	(d).
Do. do. 180, Victoria Park Road	(a), (b), (c) and (d).
Do. do. 37, Wilton Road	(d).

MEAT AND OTHER FOODS.

London County Council (General Powers) Act, 1928: Ice Cream.
 —Section 29 of this Act requires that any premises, other than premises occupied as a factory or workshop, hotel, restaurant or club, used for the purpose of the manufacture, storage or sale of ice cream shall be registered with the Council.

The following table shows the additions to and deletions from the Register during the year:—

Number of premises on the Register on 31st December, 1929 ..	212
Number of premises removed from the Register during the year..	14
Number of premises added to the Register during the year ..	27
Number of premises on the Register on 31st December, 1930 ..	225

During the past year, 292 visits to premises where ice cream is made, stored or sold were paid by the Sanitary Inspectors and eight notices were served in respect of unsatisfactory conditions found.

Public Health (Meat) Regulations, 1924.—These Regulations require that notice shall be given to the Council by any person who intends to slaughter any animal. Thus the Council's Food Inspector is enabled to be in attendance at the slaughtering of all animals in the Borough and to examine the carcasses.

Four hundred and forty-four visits were made to slaughter-houses, when the carcasses of 3,877 sheep, 384 pigs, 9 sows, 39 calves, 170 oxen and heifers, 3 cows and 2 boars were examined. The following were found to be diseased and were destroyed:—

- Carcase and organs of a heifer affected with tuberculosis.
- Pluck and mesentery of an ox affected with tuberculosis.
- Carcase and organs of a sheep affected with dropsy.
- Lungs and ribs of five pigs affected with pleurisy.
- Part of a pig affected with a ruptured pelvis.
- Parts of 2 pigs affected with peritonitis.
- 14 ox and 12 sheep livers affected with distomatosis.
- 5 ox livers affected with multiple abscesses.
- 4 sheep plucks affected with parasitic cysts.

The Regulations also contain requirements relating to the protection of meat from contamination by dirt and flies in shops, on stalls and during transit. Seven notices were served during the year for contraventions of the Regulations.

The screening of meat on sale at stalls and shops has been maintained, but stallholders are found to require constant supervision in this respect. The installation of refrigerators is now common and most of the larger shops are provided with this means for the storage of meat.

Thirty-seven visits were made to the four wholesale meat factories in the Borough. On each occasion the premises were found to be in a clean condition and the meat sound and free from disease.

Unsound food.—The following foodstuffs were examined and condemned by the Council's Food Inspectors and surrendered to the Council for destruction in accordance with Section 47 of the Public Health (London) Act, 1891:—

4 tons 3 cwt. 1 qtr. tinned chicken and ham.
 5 cwt. meat.
 48 tins meat.
 235 rabbits.
 2 cwt. 16 lbs. bacon.
 72 tins sausages.
 11 cwt. 2 qrs. fish.
 1 cwt. crabs.
 1 qtr. shrimps.
 956 tins salmon, herrings, etc.
 1,152 tins sardines.
 4 cwt. 3 qrs. fruit.
 6 cases dried fruit.
 2,590 tins fruit.
 180 bottles fruit.
 480 jars asparagus.
 240 tins tomatoes.
 4 boxes tomatoes.
 1 case cucumbers.
 1 barrel pickled cucumbers.
 1 case peas

2,218 jars jam.
 2,214 tins milk.
 163 cases cheese.
 1 case candied peel.
 24 tins coffee.
 384 bottles sauce.
 6 cases cake powder.
 1 case egg powder.
 72 jars soup.
 744 tins soup.
 72 jars salmon paste.
 288 jars pickles.
 16 cases gingerbread.
 1 case tapioca.
 533 tins cherries.
 4 cases cereals.
 1 cwt. flour.
 1 case cake.
 400 tins prunes.
 14 jars mincemeat.
 20 slabs toffee.
 16 cases various foodstuffs.

In addition, 10,368 tins of condensed milk were released for pig feeding.

The weight of the foodstuffs condemned was:—

	Tons.	Cwts.	Qrs.	Lbs.
Meat, bacon and rabbits	4	19	0	19
Fish	..	11	1	..
Fruit and vegetables	..	6	3	..
Provisions, etc... ..	14	7	1	..
Total	20	4	1	19

Bakehouses.—There are 96 bakehouses in the Borough, 48 of which are underground. Two hundred and eight inspections of bakehouses were made during the year and 29 notices were served requiring the cleansing of walls and ceilings.

The following is a summary of the food premises in the Borough that are regulated by Statute, together with the number of inspections made:—

		No. of premises.	No. of inspections made.
London County Council By-laws	Fish-friers and Curers ..	94	162
Do. do.	Slaughter-houses—Cattle ..	12	444
Do. do.	Cowhouses	3	33
Milk and Dairies Order, 1926 ..	Milk Purveyors	428	1400
Factory and Workshops Act ..	Bakehouses (above ground) ..	48	} 208
	Do. (underground) ..	48	
London County Council (General Powers) Act	Ice Cream Premises	225	292
London County Council (General Powers) Act and Public Health Meat Regulation, 1924 ..	Coffee Shops, Restaurants, etc.	215	191
Do. do. ..	Preserved Meat Factories ..	4	58
Do. do. ..	Butchers	153	145
Do. do. ..	Meat Stalls	40	868
Do. do. ..	Provision Shops	39	214
Do. do. ..	Butchers' Stores	40	75
London County Council (General Powers) Acts	Various	334	554
Hackney Borough Council By-laws	Market Streets with 407 Food Stalls	..	193
Totals		1683	4837

In addition there are a large number of itinerant vendors who hawk food around the streets. The food traders' stores now number 334. All were inspected before a licence was granted.

Thirty-six complaints as to the condition of food premises or the food sold were received during the year.

One hundred and twenty-four notices were served for defects or contraventions of the law relating to food premises.

ADULTERATION OF FOOD.

Food and Drugs (Adulteration) Act, 1928.—Samples of food for chemical analysis are collected by the Sanitary Inspectors, who are appointed to act as Sampling Officers under this Act. Those samples taken in strict conformity with the requirements of the Act are described in this report as "formal samples," whilst those samples which are purchased without disclosing to the vendor the fact that samples are being taken for analysis are referred to as "informal samples."

The samples taken during the year are described in the following table, the results of analyses being also shown:—

Description of Article.	Formal Samples.		Informal Samples.	
	Number taken.	Number adulterated	Number taken.	Number adulterated
Almonds (ground)	2	..	..	..
Brawn	64	..	..	..
Butter	6	1	27	1
Cake	7	..	1	..
Cake powder	2	..	..	..
Camphorated oil	6	1	..	..
Cocoa	12	..	..	..
Coffee	9	..	..	..
„ extract	4	..	..	..
„ mixture	3	..	..	..
Cordials	3	..	..	..
Cream	20	1	..	..
Custard powder	1	..	..	..
Dripping	12	..	..	..
Fish paste	7	..	..	..
Flour	..	..	1	..
Fruit (crystallised)	4	..	..	..
„ (dried)	6	..	..	..
„ (tinned)	6	..	3	..
Jam	3	1	..	..
Jelly	6	..	..	..
Lard	12	..	..	..
Margarine	48	..	..	..
Mayonnaise	1	..	..	..
Meat (minced or chopped)	9	5	..	..
Meat paste	3	..	..	..
Milk	550	10	13	1
„ (sterilised)	43	..	1	..
„ (sweetened condensed skimmed)	21	..	2	..
Mincemeat	3	..	..	..
Mineral waters	8	..	..	..
Mustard	7	..	..	..
Mustard mixture	5	..	..	..
Olive oil	6	..	..	..
Pepper	16	..	..	..
Pickles	7	..	..	..
Sauce	6	..	..	..
Sausages	27	..	..	..
Sugar (icing)	1	..	..	..
Sweets	30	..	..	..
Tea	2	..	2	..
Vinegar (malt)	12	..	..	..
Water	..	..	2	..
Totals	1000	19	52	2

Details are given below with regard to the adulterated samples and the action taken by the Council in respect thereof:—

Description of Article.	Nature and Extent of Adulteration.	Action taken.
<i>Food and Drugs (Adulteration) Act, 1928.</i>		
17Z Milk	14.3% fat abstracted ..	Proceedings. Ordered to pay £2 2s. costs.
22B „	6.3% „ „ ..	Proceedings. Ordered to pay £3 3s. costs.
8N „	4.3% „ „ ..	Proceedings. Ordered to pay £3 3s. costs.
19B „	6.6% „ „ ..	Vendor cautioned.
11N „	2.0% „ „ ..	„ „
7P „	3.41% added water ..	„ „
52H „	2.23% „ „ ..	„ „
12F „	1.18% „ „ ..	„ „
8P „	1.06% „ „ ..	„ „
7V „	0.36% „ „ ..	„ „
6DW Milk	2.0% fat abstracted ..	Informal sample.
12S Butter	0.8% excess water ..	Vendor cautioned.
13WP Butter	0.5% „ „ ..	Informal sample.
21S Camphorated oil	29.5% deficient in camphor	Proceedings. Statutory defence—warranty. Summons withdrawn on undertaking of Counsel not to place any other similar bottles of camphorated oil on the market.
<i>Public Health (Preservatives, etc., in Food) Regulations, 1925-1927.</i>		
6E Minced Beef ..	1,310 parts per million sulphur dioxide	Proceedings. Ordered to pay £2 2s. costs.
5E „ „ ..	1,200 „ „ ..	Proceedings. Ordered to pay £2 2s. costs.
44Z „ „ ..	813 „ „ ..	Proceedings. Ordered to pay £2 2s. costs.
43Z „ „ ..	288 „ „ ..	Proceedings. Fined £3 and ordered to pay £2 2s. costs.
45Z „ „ ..	243 „ „ ..	Proceedings. Fined £5 and ordered to pay £2 2s. costs.
20K Jam	70 „ „ ..	Vendor cautioned.
16T Cream	0.38% boric acid ..	„ „

There were thus nine prosecutions instituted during the year, resulting in the payment of £26 18s. 0d. in fines and costs.

The average composition of the formal milk samples taken in 1930 is shown in the following table in order that a comparison may be made with the standard of genuineness accepted by the Ministry of Agriculture, namely, 3.0 per cent. milk fat and 8.5 per cent. solids not fat:—

Months.	Number of Formal Samples taken.	Average Composition of all Samples.		Average Composition of Genuine Samples.	
		Percentage of Milk Fat.	Percentage of Solids not Fat	Percentage of Milk Fat.	Percentage of Solids not Fat
January ..	24	3.56	8.86	3.56	8.86
February ..	36	3.83	8.85	3.83	8.85
March ..	60	3.43	8.85	3.44	8.88
April ..	36	3.45	8.85	3.48	8.86
May ..	48	3.38	8.84	3.40	8.84
June ..	64	3.34	8.90	3.30	8.91
July ..	56	3.46	8.80	3.46	8.80
August ..	24	3.50	8.81	3.50	8.81
September ..	65	3.50	8.75	3.50	8.75
October ..	61	3.70	8.82	3.70	8.82
November ..	86	3.77	8.89	3.77	8.89
December ..	33	3.65	8.81	3.66	8.82
Average ..	593	3.54	8.83	3.55	8.84

It will be seen that the average fat content of the samples taken in the Borough exceeded the Ministry of Agriculture standard by no less than 0.54 per cent., notwithstanding the fact that 11 of the samples taken were adulterated.

Under the Milk and Dairies (Consolidation) Act, 1915, a purveyor of milk from whom a sample has been taken for analysis may, within 60 hours after the sample of milk was procured, if he proposes to establish a warranty defence, request the local authority to take a sample from a corresponding milking in the course of transit or delivery to his premises. During 1930 requests for the taking of samples in course of transit or delivery were received in four cases. In each case samples were not taken from the wholesalers as those secured from the retailers had been certified to be of genuine composition.

Artificial Cream Act, 1929.—This Act is designed to regulate the manufacture and sale of any substance resembling cream and containing nothing but the ingredients of cream.

Section 1 (1) provides that no substance shall be sold under a designation including the word "cream" unless that word is immediately preceded by the word "artificial."

Section 2 requires that, with certain specified exceptions, all premises where artificial cream is manufactured or sold must be registered with the Food and Drugs Authority.

At the end of 1930 two premises were on the register kept in this connection. At one of these artificial cream is made and sold, and at the other this substance is sold but not manufactured.

Public Health (Condensed Milk) Regulations, 1923 and 1927.—Twenty-three samples of condensed milk were taken during the year and each was found to comply with the Regulations in every respect.

Public Health (Dried Milk) Regulations, 1923 and 1927.—No samples of dried milk were taken during the year.

Public Health (Preservatives, etc., in Food) Regulations, 1925-1927.—The action taken in regard to the samples of food found to contain preservative in contravention of the Regulations is shown on page 86 of this report.

Agricultural Produce (Grading and Marking) Act, 1928.—Pamphlets have been distributed to vendors of food in the Borough drawing attention to the requirements of the various Orders issued under this Act.

No contraventions of the Act were noted during the year.

Chemical and Bacteriological Examination of Food.—The names of the laboratories at which this work is carried out on behalf of the Council are given on page 36 of this report.

Food Poisoning.—No case of food poisoning has occurred in the Borough during the past twelve months.

In July last there was reported the case of a child who had died after an illness lasting only a few hours. The clinical history was thought to be suggestive of food poisoning. Material forwarded to the Ministry of Health for bacteriological examination established the fact that the child's death was not attributable to food poisoning and subsequent investigation resulted in the death being ascribed, at the Coroner's inquest, to sunstroke.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

The following diseases are compulsorily notifiable in Hackney:—

- | | |
|---|------------------------------------|
| (d) Acute Encephalitis Lethargica. | (a) Erysipelas. |
| (g) Acute Influenzal Pneumonia. | (h) Glanders. |
| (d) Acute Polioencephalitis. | (h) Hydrophobia. |
| (c) Acute Poliomyelitis. | (g) Malaria. |
| (g) Acute Primary Pneumonia. | (e) Ophthalmia Neonatorum. |
| (c) Cerebro-spinal Fever. | (i) Plague. |
| (a) *Chickenpox. | (a) Puerperal Fever. |
| (a) Cholera. | (f) Puerperal Pyrexia. |
| (a) Continued Fever. | (a) Relapsing Fever. |
| (a) Diphtheria (or Membranous Croup). | (a) Scarletina (or Scarlet Fever). |
| (g) Dysentery. | (a) Smallpox. |
| (a) Enteric (Typhoid or Paratyphoid) Fever. | (b) Tuberculosis. |
| | (a) Typhus Fever. |

* Chickenpox became notifiable in Hackney on 7th February, 1930, by an Order made by the Minister of Health under the Public Health (London) Act, 1891.

The Statutes under which these diseases are notifiable are as follow:—

- (a) Public Health (London) Act, 1891.
- (b) Public Health (Tuberculosis) Regulations, 1912.
- (c) Public Health (Cerebro-spinal Fever and Acute Poliomyelitis) Regulations, 1912.
- (d) Public Health (Acute Encephalitis Lethargica and Acute Polio-Encephalitis) Regulations, 1918.
- (e) Public Health (Ophthalmia Neonatorum) Regulations, 1926.
- (f) Public Health (Notification of Puerperal Fever and Puerperal Pyrexia) Regulations, 1926.
- (g) Infectious Diseases (London) Regulations, 1927.
- (h) Diseases of Animals Act.
- (i) Plague Regulations, 1910.

†Table showing the Notifications received, Removals to Hospitals and Deaths from Infectious Diseases (except Tuberculosis) in 1930.

Disease.	Number of Cases Notified.	Number of Cases admitted to Hospitals.	Number of Deaths.
Smallpox	493	493	1
Chickenpox	648	41	..
Scarlet Fever	930	875	4
Diphtheria	669	652	34
Enteric Fever	4	4	1
Puerperal Fever	4	3	2
Puerperal Pyrexia	51	48	..
Acute Primary Pneumonia	83	32	10
Acute Influenzal Pneumonia	6	1	2
Erysipelas	107	79	8
Cerebro-spinal Fever	4	4	4
Acute Poliomyelitis	1	1	..
Ophthalmia Neonatorum	11	6	..
Encephalitis Lethargica	..	..	3
Totals	3,011	2,239	69

† Cases of mistaken diagnosis are excluded from this table.

Table showing Notifications of Infectious Disease received in 1930, in Age Groups.

Disease.	Cases Notified.												
	At all Ages.	At Ages—Years.											
		Under 1.	1 to 2.	2 to 3.	3 to 4.	4 to 5.	5 to 10.	10 to 15.	15 to 20.	20 to 35.	35 to 45.	45 to 65.	65 and upwards.
Smallpox	493	8	3	4	14	12	93	71	90	112	39	43	4
Chickenpox	648	12	24	37	53	82	348	62	21	5	3	1	..
Scarlet Fever	930	4	21	51	62	100	418	131	53	75	11	3	1
Diphtheria	669	23	28	46	55	71	259	74	41	50	16	4	2
Enteric Fever	4	..	..	..	..	..	..	2	..	1	1	..	..
Puerperal Fever	4	..	..	..	..	..	..	..	..	3	1	..	..
Puerperal Pyrexia	51	..	..	..	..	..	..	1	5	35	7	3	..
Acute Primary Pneumonia ..	83	4	3	6	..	5	14	5	5	12	5	17	7
Acute Influenzal Pneumonia	6	..	..	..	..	..	..	..	1	1	1	2	1
Erysipelas	107	5	2	1	..	..	6	5	2	20	13	41	12
Cerebro-spinal Fever .. .	4	..	1	..	..	..	1	..	1	1	..	..	..
Acute Poliomyelitis .. .	1	..	1	..	..	..	..	..	..	..	..	..	..
Ophthalmia Neonatorum ..	11	11	..	..	..	..	..	..	..	..	..	..	..
Totals	3011	67	83	145	184	270	1139	351	219	315	97	114	27

Cases of mistaken diagnosis are excluded from this Table.

Table showing Notifications of Infectious Disease received in 1930 in Electoral Wards and Registration Sub-Districts.

Disease.	Electoral Wards.								Registration Sub-Districts.			
	Stamford Hill.	West Hackney.	Kingsland.	Downs.	Clapton Park.	Homerton.	South Hackney.	Hackney.	North.	Central.	South-East.	South-West.
Smallpox	4	8	16	17	210	136	65	37	24	199	178	92
Chickenpox	53	60	66	37	163	144	45	80	104	170	190	184
Scarlet Fever	137	68	67	88	286	155	55	74	234	274	204	218
Diphtheria	71	69	60	66	182	95	55	71	115	193	152	209
Enteric Fever	1	..	..	..	2	..	1	..	1	2	1	..
Puerperal Fever	..	..	1	1	1	..	1	..	1	1	..	2
Puerperal Pyrexia	10	5	6	5	13	3	4	5	14	16	7	14
Acute Primary Pneumonia	14	..	11	4	13	21	11	9	19	9	39	16
Acute Influenzal Pneumonia	..	..	..	..	1	2	2	1	1	..	3	2
Erysipelas	15	5	6	12	24	15	16	14	19	25	35	28
Cerebro-spinal Fever	..	..	1	..	1	1	1	..	..	1	1	2
Acute Poliomyelitis	1	..	..	..	..	..	..	..	1	..	..	..
Ophthalmia Neonatorum	3	2	1	1	2	2	..	..	4	3	2	2
Totals	309	217	235	231	898	574	256	291	537	893	812	769

Cases of mistaken diagnosis are excluded from this Table.

Table showing Age Groups of Deaths from Notifiable Infectious Disease in 1930.

Disease.	Total cases notified.	Age Groups of Deaths.												Total deaths at all ages.
		Under 1.	1 to 2.	2 to 3.	3 to 4.	4 to 5.	5 to 10.	10 to 15.	15 to 20.	20 to 35.	35 to 45.	45 to 65.	65 and upwards.	
Smallpox	493	..	..	..	..	..	..	..	..	..	..	1	..	1
Chickenpox	648	..	..	..	..	..	..	..	..	..	..	..	..	..
Scarlet Fever	930	..	..	..	1	1	1	1	..	..	..	..	..	4
Diphtheria	669	2	4	4	4	2	11	4	2	1	..	..	..	34
Enteric Fever	4	..	..	..	..	..	..	..	..	..	..	..	1	1
Puerperal Fever	4	..	..	..	..	..	..	..	..	2	..	..	..	2
Puerperal Pyrexia	51	..	..	..	..	..	..	..	..	..	..	..	..	..
Acute Primary Pneumonia	83	..	..	1	..	..	..	..	1	..	1	7	..	10
Acute Influenzal Pneumonia	6	..	..	..	..	..	..	..	..	..	..	2	..	2
Erysipelas	107	..	..	1	..	..	..	..	..	1	1	5	..	8
Cerebro-spinal Fever	4	..	1	..	..	..	1	..	..	2	..	..	..	4
Acute Poliomyelitis	1	..	..	..	..	..	..	..	..	..	..	..	..	..
Ophthalmia Neonatorum	11	..	..	..	..	..	..	..	..	..	..	..	..	..
Acute Encephalitis Lethargica	..	..	..	..	..	..	..	..	..	2	..	..	1	3
Totals	3011	2	5	6	5	3	13	5	3	8	2	15	2	69

VACCINATION.

Following upon the transfer of the powers of the late Board of Guardians in regard to vaccination to the Borough Council, it was decided, wherever possible, to re-appoint the Public Vaccinators, provided they had a surgery within the Borough and made suitable arrangements for telephone messages to be received from the Town Hall.

In accordance with the request of the London County Council the arrangements made with Dr. J. I. P. Wilson, Medical Superintendent of Hackney Hospital, for the vaccination of In-patients of the Hackney Hospital and persons resident in institutions attached thereto were continued until the end of the year.

The following schedule shows the names and addresses of the Public Vaccinators and Deputy Public Vaccinators appointed by the Council to carry out the work of vaccination in the Borough:—

Public Vaccinators' Districts.	Name and Address of Public Vaccinator.	Name and Address of Deputy Public Vaccinator.
North Hackney	Dr. Montague Smith, 10, Kenninghall Road, Clapton, E.5	Dr. A. W. F. Edmonds, 72, Nightingale Road, Clapton, E.5.
South-West Hackney ..	Dr. J. D. Ross, 251, Mare Street, E.8.	Dr. A. E. Ross, 251, Mare Street, E.8.
Central Hackney	Dr. A. G. Southcombe, 83, Sidney Road, Homerton, E.9.	Dr. K. M. Gifford, 382, Wick Road, E.9.
South-East Hackney ..	Dr. M. Anderson, 224, Mare Street, Hackney, E.8.	Dr. H. A. King, 184, Mare Street, Hackney, E.8.
Hackney Hospital, High Street, E.9.	Dr. J. I. P. Wilson, Hackney Hospital, High Street, E.9.	Dr. J. Turtle, 35, High Street, Homerton, E.9.
Homerton Central Institution, Sidney Road, E.9.		
Homerton Children's Home, Sidney Road, E.9.		

The arrangements for vaccination as set out in the Vaccination Order cannot give the best results to the Borough and are unsatisfactory to the medical practitioners carrying out vaccination.

- (1) There is too much clerical detail in some respects, and in others the register does not give all the information desirable.
- (2) The fees require reconsideration in several respects, for instance, as regards fruitless visits at the request of the Public Health Department.
- (3) Unsuccessful vaccinations should entail the same payment as successful; the same skill and knowledge is required to carry out the operation.

The entire question of conditions of payment and procedure will no doubt be carefully considered as soon as the change-over from the Poor Law to the Borough service has been working for a reasonable period when many alterations could be made with great advantage to the public and the Borough.

The number of successful vaccinations and re-vaccinations performed by the Public Vaccinators and Deputy Public Vaccinators during the year were as follow:—

Public Vaccinators' Districts.	At Surgery or elsewhere other than at Home.	At Home.	At Institutions.	Total.
North	118	370	..	488
Central	43	757	..	800
South-West	379	374	..	753
South-East	252	492	..	744
Hackney Hospital, etc.	..	..	85	85
Totals	792	1993	88	2870

A summary of the proceedings under the Vaccination Acts during the year is given on page 97.

The Public Health (Smallpox Prevention) Regulations, 1917, empowers the Medical Officer of Health of a local authority, on the occurrence of a case of smallpox and where the circumstances, in his opinion, so require and permit, to perform the vaccination or re-vaccination of any person who has been in contact with the infection and is willing to be vaccinated, and without charge to the person.

The action taken under these Regulations during the year was as follows:—

Number of primary vaccinations ..	38
Number of re-vaccinations ..	96
Total	134

Smallpox.—There were 493 notifications of smallpox in the Borough during 1930, and several cases of smallpox in other Boroughs were related to Hackney in that their movements in the Borough required action by the Public Health Department.

These cases of smallpox and the administrative measures rendered necessary by Memo. 71A (Med.) of the Ministry of Health caused the greatest dislocation imaginable to the ordinary routine work of the Public Health Department. At one time it was necessary to employ three additional visiting nurses and one temporary clerk in addition to the whole-time services of a permanent member of the clerical staff; two of the health visitors were put upon this work at one time entirely, and the Inspectors and Health Visitors all had to take a share in addition to carrying on their urgent health work. It was also necessary to obtain additional assistance as regards vaccination and medical inspection of home contacts, staff employed in factories and workshops where cases had occurred, school absentees and notified cases of chickenpox.

All these measures caused also a very considerable additional expense to the rates and would have been entirely unnecessary if it were not for the fact that vaccination in this district has been largely refused and that most persons living in the Borough are unprotected from smallpox.

The assistance of Dr. Barlow made it possible to supervise the work and limit the spread of the disease. Dr. Barlow's services were of the utmost value to the Department.

Observation cases, that is cases suspected to be smallpox but requiring observation before a positive diagnosis could be made, sent to hospital during 1929 were two in number, one being smallpox and the other not smallpox.

Neither was seen by Consultants owing to the desirability of immediate action.

Observation cases during 1930 were ten in number and six proved to be smallpox. Six of the ten observation cases were seen by Consultants who advised removal to hospital. Of the six observation cases seen by Consultants five were smallpox and one not smallpox. The final diagnosis of some of these cases is extremely difficult, and may, in fact, be impossible until a considerable period of observation has elapsed.

None of the cases sent to hospital for observation contracted smallpox as the result of removal to South Wharf Receiving Station. In fact, one case which was sent in for observation by a Consultant and diagnosed as smallpox at South Wharf was discharged from Joyce Green Smallpox Hospital without misadventure after a fortnight in hospital upon determination of the fact that the patient was not suffering from that disease. The majority of observation cases, as a matter of fact, are removed from homes where they have already been exposed to closer contact with infection than would occur in the hospital, as for instance from the same bed as a patient.

The number of contacts under supervision during the year 1930 was 8,361.

Several Metropolitan Boroughs and the Metropolitan Branch of the Society of Medical Officers of Health informed the Ministry of Health that the provisions of Circular 71A (Med.) might, in their opinion, be relaxed in view of the mild nature of the disease. The Ministry of Health agreed in some respects and the arrangements for supervision of contacts have to some extent been altered as regards the mild type of disease, but the supervision of contacts still remains a sufficiently onerous duty.

The cases of this disease notified in the Borough in the past five years were as follow:—

Year.	No. of cases notified.
1926	—
1927	3
1928	1
1929	58
1930	493
Total	555

All the cases notified during the year were, of course, removed to hospital.

The following table shows the distribution of the cases in the Electoral Wards and the Registration Sub-districts of the Borough:—

Area.	No. of cases.	Attack-rate per 1,000 living.
The Borough	493	2.30
Wards—		
Stamford Hill	4	0.12
West Hackney	8	0.43
Kingsland	16	0.73
Downs	17	0.99
Clapton Park	210	5.15
Homerton	136	3.95
South Hackney	65	3.00
Hackney	37	1.39
Registration Sub-Districts—		
North	24	0.44
Central	199	3.93
South-West	92	1.69
South-East	178	3.26

It will be seen that the disease was most prevalent in the Clapton Park and Homerton Wards of the Borough.

There was one death from this disease during the year.

Summary of Proceedings under the Vaccination Acts, 1867 to 1898, during the year 1930.

Reg'stration Sub-District.	No. of Cases in Birth Lists received during Year.	No. of Certificates of Vaccination received.	No. of Certificates of Postponement owing to			No. of Certificates under Section 2 of Vaccination Act, 1898, and No. of Statutory Declarations under Section 1 of the Vaccination Act, 1907.	No. of Certificates of Insusceptibility or of having had Smallpox.	No. of Cases.		No. of Entries in Lists sent to Public Vaccinator.
			Health of Child.	Condition of House.	Prevalence of Infectious Disease.			Parents Removed out of District.	Otherwise not found.	
North	520	439	45	..	..	176	..	40	13	334
Central	2102	1006	14	..	..	1023	1	933	68	150
South-West ..	593	513	42	..	1	261	..	40	17	298
South-East ..	1076	532	5	..	..	513	..	186	92	234
TOTAL ..	4291	2490	106	..	1	1973	1	1199	190	1016

Chickenpox.—Owing to the prevalence of smallpox, the Council made an Order in pursuance of Sec. 56 of the Public Health (London) Act, 1891, making chickenpox compulsorily notifiable in the Borough from 7th February. The Order was in force at the end of the year. The number of notifications received was 648.

Scarlet Fever or Scarlatina.—The number of cases of scarlet fever notified during the year was 984. Fifty-four of the patients notified as suffering from this disease were found, after admission to hospital, not to be suffering from an infectious disease. The actual number of cases of scarlet fever occurring in the Borough during the year was, therefore, 930. This is an increase of 102 upon the actual number of cases that occurred during 1929. The attack-rate for scarlet fever was 4.3 per 1,000 persons living, and for England and Wales 2.76.

The number of cases removed to hospital during the year was 875. This is equal to 88.4 per cent. of the total number of notifications received.

The following table shows the distribution of scarlet fever in the Electoral Wards and Registration Sub-districts of the Borough:—

Area.							No. of cases.	Attack-rate per 1,000 living.
The Borough	..	..	..	..	..	..	930	4.3
Wards:—								
Stamford Hill	..	..	..	..	..	..	137	4.1
West Hackney	..	..	..	..	..	..	68	3.7
Kingsland	..	..	..	..	..	..	67	3.1
Downs	..	..	..	..	..	..	88	5.1
Clapton Park	..	..	..	..	..	..	286	7.0
Homerton	..	..	..	..	..	..	155	4.5
South Hackney	..	..	..	..	..	..	55	2.5
Hackney	..	..	..	..	..	..	74	2.8
Registration Sub-districts:—								
North	..	..	..	..	..	..	234	4.3
Central	..	..	..	..	..	..	274	5.4
South-West	..	..	..	..	..	..	218	4.0
South-East	..	..	..	..	..	..	204	3.7

It will be seen that scarlet fever was most prevalent in the Clapton Park Ward of the Borough.

Twelve of the 930 cases of scarlet fever were patients in the same family as a person who had within the previous 28 days returned from hospital after having been treated for this disease.

Cases of this kind are called “return” cases, and careful investigation is made in these cases with a view to ascertaining whether there is any direct evidence that infection has been conveyed by the discharged patient. No such evidence could be obtained in regard to the 12 “return” cases.

The following table shows the housing conditions of those persons under 15 years of age who were attacked by scarlet fever during the year:—

Cases removed to Hospital.			Cases nursed at Home.		
Less than 1 person per room.	1 to 2 persons per room.	More than 2 persons per room.	Less than 1 person per room.	1 to 2 persons per room.	More than 2 persons per room.
105	557	88	21	16	..

The deaths from scarlet fever during 1930 numbered 4, which is equal to a case mortality of 0.43 per cent. attacked, and a death-rate of 0.018 per 1,000 inhabitants. The mortality rate for London from scarlet fever during the year was 0.02 per 1,000 inhabitants.

Diphtheria and Membranous Croup.—There were 732 cases of diphtheria and membranous croup notified during the year. Sixty-three of the patients notified were found, after admission to hospital, not to be suffering from an infectious disease. The actual number of cases occurring in the Borough during the year was, therefore, 669. This is an increase of 75 upon the actual number of cases that occurred in 1929. The attack-rate was 3.1 per 1,000 persons living, compared with 1.84 for England and Wales.

There were 652 cases removed to hospital during the year. This is equal to 89.2 per cent. of the total number of notifications of this disease received.

The following table shows the distribution of diphtheria in the Electoral Wards and Registration Sub-districts of the Borough:—

Area.	No. of cases.	Attack-rate per 1,000 living.
The Borough	669	3.1
Wards:—		
Stamford Hill	71	2.1
West Hackney	69	3.7
Kingsland	60	2.7
Downs	66	3.9
Clapton Park	182	4.5
Homerton	95	2.8
South Hackney	55	2.5
Hackney	71	2.7
Registration Sub-districts:—		
North	115	2.1
Central	193	3.8
South-West	209	3.8
South-East	152	2.8

It will be seen that diphtheria was most prevalent in the Clapton Park Ward of the Borough.

The following table shows the housing conditions of those persons under 15 years of age who were attacked by diphtheria during the year:—

Cases removed to Hospital.			Cases nursed at Home.		
Less than 1 person per room.	1 to 2 persons per room.	More than 2 persons per room.	Less than 1 person per room.	1 to 2 persons per room.	More than 2 persons per room.
76	404	67	4	5	..

The deaths from diphtheria and membranous croup during the year numbered 34. This mortality is equal to a death-rate of 5.1 per cent. attacked and 0.16 per 1,000 inhabitants, as compared with a death-rate of 4.2 per cent. attacked and 0.13 per 1,000 inhabitants for the previous year. The death-rate from diphtheria for London during the same period is 0.10 per 1,000 inhabitants.

During the year 2,629 swabbings from throats of persons suspected to be suffering from diphtheria were bacteriologically examined, of which 317 gave positive results, and 2,212 negative results.

Diphtheria Anti-toxin.—In accordance with the Anti-toxin Order of 1910, a supply of diphtheria anti-toxin was provided during the year, and issued as required to medical practitioners applying for it in cases of diphtheria or suspected cases of diphtheria amongst the poorer inhabitants of the Borough. During the year 135 bottles of anti-toxin of 8,000 units each were supplied to medical practitioners, most of which was used for prophylactic purposes.

Diphtheria Immunisation.—The active immunisation of persons against diphtheria with toxoid-antitoxin mixture has been in progress for some years past, and in London approximately one-half of the borough councils have established clinics for this purpose.

It may be stated that about 30,000 children under the age of 15 years in Greater London are known to be, or are being, protected against diphtheria by means of toxoid-antitoxin inoculation.

Diphtheria immunisation is undoubtedly worthy of an extensive trial. The process has already gained wide acceptance in the United States of America. In New York State a five-year campaign against diphtheria was concluded in 1930, and it is interesting to

note that there has been a decrease of 23,326 in the number of cases and of 1,484 in the deaths during the period 1926-30 as compared with the preceding quinquennium. The death-rate has been reduced from an average of 10.1 per 100,000 of the population in 1921-25 to 3.8 for the years 1926-30. Approximately 750,000 children, including 185,000 under the age of 5 years, have been immunised against diphtheria with toxoid-antitoxin.

This method of protective immunisation is now being used in other countries, including Belgium, France and Germany.

The London County Council, though not yet in a position to carry out the active immunisation of school children, has afforded this Council facilities for the distribution of leaflets and cards of application for treatment to children attending the schools in the Borough. The history of vaccination against smallpox suggests that we shall not attain the active immunisation of all children at an early age, but a local authority is justified in considering it has done all in its power to prevent loss of life and illness from diphtheria if it offers and urges immunisation.

The Diphtheria Immunisation Clinic was opened at the Central Maternity and Child Welfare Centre, No. 28, Lower Clapton Road, on the 6th January, 1928, Dr. F. Porter-Smith being the Medical Officer in charge.

Infants and children from six months of age are treated, and very encouraging results have been obtained, as shown in the following table:—

Year.	Schick Tested.			Com- menced treatment without Schick Test.	Naturally Immune.	Immunised.			Dis- continued treatment and struck off Register.	No. under treatment at end of year.
	Pre- School Age.	School Age.	Adults.			Pre- School Age.	School Age.	Adults		
1928	99	350	7	4	95	53	137	7	45	123
1929	77	282	14	70	73	74	168	4	54	193
1930	140	403	80	52	122	127	168	21	61	369

Enquiries as to the effect on the individual of the testing and injections were made as a routine and it can be stated that in no case has any physical disturbance resulted.

During the three years that the work has been in operation not one of the 1,049 persons who have been given certificates of immunity has contracted diphtheria. In one case, however, a child who had received her third injection and was waiting for a re-test in three months' time contracted diphtheria and was removed to

hospital. The attack of diphtheria was very slight, and if the diphtheria organisms had not been found to be present, the condition would have been described as tonsillitis. The organisms were only found on the third swabbing and not in large numbers, the child therefore had a considerable degree of resistance although, unfortunately, not an absolute protection against infection. In the clinic is displayed a notice reading "Your child is not safe against diphtheria until a certificate is signed by the Medical Officer of the Clinic," and in this particular case the parents of the child realised that, in the opinion of the Medical Officer of the clinic, the child could not be regarded as immune against diphtheria until a re-test had been carried out and a certificate of immunity issued. It is pleasing to note, however, that the other five children of the family continued their attendance. Despite the fact that they had all been sleeping in the same room as the patient prior to her removal to hospital, not one contracted the disease, and subsequently they received certificates of immunity.

Enteric Fever.—During the year under consideration 2 cases of enteric fever and 3 cases of paratyphoid B fever were notified. One of the persons notified as suffering from enteric fever was found, on admission to hospital, not to be affected with this disease. The actual number of cases of typhoid and paratyphoid fever occurring during the year was, therefore, four. This shows a decrease of four on the number of cases that occurred during 1929. The attack-rate was 0.02 per 1,000 inhabitants, compared with 0.07 for England and Wales.

Three of the cases were removed to hospital.

There was 1 death from typhoid fever in the Borough last year.

During the year 30 specimens of blood from persons suspected to be suffering from enteric fever were submitted to Widal's test. All gave a negative reaction.

Continued Fever.—There were no notifications of continued fever in the Borough during the year.

Typhus Fever.—There was not any notification of typhus fever in the Borough during the year.

Puerperal Fever.—There were 4 cases of puerperal fever notified during 1930; 3 of these were removed to hospital. The deaths from puerperal septicaemia numbered 2. The attack-rate for the year was 1.1 per 1,000 births, and the death-rate 0.57 per 1,000 births.

Puerperal Pyrexia.—During the year 51 cases were notified. Forty-eight cases were removed to hospital. The attack-rate was 14.5 per 1,000 births.

Lady Florence Barrett, M.D., M.S., attended as Consultant to 2 cases, and Dr. Margaret Basden, M.D., F.R.C.S., to 1 case. Two further cases were attended by Dr. Reynolds of Harley Street, as both the Council's Consultants were out of town.

Plague.—There were no notifications of plague in the Borough during the year.

Cholera.—There were no notifications of cholera in the Borough during the year.

Erysipelas.—There were 107 cases of erysipelas notified during 1930. This is equal to an attack-rate of 0.5 per 1,000 inhabitants, compared with 0.45 for England and Wales. Of the 107 cases notified, 79 were removed to hospital.

There were 8 deaths certified to be due to erysipelas.

Cerebro-spinal Meningitis.—During 1930 there were four cases of this disease notified in the Borough; all the cases were removed to hospital and terminated fatally.

Polio-myelitis.—There was one case of polio-myelitis notified in the Borough during the year, which was removed to hospital.

Ophthalmia Neonatorum.—During the year there were:—

Cases.			Vision Un- impaired.	Vision Impaired.	Total Blindness.	Deaths.
Notified.	Treated					
	At Home.	In Hospital.				
11	5	6	11	..	..	..

Encephalitis Lethargica.—No case of this disease was notified during the year. Three deaths occurred of patients notified in previous years.

Influenzal Pneumonia and Pneumonia.—There were 6 cases of influenzal pneumonia and 83 of primary pneumonia notified. As provided in the Regulations, where the nursing was found to be inadequate a nurse was sent from the Hackney District Nursing Association, in accordance with an arrangement made with the

Superintendent, at a fee of 1s. 3d. per visit. During the year 141 cases, including cases of pneumonia and broncho-pneumonia, were nursed and 2,288 visits were paid to those cases. Influenza, unless complicated by pneumonia, is not notifiable.

Malaria.—No case of this disease was notified during the year.

Dysentery.—No case of this disease was notified during the year.

NON-NOTIFIABLE DISEASES.

Measles.—Towards the end of the year 1929 an epidemic of measles developed in London, but the outbreak did not reach Hackney until February, 1930. This disease is not notifiable in the Borough, therefore it is not possible to give accurate figures relating to its incidence during the year. Some idea of its prevalence can be gained, however, from the following table which shows the number of cases discovered by the Health Visitors or reported to the Public Health Department by the Head Teachers of the London County Council schools in the Borough, doctors, parents, etc.:—

Month.	No. of Cases which came to notice.					
January ..	..	..	..	..	..	355
February ..	..	..	..	..	..	705
March ..	..	..	..	..	..	928
April ..	..	..	..	..	..	311
May ..	..	..	..	..	..	78
June ..	..	..	..	..	..	27
July ..	..	..	..	..	..	34
August ..	..	..	..	..	..	4
September ..	..	..	..	..	..	2
October ..	..	..	..	..	..	4
November ..	..	..	..	..	..	9
December ..	..	..	..	..	..	4
Total ..	..	..	..	..	..	2,461

The Maternity and Child Welfare Committee of the Council had under consideration on the 12th December, 1929, the steps which should be taken in the Borough to prevent the spread of infection and to limit mortality by ensuring the provision of adequate medical and nursing assistance at the earliest possible stage of the illness. Arrangements were made for the London County Council's School Nurses to supply to the Public Health Department daily lists of absentees from school who might be suffering from measles. These children were visited forthwith by the Council's Health Visitors and it was found necessary to engage a special visiting nurse.

The Officers of the Public Health Department were thus enabled throughout the epidemic to secure the removal of cases to hospital or the provision of nursing assistance in the home where this was needed several days earlier than would have been the case if the usual routine had been followed, under which the School Attendance Officer visits the home of an absentee and reports to the Head Teacher who, in turn, informs the Public Health Department by post that a child is absent from school on account of the presence in the home of a case of measles.

Owing to the pressure upon the accommodation in the hospitals of the late Metropolitan Asylums Board consequent upon the presence of smallpox in the metropolis, it became necessary for the Board to re-introduce in January, 1930, the scheme formulated in 1926 under which applications for the admission of cases of measles and scarlet fever are referred to the local Medical Officer of Health for investigation of the facilities for isolation and treatment in the homes of the patients.

This selection of cases for removal to hospital continued until April, 1930, and I am pleased to report that the delay in securing admission of cases of measles and scarlet fever was in no case of longer duration than a day or two. On the other hand the prompt removal of cases from overcrowded homes and of cases in urgent need of hospital treatment was ensured.

One hundred and fifty-four cases of measles were removed to hospital in 1930. Thirty-five deaths from measles occurred during the year. The annual mortality per 1,000 inhabitants was, therefore, 0.16, as compared with 0.23 for London. The results obtained from the proper treatment of measles is not merely that death is escaped, but that invalidism, which may culminate in tuberculosis, or impairment of eyesight or other crippling weakness is prevented.

Influenza.—During 1930 there were 23 deaths in the Borough.

This is a decrease of 119 on the deaths from this cause registered during 1929. The annual mortality rate from influenza is 0.107 per 1,000 inhabitants, as compared with 0.08 for London.

Diarrhoea.—The total number of deaths from this cause was 33, and of these 24 were under one year of age. The number of deaths from this disease in 1929 was 42. The annual mortality rate for diarrhoea and enteritis during the year is 0.15 per 1,000 inhabitants.

Whooping Cough.—The deaths from this cause during the year numbered 4. This is a decrease of 20 upon the number registered

during 1929. All of these deaths occurred in children under five years of age. The mortality for Hackney is equal to 0·018 per 1,000 inhabitants, and that for London, 0·03 per 1,000 inhabitants. The nurses of the Hackney District Nursing Association attended 4 cases and paid 65 visits.

Information was received from the headmasters and head-mistresses of elementary schools in Hackney of 102 cases occurring among their scholars during the year.

CONSTITUTIONAL DISEASES.

(For Table of Deaths see pages 166 and 167.)

Cancer.—There were 319 deaths during 1930 due to malignant disease. This is a decrease of 21 upon the number registered during 1929. The mortality rate from malignant disease for last year was, therefore, 1·48 per 1,000 inhabitants.

The following table gives the distribution of the deaths from this disease in the different sub-districts of the Borough.—

Sub-Districts.	North.	Central.	South-west.	South-east.
No. of Deaths from Malignant Disease	83	68	93	75
Mortality-rate per 1,000 inhabitants	1·5	1·3	1·7	1·4

Below is given a table showing the number of deaths and death rates due to malignant disease in this Borough for the 10 years ending 1930:—

Years.	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930
Borough of Hackney:—										
No. of Deaths ..	289	285	303	310	301	322	302	340	340	319
Death-rate per 1,000 inhabitants ..	1·28	1·26	1·33	1·36	1·31	1·40	1·34	1·56	1·59	1·48
London:—										
Death-rate per 1,000 inhabitants ..	1·31	1·30	1·35	1·40	1·40	1·42	1·43	1·48	1·51	1·55

Analysis of the Deaths from Cancer, Malignant Tumour, Sarcoma and other forms of Malignant Disease during the year.

	1-5	5-15	15-25	25-35	35-45	45-55	55-65	65-75	75-85	85 and upwards.	Total.
Brain and Meninges	..	..	..	3	..	4	3	..	..	..	10
Mouth and Annexæ	..	..	..	1	..	3	4	6	1	..	15
Æsophagus	..	..	..	..	1	5	5	6	1	..	18
Stomach	..	..	..	..	4	8	17	12	7	1	49
Pancreas	..	..	..	..	..	1	2	8	3	..	14
Intestine (large and small)	..	..	..	..	1	3	10	11	11	..	36
Rectum	..	..	..	..	2	4	8	7	2	1	24
Liver	..	..	..	..	2	5	5	7	4	1	24
Larynx	..	..	..	..	..	3	..	..	2	..	5
Lung	..	1	..	1	2	2	11	3	2	..	23
Bladder	..	..	..	..	..	..	4	1	5	..	10
Breast	..	..	..	..	4	11	8	11	8	2	44
Uterus and appendages	..	..	..	..	2	2	9	9	1	1	24
Bones and Joints	..	..	..	..	..	2	..	1	..	..	3
Other and ill-defined situations	..	..	..	..	..	4	6	8	1	1	20
	1	..	1	5	18	57	92	90	48	7	319

TUBERCULOSIS.

On 8th July, 1930, the Minister of Health issued the Public Health (Tuberculosis) Regulations, 1930, which consolidate and amend the Public Health (Tuberculosis) Regulations, 1912, 1921 and 1924. Among the amendments to the earlier Regulations are provisions to secure (a) the notification of a case of tuberculosis unless the practitioner in attendance on the patient has reasonable grounds for believing that it has already been notified to the Medical Officer of Health of the *same sanitary district*, and (b) more effective revision of the Register of Notifications kept by the Medical Officer of Health.

The new Regulations came into operation on the 1st January, 1931.

During the year under review 256 cases of pulmonary tuberculosis and 70 cases of non-pulmonary tuberculosis were notified for the first time under the Regulations of 1912.

The number of primary notifications received in each year since 1920 is shown in the following table:—

Year.	Pulmonary.	Non-Pulmonary.	Total.
1920 ..	410	139	549
1921 ..	361	105	466
1922 ..	319	85	404
1923 ..	387	89	476
1924 ..	334	115	449
1925 ..	356	109	465
1926 ..	330	88	418
1927 ..	336	80	416
1928 ..	293	80	373
1929 ..	284	79	363
1930 ..	256	70	326

The following is a summary of the age and sex distribution of the cases notified and the deaths from this disease during the year:—

Age Periods.	New Cases.				Deaths.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
0-1 ..	1	..	..	1	..	1	1	1
1-5 ..	1	..	9	3	1	1	5	2
5-10 ..	1	2	10	8	..	1	1	3
10-15 ..	5	2	3	4	1	1	1	..
15-20 ..	11	22	3	4	2	10	3	1
20-25 ..	13	24	2	4	10	15	1	1
25-35 ..	23	30	5	6	20	30	1	2
35-45 ..	27	24	..	4	14	11	1	1
45-55 ..	28	9	1	1	19	11	1	1
55-65 ..	18	6	..	..	12	5	..	..
65 and upwards	8	1	2	..	7	3	..	..
Totals ..	136	120	35	35	86	89	15	12

The following table shows the age and sex distribution of 86 new cases of tuberculosis which came to notice during the year otherwise than by notification under the Regulations:—

Age Periods.	Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.
0-1 ..	..	..	..	1
1-5 ..	1	1	1	..
5-10 ..	1	2	..	4
10-15 ..	..	1	1	..
15-20 ..	1	5	..	2
20-25 ..	6	4	2	2
25-35 ..	10	6	..	..
35-45 ..	9	8	..	..
45-55 ..	7	1	1	..
55-65 ..	1	3	..	..
65 and upwards	3	1	..	1
Totals ..	39	32	5	10

The sources from which information of these cases was obtained were as follow:—

Source of Information.	No. of Cases.	
	Pulmonary.	Non-Pulmonary.
Death Returns { From local Registrars	10	2
{ From Registrar-General	15	4
Posthumous Notifications	1	1
"Transfers" from other areas (other than transferable deaths)	38	8
Forms C and D (in respect of cases not previously known to the M.O.H.)	7	..
Other Sources	..	..

The total number of cases of both forms of the disease which came to notice during the year in the Borough, the Wards and the Registration Sub-districts, together with the attack rates per 1,000 persons living, is shown in the following table:—

Area.	No. of Cases.	Attack rate per 1,000 persons living.
The Borough	412	1.9
Wards.		
Stamford Hill	52	1.5
West Hackney	44	2.3
Kingsland	43	2.0
Downs	41	2.3
Clapton Park	66	1.6
Homerton	72	2.1
South Hackney	45	2.0
Hackney	49	1.8
Registration Sub-districts		
North	94	1.7
Central	105	2.0
South-West	107	1.9
South-East	106	1.9

The total number of notifications received during the year was:—

					Forms A and B.	Form C.	
						Poor Law Institutions.	Sanatoria.
Pulmonary	..	{ Males	179	51	117		
		{ Females	163	46	104		
Non-Pulmonary		{ Males	42	3	43		
		{ Females	45	..	19		
Totals					429	100	283

During the year there were 31 instances in which the death of an unnotified person was attributed to tuberculosis. In some of these the death certificates showed that the diagnosis was made *post-mortem*. In all the remaining cases the attention of the certifying practitioner was called to his failure to notify and in every instance a satisfactory explanation was received.

As shown in a foregoing table, the deaths from tuberculosis of Hackney residents registered during 1930 numbered 202. These deaths are classified as follows:—

Pulmonary tuberculosis	175
General tuberculosis	3
Tuberculous meningitis	14
Tuberculous peritonitis	1
Tuberculosis of other organs	9
	202

This number of deaths gives an annual mortality of 0·94 per 1,000 inhabitants.

The deaths are distributed in the sub-districts of the Borough as shown below:—

Sub-Districts.	North.	Central.	South-west.	South-east.
No. of deaths from Tuberculous Disease	43	51	47	61
Mortality rate per 1,000 inhabitants	·80	1·0	·85	1·1

The number of deaths from tuberculosis and the death-rate in each year since 1920 are shown in the following table:—

Year.	Pulmonary.	Non-Pulmonary.	Total.	Death-rate.
1920 ..	190	59	249	1·10
1921 ..	213	51	264	1·17
1922 ..	202	36	238	1·05
1923 ..	216	40	256	1·13
1924 ..	207	47	254	1·12
1925 ..	191	33	224	·98
1926 ..	180	21	201	·88
1927 ..	181	23	204	·90
1928 ..	160	24	184	·84
1929 ..	205	33	238	1·11
1930 ..	175	27	202	·94

In the following table the deaths from tuberculous diseases in the Borough for the last 15 years are shown, grouped in periods of three years:—

Three-year periods.	Annual average number of deaths from Tuberculous Disease.	Percentage decrease on the period 1916-1918.
		Per cent.
1916-1918	363	..
1919-1921	261	28.1
1922-1924	249	31.4
1925-1927	209	42.4
1928-1930	208	42.7

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1930.

These Regulations require the Medical Officer of Health to furnish the County Medical Officer of Health at the end of each quarter with a statement compiled from the register of notifications.

During the past year a review has been made of all the cases on the register and it was found that there remained a number of entries relating to patients who were known to the Tuberculosis Health Visitors to have been in comparatively good health for a number of years, but in regard to whom it has been impossible to obtain a certificate of recovery on account of the refusal of the patients to submit themselves for further medical examination. In order that the returns made to the County Medical Officer of Health might give an accurate indication as to the number of cases of tuberculosis residing in the Borough, it was decided to remove from the register the names of those patients who were notified not less than ten years ago and whose health has so far improved that they have not needed medical supervision for several years.

The following is a summary of the quarterly returns under these Regulations during the year:—

	Pulmonary.		Non-Pulmonary.	
	Male.	Female.	Male.	Female.
No. of cases on the Register of Notifications on 1st January	786	619	356	312
No. of cases notified for the first time during the year	136	120	35	34
No. of cases brought to notice otherwise than by notification	39	32	5	10
No. of cases reinstated to the Register ..	6	3	1	1
No. of cases removed from the Register during the year of account of having:—				
(a) recovered	83	33	52	37
(b) removed from the district	78	47	12	18
(c) died	97	92	13	13
(d) been inaccurately diagnosed	..	..	1	..
No. of cases remaining on the Register on 31st December	709	602	319	289

PREVENTION AND TREATMENT OF TUBERCULOSIS.

Dispensary Treatment of Tuberculosis.—The Council's scheme for the diagnosis and treatment of tuberculosis is carried out at two Tuberculosis Dispensaries, situated upon the premises of (a) the Metropolitan Hospital, Kingsland Road, E.8, and (b) the City of London Hospital for Diseases of the Heart and Lungs, Victoria Park, E.2. The Metropolitan Hospital Dispensary serves the Stamford Hill, West Hackney, Kingsland and Downs Wards of the Borough, whilst the City of London Hospital Dispensary provides for those persons living in the Clapton Park, Homerton, South Hackney and Hackney Wards.

The Metropolitan Hospital Dispensary also serves the Borough of Stoke Newington and the City of London Hospital Dispensary the Borough of Bethnal Green.

The estimated population of the areas of the two Dispensaries is as follows:—

Metropolitan Hospital Dispensary Area:—

Stamford Hill	33,400	
West Hackney	18,500	
Kingsland	21,800	
Downs	17,100	
		90,800
Estimated population (mid-1929), Borough of Stoke Newington	50,040	
		140,840

City of London Hospital Dispensary Area:—

Clapton Park	40,800	
Homerton	34,400	
South Hackney	21,700	
Hackney	26,700	
		123,600
Estimated population (mid-1929), Borough of Bethnal Green	110,500	
		234,100
Estimated population (mid-1929), Hackney		214,400

New Cases.—The number of new cases seen at the Dispensaries during the year was as follows:—

Dispensary.	Males.	Females.	Totals.
Metropolitan Hospital Dispensary	263	284	547
City of London Hospital Dispensary	382	434	816
The Borough	645	718	1,363

The sources through which the new cases were sent to the Dispensaries were:—

Source.	Dispensary at			
	Metropolitan Hospital.		City of London Hospital	
	Total No.	No. found to be tuberculous.	Total No.	No. found to be tuberculous.
Medical Officer of Health	125	77	308	46
Local Practitioners	129	35	166	53
War Pensions Committee	..	..	3	1
Contacts of Notified Cases (Tuberculosis Visitors)	235	2	260	6
Metropolitan Hospital	16	8	..	..
London County Council	..	..	6	3
City of London Hospital	..	..	11	11
Other sources	42	7	62	45
Totals	547	129	816	165

The diagnoses made in regard to the new cases examined at the Dispensaries during the year were as follow:—

Diagnosis.	Dispensary at								Totals.
	Metropolitan Hospital.				City of London Hospital				
	Adults.		Children under 15.		Adults.		Children under 15.		
	M.	F.	M.	F.	M.	F.	M.	F.	
Pulmonary Tuberculosis ..	54	42	4	..	62	57	2	2	223
Non-pulmonary Tuberculosis	4	8	10	7	8	12	14	8	71
Non-tuberculous	89	135	95	85	144	220	145	127	1,040
Doubtful	8	6	..	..	5	7	2	1	29
Totals	155	191	109	92	219	296	163	138	1,363

Examination of Home Contacts.—The number of persons living in contact with the 412 cases of tuberculosis which came to notice for the first time during the year was 1,009 (2·4 contacts per patient). Of this number of contacts 505, or 50·5 per cent., were examined either at the Tuberculosis Dispensaries or by their own doctors. The diagnoses made at the examination of the 495 contacts examined at the Tuberculosis Dispensaries during the year were:—

Diagnosis.	Dispensary at		Totals.
	Metropolitan Hospital.	City of London Hospital.	
Pulmonary Tuberculosis	1	2	3
Non-pulmonary Tuberculosis	1	4	5
Non-tuberculous	233	251	484
Doubtful	..	3	3
Totals	235	260	495

Bacteriological Examinations.—One thousand two hundred and eighteen specimens of sputum were examined at the Tuberculosis Dispensaries during the year with the following results:—

Result of Examination	Dispensary at		Totals.
	Metropolitan Hospital.	City of London Hospital.	
Tubercle Bacilli Present	114	122	236
Tubercle Bacilli Absent	439	543	982
Totals	553	665	1,218

In addition 372 examinations of specimens of sputum were carried out by the Council's Bacteriologists during the year, with the following results:—

Tubercle bacilli present	42
Tubercle bacilli absent	330
Total	372

The following are additional details relating to the work of the Tuberculosis Dispensaries during the year:—

	Dispensary at		Totals.
	Metropolitan Hospital.	City of London Hospital.	
Total number of attendances	2,258	4,096	6,354
Systematic examinations at the above ..	1,635	2,412	4,047
Number of letters written	1,279	1,260	2,539
Number of visits to patients at their homes	153	157	310
*Number of patients sent to hospital or sanatorium by L.C.C.	61	67	128
Number of attendances at:—			
X-ray Department	60	175	235
Dental ,, 	64	9	73
Sunlight ,, 	..	176	176
Other Departments	39	40	79

* In addition to the patients who received residential treatment under the County Council's tuberculosis scheme upon the recommendation of the Tuberculosis Officers, 94 patients were sent to hospital or sanatorium by the County Council upon applications by medical officers of hospitals.

It is an established fact that the prospect of recovery from tuberculosis is greatly enhanced if the disease is recognised at an early stage and patients submit at once to medical supervision and treatment. In this connection the following figures are of interest and show that even now, although nearly 20 years have elapsed since local authorities were empowered to take steps to prevent the spread of this disease, some persons fail to avail themselves of the facilities for diagnosis and treatment provided by the Council until the disease has become established.

The following is a summary of the work done at the Tuberculosis Dispensaries during the past five years:—

	1926	1927	1928	1929	1930	Total.
New cases examined	1188	1107	1052	1262	1363	5972
Contacts examined	451	384	368	477	495	2175
Specimens of sputum examined	1087	1025	955	1125	1218	5410
Total number of attendances	7257	6505	6328	6756	6354	33200
Number of home visits by Tuberculosis Officers	274	246	227	292	310	1349
Number of patients sent to hospital or sanatorium by L.C.C.	168	141	157	179	128	773

One hundred and eleven deaths from pulmonary tuberculosis of persons who had attended at one of the Tuberculosis Dispensaries occurred during the year. The following table shows the various stages which the disease had reached before these patients attended a Tuberculosis Dispensary:—

	1st Stage.	2nd Stage.	3rd Stage.
Number	20	29	62
Percentage	18·0%	26·1%	55·9%

The intervals which elapsed between the onset of illness in these cases and the date of first attendance at a Tuberculosis Dispensary were:—

Under 1 month	22 cases.
1 to 3 months	23 „
3 to 6 months	11 „
6 to 9 months	9 „
9 to 12 months	5 „
Over 12 months	36 „
Period indefinite	5 „

The following figures, which relate to the number of persons who died from tuberculosis during the past three years, throw further light upon the matter of the failure of patients to secure medical attention until a late stage of the disease has been reached:—

	1928		1929		1930	
	Pul.	Non-Pul.	Pul.	Non-Pul.	Pul.	Non-Pul.
Number of Deaths from Tuberculosis	160	24	205	33	175	27
Number of cases only notified at death ..	4	1	15	6	1	1
Do. notified within a month of death ..	13	8	21	1	25	6
Do. do. 3 months of death ..	14	..	25	..	23	..
Do. do. 6 months of death ..	8	1	19	..	14	1
Number of deaths in cases not notified under Tuberculosis Regulations ..	15	8	19	3	25	6

Visits by Tuberculosis Visitors.—The following are particulars of the home visits paid in 1930 by the Council's Tuberculosis Visitors:—

	New Cases.	Contacts.	Sailors and Soldiers.	Other Persons.	Total.	Insured.	Non-insured.
Miss Servante ..	158	105	75	1735	2073	1148	925
Miss Clarke ..	227	151	72	1806	2256	1646	610
Totals ..	385	256	147	3541	4329	2794	1535

Hackney Borough Council Act, 1926.—Section 54 of this Act, which differs in important details from Section 28 of the London County Council (General Powers) Act, 1928, enables the Council to secure the compulsory removal to a suitable institution of any person suffering from pulmonary tuberculosis who is in an infectious state and living under such conditions as to cause risk of infection to other persons. The number of patients who have received residential treatment under the Act in each year since 1926 is as follows:—

Year.	No. of Patients.	No. of Contacts.
1926	3	6
1927	9	29
1928	10	31
1929	6	25
1930	7	21
Total ..	35	112

In no case has it been necessary to secure a magistrate's order for compulsory removal.

It has also been possible to secure improvement in the home conditions of other patients by making reference to the powers of removal contained in the Act.

Provision of Shelters for Home Isolation.—Upon the recommendation of the Tuberculosis Officers shelters are loaned and erected in the gardens of patients' homes in order to facilitate home isolation. Three shelters were erected by the staff of the Public Health Department during 1930, the number on loan at the end of the year being four.

Day Sanatorium (Open Air School) for Tuberculous Children.—The work of the Stormont House School, which was opened by the London County Council on 8th September, 1919, is of increasing value to the tuberculosis service. The average number on the roll for the year is 89, with an average attendance of 70. Dr. Howell, Tuberculosis Officer to the City of London Hospital Tuberculosis Dispensary, is responsible for the medical care of the children, and visits the School once weekly.

Boarding-out of Children.—During the year 5 children (contacts of 4 cases) were recommended by the Tuberculosis Officers for boarding-out, under the County Council's scheme.

In two instances the applications were withdrawn, in one upon the death of the patient and in the other upon the entry of the patient to Hackney Hospital. The remaining three children were boarded-out.

Artificial Pneumothorax Treatment.—This form of treatment is provided for Hackney persons at Brompton Hospital for Consumption, City of London Hospital for Diseases of the Heart and Lungs and University College Hospital. The cost of "refills" is borne by the Council in cases recommended by the Tuberculosis Officers.

The number of patients treated and the gross cost to the Council in 1930 were:—

Hospital.	No. of Patients Treated.	No. of "Refills" at 10s. 6d.	Gross Cost to Council.
			£ s. d.
Brompton Hospital	4	55	28 17 6
City of London Hospital	16	193	101 6 6
University College Hospital ..	1	27	14 3 6
Totals	21	275	144 7 6

"Finsen" Light and Artificial Sunlight Treatment.—The treatment of lupus by "Finsen" light and of this and other forms of tuberculosis by artificial sunlight is carried out at the London Hospital. Treatment by artificial sunlight is also provided at the City of London Hospital for Diseases of the Heart and Lungs. Financial responsibility for this treatment is accepted by the Borough Council in cases recommended by the Tuberculosis Officers.

The following are details of the cases treated by "Finsen" light and artificial sunlight during the year at the expense of the Council:—

Hospital.	"Finsen" Light.			Artificial Sunlight.		
	No. of Patients Treated.	No. of ex- posures.	Cost to Council.	No. of Patients Treated.	No. of ex- posures.	Cost to Council.
City of London Hospital ..	..	..	£ s. d. ..	4	176	£ s. d. 8 16 0
London Hospital	4	136	34 0 0	3	293	14 13 0
Totals ..	4	136	34 0 0	7	469	23 9 0

Extra Nourishment.—The Council's scheme for the provision of extra nourishment to tuberculous persons came into operation on 6th June, 1921. During 1930 the number of patients to whom grants of milk and eggs were made was 135.

The length of time each patient has been in receipt of nourishment has varied from a few days to several weeks.

Those cases who received this assistance for a few days only ceased to receive it on account of their removal to sanatorium.

The Tuberculosis Officers have entire freedom under Circular 194 as to the granting of extra nourishment, provided the cases come within the "necessity" limit of the Council, are early or sanatorium cases, and that the number of cases in receipt of this assistance is not so large as to cause the approved expenditure to be exceeded.

The total cost for the year is £439 3s. 10d.

Home Nursing.—The number of cases of tuberculosis attended and the visits paid by the Nurses of the Hackney District Nursing Association during the past five years are shown below:—

Year.	Cases.	Visits.
1926	49	2303
1927	40	1329
1928	31	1329
1929	49	2308
1930	39	2486

After Care.—Effort has been made by the Tuberculosis Care Committee to carry out every duty possible under existing circumstances.

The following is a summary of the work performed by the Committee during the year ended 31st March, 1930:—

Number of new cases dealt with	356
(Of these, 237 were for assessment)	
Number of old cases dealt with at Committee meetings ...	193
(Of these, 127 were for assessment or re-assessment)	
Number of cases assisted	224

The amount of contributions collected by the Committee towards the cost of the sanatorium treatment of 141 patients was £780 4s. 6d.

Number of Committee meetings held:—

Full Committee	11
Case Committees	12

Other meetings attended by the Secretary, 36.

The following extract from a letter addressed by Dr. F. C. Lewis, formerly Chairman of the Tuberculosis Care Committee, to the Secretary to the Committee, bears testimony to the value of the Committee's work:—

"After sixteen years as Chairman of your Committee, I feel I should like to write a few lines of thanks and good wishes to all the members past and present, and to you personally.

When I first joined the Committee in the early days of the War the work and general outlook were but a tithe of what it is now. This is due, I am sure, mainly to the unflagging zeal of the Secretaries, as well as to the enthusiasm and real hard work of many of the members.

In early days the work was very little save assessment and visiting a comparatively restricted group of cases; but gradually, as the powers and outlook of the Committee increased, owing to its becoming a recognised Sub-Committee of the Boroughs of Hackney and Stoke Newington, the scope of the work increased also.

It has now become a co-ordinating centre for all the agencies, voluntary and official, which can have any bearing on the welfare of the tubercular patient and his surroundings and dependants.

It is concerned not only with getting patients treated in Sanatoria and elsewhere, but also with their after-care. In fact, every means by which the treatment of patients can be expedited or their outlook improved are its concern.

Many a case would never have gone to Sanatorium at all, or even continued to attend the Dispensary, had not the Committee, through the Secretary and voluntary workers, helped by persuasion, gifts of clothing, maintenance, etc., as well as by warnings of the danger in refusing treatment."

Disinfection.—Disinfection of rooms and their contents is offered in all cases of pulmonary tuberculosis after death or removal to hospital or sanatoria.

Public Health (Prevention of Tuberculosis) Regulations, 1925.—These Regulations confer powers upon local authorities enabling them to prevent persons suffering from pulmonary tuberculosis from entering the milk trade and to require persons to discontinue any occupation involving the handling of milk when they are found to be suffering from the disease in an infective stage.

Fortunately, it has not been necessary to take formal action under the Regulations.

HOUSING.

HOUSING CONDITIONS.

This section of the Report follows under the headings suggested by the Ministry of Health.

1.—GENERAL OBSERVATIONS AS TO HOUSING CONDITIONS.

Hitherto it has only been possible to carry out house-to-house inspection of the streets and areas obviously requiring special attention, and the information suggested by the Ministry could only be obtained by a house-to-house inspection of the whole Borough. A certain amount of information has been obtained from the district Sanitary Inspectors, in addition to that from the house-to-house inspections. Approximately 1,500 houses are known to be more than 100 years old, while about 22,000 houses are between 50 and 100 years old, and probably about 4,000 houses in the Borough could be described as being of very poor type, patched and worn, varying from houses that could be made fairly habitable by the expenditure of far more money than owners are likely to be induced to spend, to houses that could not be made decently habitable by any form of reconstruction.

The housing of the Borough presents two problems, of which the most important is overcrowding, and the other the condition of the houses themselves; but the first of these reacts on the second, so that overcrowding makes it difficult to keep houses up to a decent sanitary standard, while it becomes impossible to close houses owing to the need for accommodation; but I must emphasise the fact that overcrowding is by no means confined to any particular part or parts of the Borough. The overcrowding of rooms may certainly be held responsible for the dirty and verminous condition in which some houses are repeatedly found by the Sanitary Inspectors. It is easy to appreciate the difficulty of maintaining a standard of domestic cleanliness in over-populated apartments. This and other circumstances connected with overcrowding provide the conditions which favour the rapid multiplication of vermin.

Undoubtedly houses which are occupied by a large number of persons require more frequent repair than those that are less crowded. As these repairs are not always carried out efficiently, the rate of deterioration of the property is accelerated.

2.—SUFFICIENCY OF SUPPLY OF HOUSES.

(a) *Extent of shortage of houses available at reasonable rents, and the measures taken or contemplated to meet this shortage.*

No more recent information than that provided by the Census of 1921 is available as to how the housing accommodation in the area is occupied. The following figures have been taken from the Census tables for that year:—

Number of families living three persons or more in single-room tenements	1,059
Number of families living three persons or more per room in two-room tenements	471
Number of families living three persons or more per room in three-room tenements	233
Number of families living three persons or more per room in four-room tenements	26
Total number of families living three persons or more per room	1,789

It is probably true to say that, irrespective of the size of the rooms, seventy-five per cent. of these families were living in overcrowded apartments. The Census returns for 1921 also stated that a population of 28,457 persons (equal

in number to many important Urban Districts) were living in 9,981 two-room dwellings, and 9,627 in 5,649 one-room dwellings.

To alleviate this shortage of accommodation the Borough Council has built in the last ten years 79 houses and 346 flats, which have been let at rentals varying from 10s. 9d. to 26s. 0d. per week; whilst the London County Council has built during the same period 184 flats in the Borough. Many families have removed from Hackney to the London County Council's estates in the outlying districts, thus giving further relief to the pressure upon the accommodation within the Borough. A further 197 flats are in the course of construction at Stamford Hill, and tenders have been invited for the erection of 140 flats at Shore Road under the County Council's housing scheme. This additional County Council housing accommodation is principally for the accommodation of families now living in other Boroughs and will not benefit Hackney to any great extent. The Borough Council has also under consideration the erection of flats in Lower Clapton Road.

(b) *Changes in population during the period under review or anticipated in the future.*

The population of the Borough as ascertained at the Census taken in 1921 was 222,142. At mid-1929 the Registrar-General estimated the population to be 214,400, a decrease of 7,742. This estimated fall in the size of the population, if it is borne out by the 1931 Census, which is most unlikely, can only be ascribed to the following causes:—

- (i) migration to other districts;
- (ii) displacement of persons due to the increasing industrialisation of the Borough. (In my Annual Report for 1928 I drew attention to the fact that 435 private dwelling houses have been wholly or partly converted into factories or workshops, and this number has been added to in the last two years.)

It is probable that the housing of persons from other areas upon the Shore Road and Stamford Hill estates of the London County Council will off-set the effect of the migration of persons from the Borough to estates in outlying districts.

(c) *Special difficulties in the way of providing suitable sites for new houses.*

The Borough is almost entirely built-up, but sites of considerable size can be obtained for the erection of houses by the demolition of small property and of worn-out or unsuitable property; the erection of block buildings on such cleared sites would greatly alleviate the overcrowding in the Borough. There are no extensive sites suitable for the erection of houses other than those secured by the demolition of worn-out or unsuitable property. There are, for instance, a number of fairly old detached houses in the Stamford Hill district which have large gardens. These houses are occupied at the present time, but if they could be acquired at some future date and demolished a considerable area for the erection of houses and flats would be provided. This line of action is being very largely followed by the London County Council.

3.—OVERCROWDING.

(a) *Extent.*

Reference has been made under heading 2 (a) to the overcrowding shown to exist by the information obtained at the Census of 1921. The cases of overcrowding recorded in the Public Health Department are principally those where complaint has been made or where gross overcrowding has been discovered by a Sanitary Inspector in the course of his duties. It is obvious that no good can result from serving notices on persons unable to obtain better accommodation, even if action would be immediately taken under more favourable circumstances.

Number of instances of overcrowding recorded
in the Public Health Department:—

1926	...	...	...	...	155
1927	...	...	...	...	190
1928	...	...	...	...	164
1929	...	...	...	...	137
1930	...	...	...	...	94
Total					740

These figures also include applications for recommendation for housing accommodation on the London County Council's estates because of overcrowding.

Whilst 188 of these families are known to have secured alternative accommodation (113 on the London County Council's estates, 41 on the Borough Council's estates, and 34 elsewhere), it is obvious that there are many cases of overcrowding which have not come to the knowledge of the Department.

Thus, I think it probable that the Census taken in 1931 will show that between 750 and 1,000 families are still living under conditions of overcrowding similar to those revealed ten years ago.

STANDARD OF OVERCROWDING.

(L.C.C. By-laws with respect to Houses Divided into Separate Tenements, etc.)

"Not less than 300 cubic feet of free air space for each person of ten years of age or over, and not less than 150 cubic feet of free air space for each child under ten years of age occupying such room at any one time.

When occupying a room not exclusively used as a sleeping apartment, the free air space required for a child under ten years of age shall be not less than 200 cubic feet."

Table showing number of instances of overcrowding recorded in the Public Health Department, together with number of applications received from persons living in overcrowded conditions for assistance in obtaining housing accommodation; also showing instances of overcrowding which have been abated during the past five years:—

Year.	Number of instances recorded in Public Health Department.	Number of Applications from persons living in Overcrowded Houses for assistance in securing L.C.C. Houses.	Abated.		
			Families accommodated in L.C.C. dwellings.	Families accommodated in H.B.C. dwellings.	Families known to have removed elsewhere.
1926 ..	155	12	2	4	10
1927 ..	190	74	14	13	6
1928 ..	164	104	43	16	9
1929 ..	137	73	37	8	7
1930 ..	94	45	17	—	2
Totals	740	308	113	41	34

It has been stated on many occasions, as, for instance, at the public enquiry with regard to the proposed Lower Clapton Road housing site, that as soon as accommodation is granted on a Municipal housing estate "Aliens from abroad flock in" again to overcrowd the vacated rooms. This is entirely untrue. When the County Council grant accommodation, information is sent to the Borough Public Health Department, and the District Sanitary Inspector is given the following memorandum:—

HOUSING ACCOMMODATION.

Address.....

Date.....

Family.....

This family has removed from the above address to
Please visit the premises and warn the occupier against allowing the room or rooms to be re-let in such a way as to cause overcrowding.

This memorandum is to be returned to me initialled after the visit has been made, and with any necessary observations.

Medical Officer of Health.

The following letter is also sent by me direct:—

DEAR SIR (OR MADAM),

With reference to the removal of the family from your address, and the consequent abatement of overcrowding, I have to inform you that if, in future, overcrowding by sub-letting any part of the premises occurs, legal proceedings may be taken against the person responsible.

Medical Officer of Health.

All applications for a County Council house recommended for housing accommodation, with particulars, are carefully entered in a special book, together with cases granted accommodation, and from time to time the Inspectors are requested to report on the use made of the vacated premises. In only one instance was a premises found to be again overcrowded, notice was immediately served and the new tenants, who, it was stated, were only temporarily in residence, immediately found accommodation elsewhere.

Cases recommended by the Borough Medical Officer of Health to the London County Council for preferential consideration by reason of (a) overcrowding, (b) other health grounds:—

Year.	On grounds of Overcrowding only.	For other Health reasons, Separation of Sexes, and lack of Sanitary Convenience, etc.	Total Cases recommended.	Accommodation provided by L.C.C.	Refused by L.C.C.	Refused by Applicant.
1926 ..	12	—	12	2	—	—
1927 ..	74	21	95	24	32	9
1928 ..	104	95	199	98	41	17
1929 ..	73	86	159	80	25	11
1930 ..	45	100	145	68	27	2
Totals	308	302	610	272	125	39

(b) *Causes of Overcrowding.*

The circumstances which give rise to overcrowding are:—

(i) *Inability to pay the rents of vacant dwellings.*—Many flats or apartments of three or four rooms become vacant from time to time, but rents varying from 20s. to 35s., and even 40s., a week are invariably required. The persons living under overcrowded conditions are generally of the artisan class with families of young children. The weekly income does not often exceed £3, often it is less, whilst unemployment, unfortunately, exists in Hackney as in the rest of the metropolis. Thus these people are only able to afford the rent of one or two rooms. Overcrowding is not a new problem that has suddenly arisen; in 1901 Dr. King Warry reported to the Council on the subject, and many of the observations he then made are applicable at the present time; it certainly appears reasonable to suppose that if an area is abolished where rents payable are in the neighbourhood of six or eight shillings, many of these people will endeavour to obtain housing accommodation elsewhere at the same figure; thus Dr. King Warry, in referring to slum clearances in Bethnal Green and Poplar, states "*This has necessarily led the occupants of these dwellings to seek housing accommodation elsewhere, which I have reason to believe many obtained in Hackney.*" It is necessarily a matter of speculation to what extent demolition under these schemes aggravated the housing tension in Hackney, but it is not insignificant on this account." Two of the conclusions as regards Clearance Schemes reached by Dr. King Warry in 1901 hold good to-day. Dr. King Warry points out that:—

"Past efforts as an attempt to reduce overcrowding except the overcrowding of houses on a given site cannot be considered a success, because:—

- (c) Owing to the conditions under which the new dwellings have been built, their rental is too high to be paid by the majority of these poor tenants displaced.
- (d) The schemes have been too local, and their execution has extended over too long a period to have had any appreciable effect in solving the housing problem."

Consideration of the applications for housing accommodation bear out, I consider, my contention that action in the direction of slum clearance should be accompanied by Housing Schemes to relieve overcrowding existing outside unhealthy areas. A clearance scheme must now provide an equal amount of housing accommodation to that demolished. The difficulty as regards overcrowding and the lack of alternative accommodation also explains the reluctance of the Public Health Committee to take any step that may diminish the total housing accommodation or hamper what is now being done to keep in repair the existing houses. As regards Middlesex Wharf, all the houses except two, which became actually dangerous, are still occupied, and the others becoming increasingly ruinous, of course, will remain occupied until they become actually dangerous. It must be borne in mind that the older the property and the more cramped the accommodation, the less, generally speaking, is the rent paid, and this is an important point which has considerable bearing on the subject.

This inability to pay the rents for modern accommodation is, no doubt, the reason why only a small proportion of the persons living under overcrowded conditions in the Borough apply for accommodation, and, no doubt, this state of affairs exists throughout London.

(ii) *Industrialisation of the Area.*—The effect of the industrialisation of the area in decreasing the housing accommodation in the Borough has been referred to previously. This, however, has the further effect of attracting to and retaining within the Borough those persons whose place of employment is in or near the

district. Quite a large number of cases come to knowledge of persons living in such conditions that I should be able to recommend them for preferential treatment in the allocation of accommodation upon the London County Council's estates if it were not for the fact that many of these are unable to avail themselves of the opportunity because they and their children work in or near the Borough and would not be able to afford travelling expenses from Becontree, Morden, etc., in addition to a higher rental.

(c) *Example of special action taken in 1930 to deal with overcrowding.*

The special action taken is by recommending the London County Council or Borough Council to place accommodation at the disposal of the overcrowded families. This has already been mentioned in dealing with the extent of overcrowding occurring in the Borough. The following is an instance of overcrowding which was dealt with by the Public Health Department during the year:—

Complaint was made by a woman that the rooms in her occupation were overcrowded. The family consisted of the man, his wife and four children (boys, aged 10 and 4 years, and girls, aged 11 and 7 years).

They occupied two basement rooms, the back room, which was quite unsuitable for use as a bedroom, being used for living purposes, whilst the entire family slept in the front room. The cubic capacity of this room was 1,200 feet, whilst under the standard laid down in the By-laws relating to houses let in tenements 1,500 cubic feet were required for a sleeping apartment used by this number of persons.

The mother stated that indecent behaviour had occurred between the two eldest children owing to her inability to make separate sleeping arrangements.

Following upon the recommendation of the case to the Council's Housing Committee, the family removed to a house on one of the Borough Council's housing estates.

4.—FITNESS OF HOUSES.

(a) *Difficulties found in action under the Public Health Acts or under Section 3 of the Housing Act, 1925.*

Generally speaking, the powers granted to local sanitary authorities by the Public Health Acts are sufficient to enable those authorities to secure the abatement of nuisances, but the absence of a standard of fitness gives rise to a very real difficulty in maintaining a good standard of habitability. In my Annual Report for 1928 was reprinted a report to the Public Health Committee of the Council drawing attention to the practice of "botching" adopted by certain owners of property in the Borough. When defects in houses, such as defective roofs, gutters, etc., come to notice, the action prescribed in the Public Health Acts to secure their abatement is taken, but this does not permit the sanitary inspectors to demand that the weather-rotted roofs shall be re-slatted, or the gutters taken down and replaced by new ones. Owners of property generally are well-versed as to the limits of the sanitary authorities' powers, and they carry out sufficient work to prevent the rain entering through the roof or to remedy the dampness caused by the defective guttering, but frequently conditions are just as bad before the next Winter has arrived, further complaints arise and the tedious process of serving notices has to recommence.

Undoubtedly, the repeated patching-up of property in this unsatisfactory manner results in its steady deterioration and it seems to me that larger powers to enforce a better standard of repairs are required, or penalties when really inadequate work has obviously been carried out in order temporarily to comply with a notice.

On various occasions I have reported housing property that was causing difficulty to the Council, and in 1921 I gave a list of property in the Borough that was a cause of constant anxiety, and then stated: "Owing to the age of the houses, neglect during the War, and the cost of carrying out repairs, much of the housing property in the Borough cannot recompense the owners for extensive reconstruction."

Action necessitating "reconstruction" under the Housing Acts has been avoided during the past 10 years, as an owner who could show that reconstruction was necessitated by a notice served under those Acts could close the premises. There is no legal definition of "reconstruction," each case requiring consideration on its merits, and in conjunction not only with the amount of work required, but also with the kind of property and the rent paid; notices therefore have been served in preference under the Public Health (London) Act, and work, when done by the Council, carried out after obtaining a Magistrate's Order. This procedure has, naturally, been resented by owners who wished to close property, and where proceedings have been taken in Court to enforce notices, the Magistrate has been requested by the owners to close; in one such instance—the Dockway property—the Magistrate inspected the houses as the result of the evidence placed before him by the owners, who were represented by Counsel, and called expert witnesses, with a view to proving the desirability of closing, but the Magistrate refused to make a Closing Order and the notices were complied with. It has always been the object of the Public Health Department to oppose the lessening in any way of the housing accommodation available in the Borough, but it is obvious that this line of action is dangerous for the department, giving opportunity for attacks by persons who do not realise the difficulty of dealing with this type of housing property, while the "representing" of an area or "closing" of property places the responsibility elsewhere. On the other hand, to "represent" an area before there is reasonable assurance that Clearance or Improvement Schemes will follow means that there will be considerable additional difficulty in enforcing the abatement of nuisances under the Public Health (London) Act.

Closing and demolition used to be a way out of the difficulties experienced by sanitary authorities in dealing with this class of property. Thus, in a report by Dr. King Warry, to which I have referred, he states that 36 houses to which his attention was drawn were inspected, closed and demolished that year to make room for the erection of a factory. *A considerable amount of housing property has been bought in this Borough for demolition for industrial purposes* and will be demolished just as soon as the opportunity arises. "Closing" is no longer practicable, it has become only a procedure of despair, or because of danger of accident from the condition of a dwelling. There are in various parts of the Borough blocks of houses, as in Middlesex Place and Milborne Street, that have been bought for demolition and the erection of factories on the site. Naturally, the Public Health Department do not wish any action that will raise any question of "reconstruction" and consequent closing and demolition.

The present housing scheme costs the rates a large annual sum, and in spite of past expenditure on these premises and the repairs now in hand, it can be confidently stated that more and more work will require to be done from year to year, particularly as regards the "conversions," which are ordinary dwelling houses, purchased by the Council, converted into flats and put into thorough repair; as regards most of these conversions nothing that can be done will render the property anything but expensive to the Council and a source of complaint; and this fact emphasizes the difficulties experienced in sanitary inspection of a considerable part of the Borough. Private owners of worn-out property cannot afford the continual repairs required by property of this type, often sub-let to more families than the properties can reasonably accommodate. On the other hand, if the Council carry out the work as it should be done, it is obvious that in a great majority of cases it will be impossible to get back the cost of the work.

- (b) *Special measures taken or suggested, e.g., in relation to particular types of insanitary property or in regard to arrangements for the gradual carrying out of programmes of repair.*

Under the Housing (Consolidated) Regulations, 1925, the following house-to-house inspections have been carried out:—

1926	...	...	...	...	...	849
1927	...	...	...	...	...	845
1928	...	...	...	...	...	381
1929	...	...	...	...	...	407
1930	...	...	...	...	...	66

Total	...	...	...	...	...	2,548
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This does not include the special inspection and schedules required by the work on the unhealthy areas, to which I refer later.

No less than 1,930 notices have been served in respect of defects found in the 2,548 premises visited. Smallpox and consequent visiting of contacts interfered very greatly with house-to-house inspection.

Included in the Council's five-year housing programme is a proposal to deal with 50 houses per annum under Part II of the Housing Act, 1930.

- (c) *Extent to which houses have not an adequate internal water supply.*

There are 366 houses in the Borough which have not an adequate internal water supply. Of this number 344 have a supply tap in the yard or garden for the exclusive use of the tenants, whilst 22 houses are provided with water from a common supply.

- (d) *Extent to which houses have no water closet or other adequate sanitary accommodation within their own curtilage.*

Twenty-nine houses in the Borough have no water closet or other sanitary accommodation within their own curtilage. In each case the tenants make use of accommodation provided for their common use.

5.—UNHEALTHY AREAS.

Since the difficulty is so great in repairing much of the existing housing in the Borough, whether in the hands of private owners or purchased by the Council, it will be suggested that clearance schemes afford the best remedy. But although this difficulty exists, it is also a fact that the sanitary inspection of the Borough, district and house-to-house, has enforced so much action on the part of owners that this difficult type of property has been kept, by constant effort, inhabited; and even though the accommodation is in some of the areas obviously undesirable and worn out, yet the structure has hitherto been kept safe, dry and free from vermin, and the drainage and sanitary accommodation sound, and it is essential that the constant carrying out of repairs with which the Sanitary Inspectors are concerned should not cease, or be hindered by representations which achieve nothing; moreover, any such scheme as the London County Council scheme at Shore Road and Stamford Hill, which brings in more population from outside the Borough is not useful to Hackney.

The County Council housing scheme is so magnificent in its scope and the efficiency of its management that there is no adverse criticism involved in pointing out that the very vastness of the problem from the point of view of the London County Council, who are really dealing with a province, not a county—for the County of London is only a county in name—results in what may appear to be

delay in dealing with particular areas, and it must be remembered that the London County Council have the same difficulties as the Boroughs to deal with as regards suitability of tenants, ability to pay rents and so forth, in addition to the claims of the 28 Metropolitan Boroughs. To fully appreciate the magnitude of what has been done, it is necessary to read the reports issued by the London County Council as regards their housing schemes. In spite, however, of what has been already accomplished, in a neighbouring Borough, seven of the ten areas represented in 1919 have not yet been dealt with; as regards the celebrated Brady Street area, in another neighbouring Borough, I am informed that "the question of representing the Brady Street area was considered shortly after the passing of the Housing Act, 1890, but was not then pursued as the London County Council indicated that they would only consider one scheme from each Borough, and the Boundary Street area was taken as the more urgent. The first representation of the Brady Street area was made in 1904, and as nothing was done in the matter, a further and extended representation was made in 1912. The building operations under the scheme which was eventually adopted by the London County Council appear to have begun about 1922, and are still proceeding." (March, 1931.)

In another neighbouring Borough the Medical Officer of Health, in his 1925 report, states: "The owner refused to reconstruct the demolished part of the buildings and to put the property in habitable condition 'because of the result of the Ministry of Health enquiry of 1920;'" also "The remaining houses in the area are becoming worse because the owners refuse to spend money on property which they believe will be demolished without compensation;" also "The local enquiry by the Ministry of Health was held in October, 1920, but nothing has been done with regard to clearing the area and rehousing, and this has not yet begun." In the same Borough a Clearance Scheme for an area represented in 1925 in which the infantile mortality was 161, as compared with 74 for the Borough, and which was estimated to cost £377,500, has not yet commenced. In view of the difficulties already experienced in Hackney, as already mentioned in the Dockway example, any action which may have the sole result of interfering with sanitary inspection is to be deprecated, and what I have stated shows that there is at least that possibility when areas are represented before it is agreed that Clearance Schemes shall be put in hand.

The Housing Act, 1930, has altered the outlook with regard to Clearance Schemes, and under this Act it is provided that in the Administrative County of London the London County Council shall submit to the Ministry of Health proposals for the provision of new houses and a quinquennial statement of the measures proposed to be taken with regard to slum clearance and improvement schemes.

Before submitting these proposals to the Minister the County Council is required to consult with the several Metropolitan Borough Councils and include in the statement submitted by the County Council the housing proposals of the Borough Councils for the quinquennial period.

With regard to schemes for clearance areas the Borough Council must submit its proposals to the County Council and ascertain that the County Council does not itself propose to deal with the area, either separately or as part of a larger area, or as part of an improvement area. For improvement areas containing less than ten dwelling houses the Borough Councils are given the powers of the Act, but for improvement areas affecting more than ten houses the County Council is exclusively the local authority, though much of the actual work involved in the scheme has to be carried out by the Borough Council.

In April, 1928, I submitted to the Housing and Public Health Committees of the Borough Council a survey report with regard to the housing conditions



PHOTOGRAPH No. 1.—Duncan Square, DUNCAN SQUARE AREA.



PHOTOGRAPH No 2.—Ribstone Street, MORNING LANE AREA.

of the Borough, a report intended to convey an impression of the housing conditions of the Borough, although it was obviously impossible in this report to accurately define all the areas or to include all property that was deserving of the attention of the Council.

This report was forwarded to the Ministry of Health and the London County Council, and the County Council carried out an investigation of the information contained therein.

A conference was held with the London County Council on the 11th April, 1929, and on the 26th November, 1929, I represented four areas that can be described as the Warburton Square, Northwold Road, Morning Lane and Duncan Square areas to the London County Council, the County Council having agreed to deal with these areas.

An area, described as the Banister Street area, was represented and reported to the Borough Council on the 15th January, 1930.

These representations were made under the Housing Act, 1925, but the Housing Act, 1930, being then under consideration, no further steps were taken to deal with the representations.

On the 17th December, 1930, the Housing Committee reported to the Borough Council that the London County Council had intimated its intention to include in the provisional programme to be submitted to the Minister of Health under the Housing Act, 1930, the Duncan Square, Morning Lane, Northwold Road and Warburton Square areas, and suggested that the following areas should be dealt with by the Borough Council:—

- Abbot Street area,
- Banister Street area,
- Berkshire Road area,
- Broadway area,
- Clarence Terrace area,
- East Street area,
- Elsdale Street area,
- Fulham Place area,
- High Hill Ferry area,
- Middlesex Wharf area,
- Nisbet Street area,
- Otley Terrace area,
- Pear Tree Court area,
- Queen's Court area.

The Borough Council agreed to deal with these areas as Clearance Areas.

DUNCAN SQUARE AREA.

Dr. King Warry, in his Annual Report for 1900, states that on 1st May, 1900, a "Representation" was made to the London County Council as regards this area.

The area, apart from one or two shops, workshops, stores and stabling, consists principally of small cottage-type properties, most of which are cramped on the land and so ill-arranged and congested as to prevent free circulation of air. The narrowness of the streets and closeness of the houses one to another has resulted in great congestion and a consequent general deficiency of air-space—especially back air-space. The general arrangement of the buildings and streets is bad, the former are mostly arranged in small square blocks, the majority having a tiny confined yard, backing on or adjacent to its neighbour; this arrangement

transforming these tiny yards into confined closed-in "pockets" where the free movement of air is seriously hampered. Back air-space to individual houses varies, but generally is very deficient—some of the houses have no back yard and no back windows, and in these instances back air-space is entirely absent; others have back yards a mere 3 feet 6 inches deep.

In the south-west corner of the area some old dwellings stand in a narrow cul-de-sac 8 feet wide, and have no back yards or back windows; the two water-closets used in common are within a few feet of the front doors, where the dustbins have also to be accommodated, and here there is no effective through ventilation either of the street or of the houses, so that the interior of these houses is permanently deprived of a sufficiency of light and air.

The streets vary in width from 20 feet to 8 feet, and within the area are three culs-de-sac, the only open thoroughfares being Duncan Road and Sheep Lane.

In many instances the closeness of the adjacent buildings and rear walls of the houses render the ground floor back rooms dark and unwholesome, and in the case of the houses with very restricted yard space, and those in the 8 feet cul-de-sac, proximity of the water-closets and dustbins to the doors and windows, coupled with the absence of normal air circulation, sometimes gives rise to foul smells in the houses, especially in hot, damp weather.

The houses in Sheep Lane are of fair size, but many of the ground floor back rooms are very deficient in natural lighting and ventilation, some of the floors are below the level of the street paving. Structurally these houses are worn out. The activities of the chemical factory on the east side of Sheep Lane do not improve the atmosphere, but the factory provides employment for most of the residents in this area, a circumstance which no doubt materially decreases the number of complaints.

Devonshire Place, at the north-east corner of the area, is worthy of special reference; it consists of a row of cottages, well over one hundred years old, standing in a narrow private roadway, opening out of Westgate Street, having a width of 12 feet 3 inches, narrowing down to 7 feet 11 inches, and finally opening into a cul-de-sac having an average width of 21 feet, the far end of which is occupied by old brick buildings in a ruinous condition, used as stables. The cottages are badly planned, have floors from 3 to 7 inches below the adjoining road level, are shut in at the rear, possess little ordinary conveniences, water supply is from taps in the tiny back yards—in one case a common supply for the use of two cottages. The structures contain much timber, and I understand that the insurance companies refuse to accept the risk of insurance against fire for this reason, and possibly also on account of the difficulty of access to the properties as regards fire-fighting appliances. The only means of artificial lighting available to the occupiers is candles or oil lamps.

The immediate surroundings are very unsatisfactory, as road cleansing (scavenging) and normal repairs and maintenance are difficult to carry out; the stables require attention from time to time to prevent them becoming a breeding ground for rats and causing nuisance from flies in the neighbouring dwellings.

In short, the chief evils of the area are the bad arrangement and congestion of the houses on the land, and the narrowness and bad arrangement of the streets, in addition to the aged and worn-out condition and bad planning of the majority of the houses, so that any attempt to render the houses structurally fit in themselves could not transform them into satisfactory dwellings.

Conditions on this area are shown in the photograph No. 1.



PHOTOGRAPH No. 3.—Woolpack Place, MORNING LANE AREA.



PHOTOGRAPH No. 4.—Conduit Place, NORTHWOLD ROAD AREA.

MORNING LANE AREA.

This area contains dwelling houses, factory premises, workshops and stores, shop property and stables.

The streets, with the exception of the main thoroughfare, Morning Lane, are narrow, varying in width from 14 feet 3 inches to just over 20 feet.

The properties as a whole have been indifferently maintained and are generally in a bad state of structural repair, many being entirely worn out, although, as usually is found to be the case, some have been better cared for and maintained in comparison with others.

In Morning Lane the properties, although originally constructed as shops, with living accommodation, are in some instances now used solely for domestic purposes, having been adapted to their present use without proper consideration for domestic convenience or comfort—doubtless in many instances by the occupiers themselves, who are only too eager to secure any kind of "housing accommodation" in proximity to their work, and at rents within their means to pay—but which would offer no inducement to occupancy but for the almost total absence of cheap and satisfactory alternative housing accommodation in the neighbourhood. The houses fronting this thoroughfare on the north-east corner of the area are cramped on a triangular building site, so that in some instances no space is available for a proper window opening in the ground floor back room, where other means for augmenting natural light and ventilation have to be improvised, and where two of the houses have one yard and domestic conveniences in common.

The remainder of the area consists mainly of small cottage type properties, and with one exception, have frontages to the public streets. The condition of the houses generally is old, and many are in a worn-out condition or rapidly approaching this state. The majority were built before it was considered necessary to cover a building site with concrete, or to provide damp-proof courses in the walls; some have ground floors below the level of the adjoining street or yard, whilst others originally at the same level have sunk below; all these factors contributing towards damp and unhealthy living conditions in the houses. A large number of the houses are of an old, badly-planned type, with the front doors opening directly from the public footpath into the living room and bedroom, and with staircases leading out of, and passing through the rooms; these possess no through ventilation except via the yard door; some have cramped and restricted upper back rooms where sloping ceilings give a height of less than 5 feet between floor and ceiling, with a small window having a superficial area considerably below the minimum required for all habitable rooms in new buildings; and as a result of these conditions, the rooms must necessarily be very unhealthy for sleeping apartments, for which purpose they are generally used. In other instances passages and staircases are so narrow that a person of average size has to proceed sideways to gain free passage.

A great number of the houses have no sinks, and water supplies in these cases are obtained from a tapped stand-pipe in the yard. One old cottage in the area has in the process of time become so surrounded by other properties that it has no direct access to or from any public thoroughfare, and approach is only possible by entering and passing through another house. Many houses in this area have been built on gardens formerly belonging to other houses. I may add that the practice of building workshops and so forth on gardens belonging to houses is becoming a usual practice in Hackney, and is a highly objectionable proceeding in many instances.

This area contains a terrace of more modern property (estimated to be about 36 years old) situate in Hockley Street. These houses, however, are cramped on site, badly arranged and planned, with very little yard space; and it appears that each of these houses was originally intended to be occupied as two tenements or separate flats, but no proper separate provision for domestic convenience appears to have been provided except separate water supplies on the ground and first floors. The ground floor back room in all these houses is very deficient in natural light and ventilation, owing to the bad arrangement of a lean-to glazed roof built against the rear wall to afford protection to the wash-copper and sink, which would otherwise be in the open yard.

The principal defects and bad features of the area, as a whole, are the narrow and badly arranged streets; the aged, decayed and worn-out condition of most of the houses; differences in the levels of the floors, streets and back yards, making sub-floor ventilation difficult, if not inadequate in many cases; the fact that most of this area was originally built up on low-lying marshy ground, without any proper provision for the prevention of rising dampness or ground air in the houses, and the bad internal planning of the houses—all these factors result in a general deficiency of natural light and air circulation and combine in producing damp and unhealthy living conditions.

A peculiar feature of this area is the large amount of irregular employment and poorly-paid class of worker occupying the houses; also the fact that many of the adults are chronic invalids.

Photographs Nos. 2 and 3 indicate types of dwellings found in this area.

NORTHWOLD ROAD AREA.

This area consists largely of cottage working-class dwellings, but there has been a considerable diversity of building construction disposed in a somewhat erratic manner, comprising mainly detached and semi-detached cottages in addition to the usual terraced dwellings. Some of the housing property has been purchased for demolition and the erection on the cleared sites of factories and workshops. The streets vary in width from 12 feet to 50 feet, and there are 5 culs-de-sac, either open courts or narrow passageways—the widths of which vary between 3 feet 9 inches to 22 feet—providing access to groups of cottages.

Despite the open aspect of the site as viewed generally, there are groups of small houses so closely built together as to be congested and deprived of a sufficiency of natural light, ventilation and even sufficient space to provide proper sanitary conveniences.

Whatever the type of dwelling on this area, the condition of the dwellings is very much the same. Probably the age of most of the properties is approximately 150 years, and there is no question but that all the dwellings present definite and unmistakable signs of structural deterioration due to the effects of age and wear over a very long period of years, and quite apart from this consideration, there are many other permanent sanitary defects. Most of the dwellings possess bad planning features of some kind or another, in most cases entry being direct from the street into the living room and with dark, winding staircases opening out of such rooms, or from small cramped lobbies rising through the middle of the house between the front and back rooms where it is not possible to obtain by normal means, any sort of natural lighting or ventilation. There are houses where the floor is below street level and where one steps down into the house directly off the public footpath; there are a number of dwellings of the single-back type where no windows are provided at the rear above the ground floor, and these dwellings obtain only very poor ventilation on the ground floor level, and many have small, cramped and low rooms averaging between 6 feet and 7 feet in height.



PHOTOGRAPH No. 5.—Warburton Square, WARBURTON SQUARE AREA.



PHOTOGRAPH No. 6.—Warburton Square, WARBURTON SQUARE AREA.

Included in this area are two back-to-back cottages, and sixteen single-storey two-roomed cottages, which are extremely aged and dilapidated.

The smaller dwellings, especially, possess only a bare minimum of domestic comfort or convenience. It can be definitely stated that practically every dwelling is damp, and many seriously so.

Reviewing the condition of the properties as a whole, the area is composed of extremely aged, damp and worn-out dwellings, many of which are badly designed as regards internal arrangement; and by the process of superficial "patching"—both externally and internally—have received prolongation far beyond their normal term of effective life.

Photograph No. 4 indicates the conditions met with in this area.

WARBURTON SQUARE AREA.

This is a small residential area in the centre of an industrial district. High factories, workshops, warehouses, a place of worship, etc., enclose the area, and in many cases have been built so close to the houses as seriously to interfere with lighting and ventilation of the rear spaces. In addition, a permanent obstruction which affects future planning is the railway viaduct, bisecting the area and interfering with ventilation from an easterly or westerly direction. Ventilation from other directions is interfered with by high factories and workshops. The beneficial effects of London Fields is largely nullified by the railway viaduct, the surrounding buildings and the ill-arrangement of the houses on the area, also on account of the bad formation—narrowness and closeness—of the streets contained in the area. The condition of the houses generally is old and worn, although some have been better cared for and maintained in a comparatively better condition. Speaking generally, the houses are badly planned. The street doors in many cases open direct into living rooms or small lobbies which cut into the living rooms. There are instances where the staircases are dark, steep and winding, leading out of living rooms or scullery, or running through the centre of the house. There are houses where the ground floor is below the street level, and others so placed in cramped positions that the rooms are awkwardly shaped, making cleaning difficult, and where space has been so utilised as to prevent any yard space being available, resulting in overcrowding of buildings on the site. The houses, as one would expect from the age, were built without damp-proof courses, although some have been inserted, as is the case throughout the Borough where walls have been rebuilt, generally under a "dangerous structure" notice enforced by the L.C.C.

The difference in the levels of the streets and many of the small and restricted backyards make back air-space deficient; and the formation of culs-de-sac in Warburton Square and Warburton Road adversely affect front ventilation also; this is further aggravated by the narrow streets—approximating to only 20 feet—which have no proper proportion to the heights of some of the buildings having frontage thereon, and this also obstructs proper lighting of the smaller and lower-built properties.

The low levels of yards and closeness of buildings and walls in the rear of the houses in many instances render the lowest back rooms dark and unwholesome, especially so where these rooms are basements averaging 5 to 7 feet below the adjoining street level. In many cases where the back yards are low and yard space greatly restricted, the proximity of the W.C. and the dustbin frequently causes foul smells in the houses, especially on days when the atmosphere is warm and moist.

The insanitary state of the area arises from the conditions mentioned above, the most important being the closeness of the buildings to each other, the bad arrangement and planning, the narrowness and bad formation of the streets, difference of levels of streets and back yards, heights of surrounding buildings, all these factors making the area generally cramped, deficient in ventilation and air space, and excluding a large amount of sunshine, especially from the very centre of the area.

The type of dwellings, back and front views, is shown in photographs Nos. 5 and 6.

ABBOT STREET AREA.

This area consists of old cottage-type properties, two and four-roomed dwellings, many of the single-back type.

The majority of the dwellings form the sides of a cul-de-sac, the end of which is shut in by high buildings in the L. M. & S. Railway Goods Yard used as warehouses or stores. The width of the "street" varies from 16 feet to 21 feet between the buildings—there being no forecourts.

The dwellings are situated in the centre of an industrialised locality and built on a low-lying site which in part is some 6 feet below the immediate street level, and are surrounded and overshadowed by high buildings.

The lack of free air circulation and consequent absence of proper internal ventilation in the dwellings is due to the nature and position of the site already mentioned, the proximity of surrounding and overshadowing buildings, and the internal bad planning of the dwellings themselves, many of which are of the single-back type. Some attempt has been made to secure adequate ventilation of the upper room in these dwellings by the removal of a few bricks, and the provision of a small casement window in the rear wall. These "openings" vary considerably in size, but in no instance can they be considered adequate, nor does their existence transform what are virtually cottages of the single-back type into properly ventilated cottages.

The street doors open direct from the street into the living room. The staircases, leading out of the corner of the room and directly into the room above, are steep, winding and unprovided with natural light or direct ventilation.

A feature very noticeable in the dwellings is the very crude form of interior planning, and the absence of ordinary domestic comforts, privacy and convenience; many have no sinks, and water supplies are obtained from taps fixed in the open yard, which in some instances are used in common. All the houses are damp, and some seriously so.

This area is badly situated, and the arrangement of the dwellings is unsatisfactory; the bad planning and the damp and worn-out condition of the dwellings, the lack of light and air, the presence of dampness and the structural deterioration result in very unhealthy living conditions, and an atmosphere of general depression and discomfort.

The type of dwellings and nature of the site are shown in the photograph No. 7.

BANISTER STREET AREA.

This area is situated in one of the poorest and oldest parts of the Borough, and, as to be expected from its situation, embraces some very old property, Heywood Buildings possibly being approximately 500 years old. The photograph gives an idea



PHOTOGRAPH No. 7.—Back view of cottages in Abbot Street, ABBOT STREET AREA.



PHOTOGRAPH No. 8.—Banister Street, BANISTER STREET AREA.



PHOTOGRAPH No. 9.—Heywood Buildings, BANISTER STREET AREA.



PHOTOGRAPH No. 10.—Back view of houses in College Street, BANISTER STREET AREA.



of the structure, but cannot show the actual lack of domestic amenities. These "buildings" are a block of cottages, each of two floors. The cottages, individually, possess no sanitary or other domestic conveniences, and have no drainage. Local verbal history claims that the structure was originally a cowshed. In addition to the absence of all sanitary conveniences, the only provision for cooking or artificial lighting is the open fire, oil or candles. There is one communal water supply and wash-copper, which is situated in the communal wash-house, where the dustbins are also kept. The water-closet accommodation is situated on the opposite side of the narrow street. The cottages have no yards, and the public thoroughfare is normally used as a drying ground. The internal planning is extremely bad; floors are below ground level; there are no back windows, and a total absence of through ventilation, which is aggravated by the cramped, shut-in, and overshadowed nature of the site; these factors definitely producing bad living conditions. This structure is weak, decayed and worn out; a damp-proof course has at some time or other been inserted in part of the main front wall, probably when the walls were condemned as dangerous structures and rebuilt.

The properties in Banister Street comprise 2, 3 and 4-roomed cottage-type dwellings, with a single-storey wash-house at the rear. This wash-house is used as a living room in some instances.

The dwellings are old, and the interior planning—if it may be so described—is crude. The majority have floors below street level, no forecourts exist, and one steps down from the street paving directly into the front room; the staircases in these dwellings lead out of either the front or back room, or up the centre of the house between these rooms, and in almost every instance are winding, dangerous, unventilated, dark or gloomy, cutting direct into the upper room; the ground floor rooms intercommunicate; the upper back room in many instances is cramped, low, ill-ventilated and lighted, having a sloping ceiling to the rear wall which provides a height from floor to ceiling of a bare 5 feet, and permits of no head-room, apart from the serious impediment to adequate ventilation that is so essential to a sleeping apartment. A number of these rooms are also furnished only with a window of inadequate size.

All the houses are damp in some degree, in the majority of cases due to the age of the property and consequent absence of damp-proof courses in the main walls, the lack of concrete over site, and the poor general maintenance; most possess little convenience, the majority have no sinks, and the water supply is derived from a tap fixed in the open yard, and in some cases the water-closet is situated at the far end of the yard—a distance of approximately 40 feet from the house. The general internal arrangement or planning results in a deficiency of natural light and ventilation in the dwellings.

The dwellings in College Street and Homerton Row are generally somewhat better planned, and provide better accommodation than others in this area, but are all structurally in poor condition. The majority are provided with sinks, and have an internal water supply, but some of the water-closets are very inconveniently placed at the far end of the yard; many of the floors are below street level, and the structures are generally damp, and sub-floor ventilation not always efficient. The principal factors attributing to dampness appear to be the general absence of damp-proof courses and concrete over site, the houses having been built at a time when these measures were not generally adopted, and certainly not enforced in all building construction. Damp-proof courses, however, exist in certain isolated instances, nearly always only in the case of walls whose condition necessitated entire rebuilding, when the District Surveyor would enforce the provision of a damp-proof course.

Many of these houses have the addition structure at the rear badly arranged, and with a low-built chimney stack from the wash-copper flue—the whole effect of which is not only to deprive the lower back room of a sufficiency of light and air,

but gives rise to considerable intermittent nuisance from smoke and dirt in the upper back room, in addition to which the staircases are badly lighted and ill-ventilated, with the exception of one or two instances where some light is obtained from a small fixed window in the rear main wall.

Reviewed collectively and generally, the dwellings in this area all possess defects, which definitely produce bad living conditions, the general structural condition of the houses is poor—many very poor—structural weaknesses have developed, resulting in sunken roofs which necessitate frequent attention to maintain them in any degree of weather proof condition; sunken floors, bulged ceilings, and a worn and decaying condition of general woodwork and joinery; most of the brickwork is in a very poor condition, much of which has, within recent time, become so bad as to necessitate being dealt with as dangerous or neglected structures under the London Building Act.

Reference to the photographs Nos. 8, 9, 10 and 11 will provide some idea of the types of dwellings included in this area.

BERKSHIRE ROAD AREA.

Dwellings of the normal two-storey terrace type make up this area. The majority provide accommodation of five rooms and a wash-house, and a number have six rooms and wash-house.

Some of the floors are below the level of the adjoining ground, and the houses are entered directly from the street without any intervening forecourt.

Inspection of the area reveals at least two serious defects common to most of the dwellings. In nearly every instance bad settlements have occurred, particularly in the region of the main partition wall as a result of which the floors and ceilings have sunk in sympathy. This common defect is doubtless due to the absence of concrete under the footings; and the periodical floodings to which these houses have been subjected in the past have no doubt largely contributed in the cause of these settlements. In addition, most of the houses bear evidence of serious dampness which probably arises as a consequence of the general absence of damp-proof courses, concrete over the building site, inadequate sub-floor ventilation, and the neglected condition and excessive porosity of some of the brickwork.

Special mention should be made of the fact that a considerable number of walls or parts of walls have recently reached such a bad condition as to necessitate action being taken by the London County Council under the "dangerous or neglected structures" section of the London Building Act, and there is no doubt that some more of the existing brickwork will shortly have to receive similar attention.

The houses in this area are not old—estimated at approximately 50 years—but it is evident from their present condition that initial construction must have been very poor, as structural weaknesses are general, and have resulted in bulging or settled brickwork, bulged or sagging ceilings, sunken floors, dropped partition walls, etc. Coupled with these facts the properties have received only a minimum of maintenance carried out in an indifferent manner, and as a result of all these factors, the houses have deteriorated into their present condition of general disrepair and dampness.

Photograph No. 12 indicates the type of dwelling proposed to be dealt with in this area.

BROADWAY AREA.

The area is principally made up of two-storey terrace dwelling houses, providing accommodation of four rooms and a wash-house addition.



PHOTOGRAPH No. 11.—Back view of houses in Banister Street, BANISTER STREET AREA.



PHOTOGRAPH No. 12.—Backs of Prince Edward and Berkshire Roads, BERKSHIRE ROAD AREA.



PHOTOGRAPH No. 13.—Backs of south side of Ada Street looking north-east, BROADWAY AREA.



PHOTOGRAPH No. 14.—Front view of Clarence Cottages, CLARENCE TERRACE AREA.



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Some of the dwellings in the area are extremely aged, probably over 100 years old, ill-planned, damp, poorly lighted and ventilated, and have reached the end of effective life.

Most of the dwellings are in a very poor structural condition, generally as a result of consistent neglect; even superficial cleansing, as apart from structural maintenance, is seldom carried out unless, and until, such is enforced by official action on the part of the Public Health Department, and in the absence of any enforceable minimum standard of workmanship applicable to work so executed, most, if not all, of the work is of poor quality, and often left in an unfinished condition. In addition, other objectionable practices employed, such as the use of unsuitable, old and second-hand materials, have combined to produce the culminating effect of general deterioration of the properties. The premises may be described as being in most instances in a general state of disrepair.

There seems no doubt that the majority of the houses, which were built 80 to 100 years ago, were initially of poor construction, have no concrete over the building site, and are generally without damp-proof courses. Many have floors below the street level, the majority are damp, and in a neglected and poor structural condition. Apart from such general defects as already mentioned, there are several instances where individual bad planning details rob the interior of the dwellings of fresh air and natural light.

None of the houses is provided with any form of domestic convenience beyond vital sanitary fittings, and apart from the deteriorated structures, the interiors also are in a general state of disrepair, and present a generally dilapidated appearance. The majority are damp, and in many instances rooms, in spite of repeated action by the Public Health Department, become from time to time verminous.

Photograph No. 13 indicates the average type of dwelling in this area.

CLARENCE TERRACE AREA.

A small area embracing twelve dwellings—seven small two-storey single-back cottages in a cul-de-sac, and a terrace of five two-storey houses also in a cul-de-sac. The estimated age of the properties is in the neighbourhood of 100 years.

As regards the seven single-back type first mentioned, they provide accommodation of four rooms, two on each side of the entrance door; they are one-room deep, have no back windows, and in consequence there is an entire absence of through ventilation of the rooms, in addition to which the front windows are overshadowed due to the narrowness of the street, this effect being more pronounced in the ground floor rooms where natural light is particularly poor. The main floor level in these cottages is below the street level. The floors generally are sunken, and the interiors provide general evidence of the effects of old age, wear and tear, and weakening structural strength. At the rear, very small yards are provided, approximately six feet deep, one side of which is wholly occupied by a single-storey structure accommodating a wash-copper, sink, and water supply. Each cottage is provided with a separate water-closet which is also situated in the yard. In the case of three of the cottages, situate on the east side of the cul-de-sac, the tiny yards are built around and shut in, allowing very little free air circulation.

There is considerable dampness due to age, bad construction, indifferent maintenance, the difficulty of effective sub-floor ventilation, absence of concrete over the building site and damp-proof courses in the walls.

The remaining five dwellings each provide accommodation of five rooms with a roughly improvised structure of wood or brick and wood in the yard at the

rear, which serves the purpose of a scullery or wash-house, in addition to which a brick copper is built in the opposite corner of the yard, roughly protected from the elements by a lean-to roof shelter only. The planning of these dwellings, though considerably better than those just mentioned, possesses bad features. Their present structural condition is extremely poor, as it appears they were largely built of soft bricks, and much of the brickwork appears to be settled as well as very retentive of atmospheric moisture. The dwellings occupy a cramped and "shut-in" site; with one exception, no sinks are provided, and the water supply is from a draw-off tap in the open yard. The floors are below street level, and much dampness shows itself in the brickwork.

The dwellings have undoubtedly served their effective life, and are in a worn-out condition.

Photograph No. 14 shows the "single-back" cottages in this area.

EAST STREET AREA.

The dwellings comprising this area are all badly designed, and are of the back-to-back type, built on a cramped site.

Two of these cottages contain three rooms on three floors, the basement room being wholly below ground level; none of the rooms has through ventilation, and the arrangement of the staircase out of the ground floor room direct into the upper room without a landing generally reduces the already small floor spaces; the basement rooms are low and dark; the staircases are dark and unventilated, receiving only indirect light via the rooms. There is no yard, and no sink is provided, and although in one case a water-tap provides an internal water supply over the wash-copper in the basement, both these cottages are provided with a water-tap in the front area where access to the water-closet is gained. The water-closets are situate in the cellar under the public footpath for want of any other position. The wash-coppers in the basement appear to be disused, which fact is not to be wondered at, for their use must give rise to a large amount of discomfort and dampness throughout the house as a result of condensation.

The cottages are damp, becoming structurally weak, and their type has long been prohibited by legislation.

The remaining dwelling house in this small area is a very neglected, old corner property of two floors and basement, containing actually two rooms (adapted for use as four); one of the four is unused, and scarcely useable, together with the basement. It is of the back-to-back type, has no yard, but its position on a corner leaves two of the main walls as external walls, and permits of better internal ventilation than would otherwise be possible. Internal planning is extremely bad, the staircase connecting the ground floor and first floor rises from a dark corner on the ground floor, and is itself narrow, cramped, dark and dangerous, and that connecting the ground floor and basement is merely access through an opening in the corner of the ground floor.

Natural lighting is poor, even at the uppermost floor level, due to overshadowing. The dwelling possesses no sort of convenience, no sink is provided, and in the absence of a yard or open space, the water-closet is built under the public footpath in a dark position, incapable of proper ventilation, being approached through the basement and across an area, which also contains the water-tap.

The dwelling is badly situated, badly planned and arranged, is ineffectively lighted and ventilated, damp, neglected and worn out.

Photograph No. 15 is of the houses in this area.



PHOTOGRAPH No. 15.—From North Street, EAST STREET AREA.



PHOTOGRAPH No. 16.—Backs of Middlesex Place, ELSDALE STREET AREA.



PHOTOGRAPH No. 17.—Fulham Place, FULHAM PLACE AREA.



PHOTOGRAPH No. 18.—Fronts of cottages in Orchard Hill, and backs of cottages in Little Hill, HIGH HILL FERRY AREA.



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ELSDALE STREET AREA.

Dwellings of varying types make up the area, six of which have basements. Three of these latter dwellings are situate in a narrow cul-de-sac, and consist of three rooms, one above the other, the basement room being wholly below ground level at the front, and about 3 to 4 feet below the ground at the rear, where there is no dry area, and where the rear air space is enclosed and shut in by adjacent buildings; these dwellings have no through ventilation in the upper room; they are aged, neglected, damp and totally unfit. The other three basement houses possess in some respects worse sanitary defects than the foregoing, for apart from the unfit basement room, these houses are shut in at the rear, have little or no means of through ventilation, and the interiors are extremely badly arranged, being very dark and practically airless; they are also aged, worn out and damp.

Of the remaining dwellings, four of these are two-roomed single-back cottages, with wash-house accommodation, aged, damp and worn out, fronting a narrow street. They have no forecourts, and entry from the street is direct into the living room, with the staircase directly connecting the lower and upper room; the rooms are small, with low ceilings, there are no back windows, no through ventilation, and the small back yards are shut in and overshadowed by the adjacent high factory building. In the same street two adjoining cottages have additional living accommodation providing three rooms and wash-house, and in these instances internal ventilation is somewhat better, and there is no overshadowing at the rear. The rooms, however, are low, and the third room over the wash-house is very poorly lighted and ventilated, having a sloping ceiling to the rear, no flue, and a window of inadequate size. These cottages are also aged, damp and worn out.

Other dwellings in this area include a pair of aged, damp, four-roomed cottages, built on a low site at the end of the cul-de-sac already mentioned, and may be described briefly as aged, neglected and dilapidated, the rear windows are inadequate as a means for proper ventilation of the interiors, and the structures are damp and worn out.

The remaining houses have accommodation varying from three to five rooms, with wash-house, and the types vary considerably. The internal arrangement also varies, but all have the common feature of bad internal arrangement of the rear part, all the back rooms are poorly lighted and inadequately ventilated; there is no yard space at the rear, and the back windows are small, inadequate, and badly overshadowed by the high factory building on the opposite side of the narrow cul-de-sac upon which these dwellings back. The buildings on this area, apart from bad planning and inadequate lighting and ventilation, are aged and damp.

Photograph No. 16 shows the dwellings in this area.

FULHAM PLACE AREA.

A terrace of small three-roomed cottages in a cul-de-sac. The dwellings are badly situated, closely shut in at the rear where the tiny yards—3 feet 6 inches deep—are completely overshadowed by a high wall, but the condition at the front is better in this respect, the houses being approached from a narrow passage approximately 4 feet 6 inches in width giving access to the forecourts.

The cottages are extremely aged and badly arranged. The rear rooms receive practically no natural light, so that artificial light is constantly necessary. The street door opens direct from the forecourt into the front room, which room directly communicates with the wash-house, and in most instances is used as a living room, and from this room the staircase rises to the two small bedrooms above.

The staircases are dark and unventilated, and the upper back rooms are supplied with only an extremely small window overshadowed by the high wall at a distance of 3 feet 6 inches, and as a consequence these rooms are very dark and badly ventilated.

All the rooms are low and cramped, little convenience is provided, there is no sink, and the water tap is fixed in the tiny back yard adjacent to the water closet.

These dwellings are aged, poorly maintained, damp, cramped, and overshadowed, and their position deprives the interiors of adequate natural light and ventilation, these defects being further aggravated by the sanitary defects arising out of the individual bad planning features already mentioned.

Living conditions in these dwellings cannot be otherwise than unhealthy.

Photograph No. 17 shows these cottages.

HIGH HILL FERRY AREA.

This area is composed of a somewhat scattered collection of houses, the majority occupying a low site in the Lee valley.

Some of these houses situated on the lowest part of the area have in the past been subjected to periodical floodings, the effects of which upon the houses have never been entirely remedied, and it should be mentioned that eight of these were included among the dwelling houses upon which the Council made "Closing Orders" in 1918, detailed reference to which will be found in my remarks dealing with Middlesex Wharf area. The Ministry of Health prevented these Closing Orders, as in the case of Middlesex Wharf, from coming into operation owing to the shortage of housing accommodation. The dwelling houses in this area are of widely different types, built in small groups or pairs, and approached through narrow passages or culs-de-sac; the individual types and accommodation vary between single and two-storey structures providing two to five rooms with the addition, in the majority of cases, of a wash-house or scullery. Twenty-five houses in this area are of the single-back type, that is to say lacking in adequate means of through ventilation, in addition to which many of the remainder are so planned or equipped that the interiors are gloomy or dark, and there are instances where even the windows provided are of inadequate size. The general internal arrangement of the houses in the majority of instances is definitely bad, some with floors considerably below surrounding ground level; there are dark, narrow, winding and dangerous staircases, many instances where entry is direct into the living room, which is below the adjoining ground level, and staircases directly connecting the two floors, and where, in the absence of through ventilation, the atmosphere of the lower room is merely ventilated into the upper room. Some of the houses have no yard, others quite a tiny open space adjoining, sufficient only to accommodate a water closet and a water tap, but in these cases the yards are very much enclosed. There are instances where wash-houses are used as living rooms, and, according to information, are let as such, and some of the cottages are not provided with a wash-house or any facility for family washing, and even in some instances have no sinks.

Four cottages have only one common external water supply, and in these cases the water closets adjoin the front door in full public view, as is also the case in two other instances where the water closets are situated in the forecourt. There is another group of cottages where a common wash-house and water closet (combined) serves for the use of three cottages.

All the dwellings may be described as old and damp, the dampness being due to the fact that the buildings were erected at a time when building sites were not



PHOTOGRAPH No. 19.—Rear of cottages in Orchard Hill, HIGH HILL FERRY AREA.



PHOTOGRAPH No. 20.—Retreat Cottages, HIGH HILL FERRY AREA.



PHOTOGRAPH No. 21.—Back view of Nisbet Street, looking south, NISBET STREET AREA.



PHOTOGRAPH No. 22.—Back view of Nisbet Street, looking north, NISBET STREET AREA.



covered with concrete and when damp-proof courses were not built in walls of property of this description, apart from the fact that quite a number of the houses have brickwork built of soft, absorbent bricks which are very retentive of atmospheric moisture. In addition, maintenance generally has been poor or indifferent, and in many instances the fabric has been totally neglected. In consequence the majority of the houses are in a state of general disrepair, in addition to being damp, worn out, badly arranged and devoid of any sort of domestic convenience or comfort as viewed in the light of present-day requirements for working class property.

Photographs numbered 18, 19 and 20 show some of the types and condition of the dwellings within this area.

MIDDLESEX WHARF AREA.

A somewhat scattered area, consisting of short terraces and semi-detached two-storey cottages.

All these dwellings are built on low-lying land which is subject to periodical flooding from the River Lee close by. The houses are estimated to be approximately 90 to 100 years old, and structurally they show marked effects of age and are obviously worn out. They possess one great advantage in the free air space and open surroundings of the neighbourhood.

Some of the houses, however, are single-back type and have no means of through ventilation, whilst a number are very badly planned, the entrance door opening direct into the living room, rooms directly intercommunicating, staircases leading out of the living rooms or up the centre of the house and lacking in direct means of natural lighting and ventilation.

Despite the low natural level of the site, in some instances the floor level is even below the adjoining outside ground level, and as to be expected in view of the age of the structures, no precautionary measures such as the provision of concrete over the building site, or damp-proof courses were taken initially against the possibility of flooding and its consequences, nor against the normal effect of rising dampness.

As far back as July, 1918, the majority of these houses were in such a condition that the Borough Council made "Closing Orders" (under Section 17 of the Housing and Town Planning Act, 1909) in respect of them. These "Closing Orders," however, were prevented from coming into operation by the Ministry of Health. The Ministry considered it undesirable for the Borough Council to take any further steps towards making these "Closing Orders" operative in view of the acute shortage of alternative housing accommodation available in the Borough at that time.

NISBET STREET AREA.

This area contains houses in Nisbet Street, Crozier Terrace, and two cottages named Bones Cottages.

The dwellings are mostly of the same type—typical terrace dwellings of four rooms, with rear addition wash-house, with the exception of Bones Cottages—to be described later.

The houses in Nisbet Street mostly have a restricted yard space, and internal planning defects which prevent satisfactory ventilation. The entrance is into a short passage leading direct to the back room, with the staircase leading out of this room, and the room opening directly into a small cramped wash-house, which, although provided with washing facilities, is so cramped that extreme discomfort

and inconvenience must arise on every occasion when these facilities are put to use. The bad features here are the sloping ceiling of the wash-house, and the badly situated position of the small window and door in the low wall, which provide no effective means for the escape of steam, heat, or washing odours, which normally rise into and are distributed through the back room and up the staircase into bedrooms above, giving rise to a large amount of condensation, and general internal dampness; furthermore, it would be true to state that some of these wash-houses are so cramped that no general use is made of them, and in some instances this defect is so pronounced that it is difficult for a person above average size to get through into the yard.

These houses were apparently of poor original construction, and have consistently suffered from indifferent maintenance. The majority of the roofs are in a very bad condition, and all the houses show marked effects of hard wear and tear, which, in view of the indifferent attention to general maintenance over a long period, has left them in a generally deteriorated condition, and it is a matter of great difficulty in some instances to keep the rooms free from vermin.

The houses in Crozier Terrace are of a somewhat better type compared with the foregoing, but here in some instances the sanitary and domestic conveniences are placed in the back yard in such a manner as seriously to interfere with the entrance of light and air into the interior of the dwellings. In other houses in this street the ground floor room at the rear suffers from restricted internal lighting as a consequence of the bad arrangement of the addition buildings. Here again it is obvious that initial construction was of poor quality, and that general maintenance has been well below a standard necessary to maintain working-class property in a reasonably fit and habitable condition, and as a consequence these properties have reached the end of their effective life. Generally they possess somewhat improved domestic and sanitary convenience as compared with those in Nisbet Street, but even so, they show varying degrees of sanitary defects, and lack ordinary domestic conveniences.

Bones Cottages consist of two extremely aged cottages built in an enclosed court, access to which is from a narrow opening between Nos. 6 and 7, Crozier Terrace. Both of these dwellings are of the single-back type, and possess no means of through ventilation and no sort of modern domestic convenience, the occupants being required to use the open fire for cooking and oil or candles for lighting, as gas or electricity are not laid on. There is a communal wash-house, water-closet and water supply. The cottages are deficient in natural light and ventilation, and the structures themselves are extremely aged and damp.

Some idea as to the structural condition of these houses and the planning of Bones Cottages may be gathered from photographs Nos 21, 22 and 23: the situation of Bones Cottages may be noted on the extreme right of photograph No. 22.

OTLEY TERRACE AREA.

This area consists of two terraces of old cottage type dwellings of two floors, together with a pair of old semi-detached cottages standing apart and occupying a low site.

The dwellings forming Prince of Wales' Terrace are situated actually on the towing path of the River Lee, and in view of flooding which occurs from time to time, some of the structures are built on a series of vaulted arches, but in the case of three of the dwellings this is not so; four out of the eight dwellings forming this terrace are unoccupied, and there is no doubt that all are unfit for habitation.

The cottages in Otley Terrace appear to have originally been constructed as two-roomed single-back type, but three are what may be described as double-



PHOTOGRAPH No. 23.—Front view of Bones Cottages, NISBET STREET AREA.



PHOTOGRAPH No. 24.—Backs of cottages in Otley Terrace, OTLEY TERRACE AREA.



PHOTOGRAPH No. 25.—Front view of cottages in Otley Terrace, OTLEY TERRACE AREA.



PHOTOGRAPH No. 26.—Pear Tree Court, PEAR TREE COURT AREA.



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fronted, and provide accommodation of four rooms. At some subsequent date a single storey addition has been added at the rear to serve as a wash-house. All these cottages are aged—somewhere in the neighbourhood of 100 years old—are badly planned, damp and worn out; the rooms are low, small, badly lighted and ventilated; the street is narrow, and there is some overshadowing of the front windows. In the majority of instances the street door opens directly from the street into the front living room, with the staircase leading out of this room, in some instances being extremely narrow and cramped. Dampness is particularly noticeable in the ground floor rooms, and the internal faces of many of these rooms are lined with wood; some of the floors are considerably below the adjoining street level; the upper rooms are provided with a small window in the rear wall, which allows some measure of through ventilation, but these rooms are so low, and the ceiling so formed, as to deprive the interior of an adequate amount of light and air, and apart from this defect these rooms doubtless receive all the vitiated atmosphere from the lower room, which, due to the arrangement of the interior, must always find its way into the upper room.

The old semi-detached cottages already mentioned occupy a low site, and stand apart from other houses. Each provides accommodation of five rooms with a side addition scullery. The whole structure is extremely aged, most probably over 100 years, and a portion has necessitated rebuilding; the roof has apparently developed a weakness and sunk, and the upper half of the building is faced externally with weather-boarding. All the floors are weak, the levels vary, the internal arrangement is bad, and although the buildings occupy an open site, the internal natural lighting and ventilation leave much to be desired.

The owners of Prince of Wales' Terrace recently wrote to the Council pointing out that the site is not suitable for dwelling houses, and that they are desirous of demolishing these cottages, but owing to the operation of the Rent Restriction Act cannot gain possession, also stating they are prepared "to pay the tenants a sum of about £10 each to meet the cost of moving."

Photographs numbered 24 and 25 show the types of cottages in Otley Terrace.

PEAR TREE COURT AREA.

The area is made up of sixteen small cottage dwellings, very old, badly arranged and surrounded by larger and more modern buildings. Ten of the dwellings are in a cul-de-sac approached through a narrow opening about 4 feet 6 inches wide under a building having frontage to the main road. The type here is back-to-back with a high factory building, and the accommodation provides two rooms—one above the other—a primitive type which is incapable of providing any sort of domestic convenience. The planning is bad, entrance is direct into the living room, and a narrow, dark and winding staircase gives access direct into the upper room without a landing. There are no back yards, and no means of through ventilation. The interiors are small, gloomy, badly ventilated and damp. The cottages have no individual drainage or sanitary conveniences. A range of five communal water closets is provided at the end of the cul-de-sac, and three stand-pipes in the open court provide the general water supply, where also a hand flushing cistern is provided for cleansing the drain gulley which is obviously used for the disposal of slops. The open court is used as a drying ground for the family washing.

The remaining six dwellings consist of three pairs of aged, two-storey cottages providing accommodation of three rooms and wash-house. These dwellings are curiously disposed, two, one behind the other at the end of a cul-de-sac, with another pair abutting, and the remaining pair opposite, the intervening space forming a rectangular court practically enclosed on all sides by walls 18 to 20 feet high.

These six cottages are of a similar plan; the street door opens direct into the living room, the staircase runs between the main building and addition, is unlighted and unventilated, and there is no through ventilation on the first floor level; the front windows are overshadowed in some instances. The upper back room is small and cramped, with a sloping ceiling, and the room has no flue. Most of these cottages have no internal conveniences, four of them have back yards with an area approximately 26 square feet, where the water closet and water tap is accommodated, and the remaining two have no yard. The dust bins are kept in the open court.

Photograph No. 26 provides some indication of the type and condition of the dwellings which make up this area, and shows the small openings to the enclosed court upon which some of these dwellings abut.

QUEENS COURT AREA.

This small area is composed of thirteen very old cottage-type two-roomed dwellings, two of which are unoccupied, derelict and unfit, and most of those occupied are of the back-to-back type.

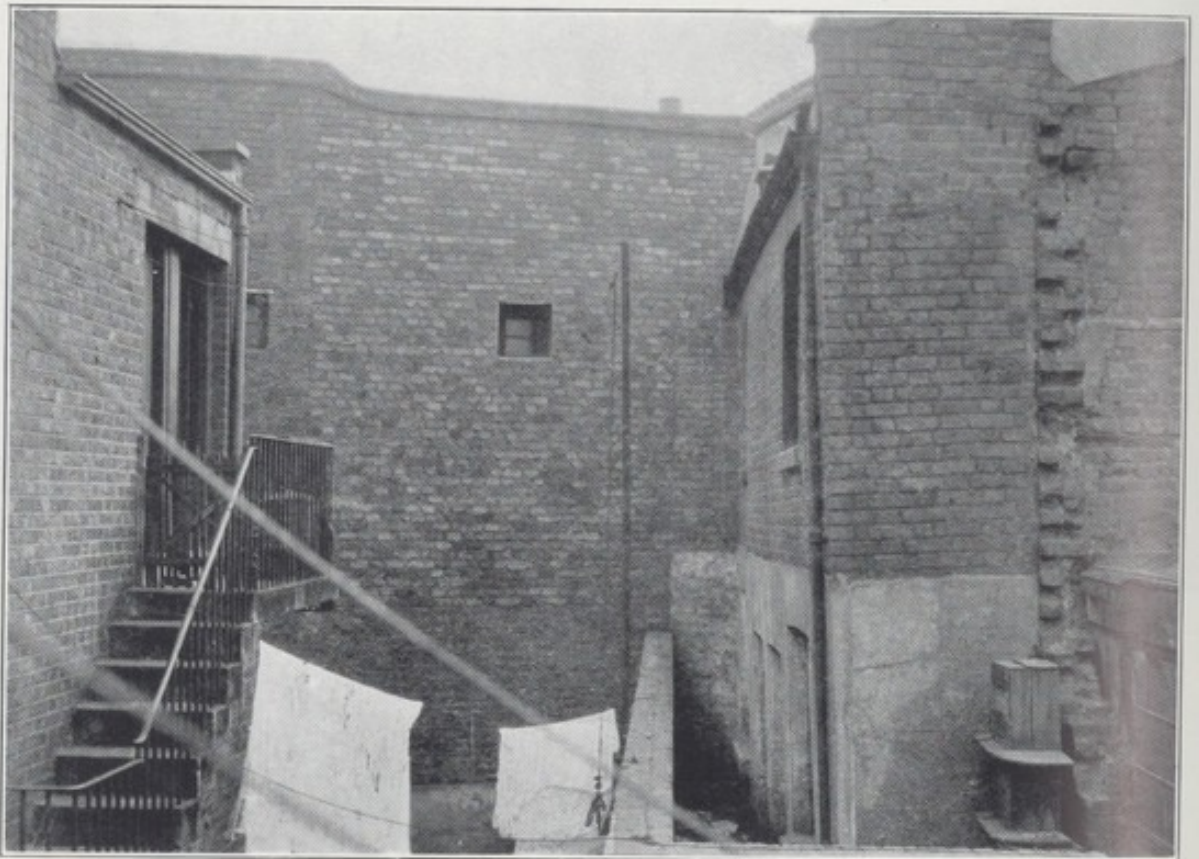
Access to the dwellings is gained from narrow culs-de sac the widths of which vary from 7 feet 7 inches to 12 feet in one instance, and from 9 feet 10 inches to 11 feet 6 inches in the other.

In the former—Priory Place—are situate five cottages with a communal wash-house and two water-closets for the use of the five cottages. The common water-closets are not screened in any way, and face the communal wash-house and the front of No. 5 cottage. Privacy in matters of personal hygiene is almost impossible under these conditions.

In the absence of any yard space attached to these dwellings, the court is used as a drying ground for the family washing.

The cramped position and formation of the court, and the disposition and internal arrangement of the dwellings afford little possibility of sunshine penetrating the interiors, and prevent adequate internal ventilation and air circulation around the buildings.

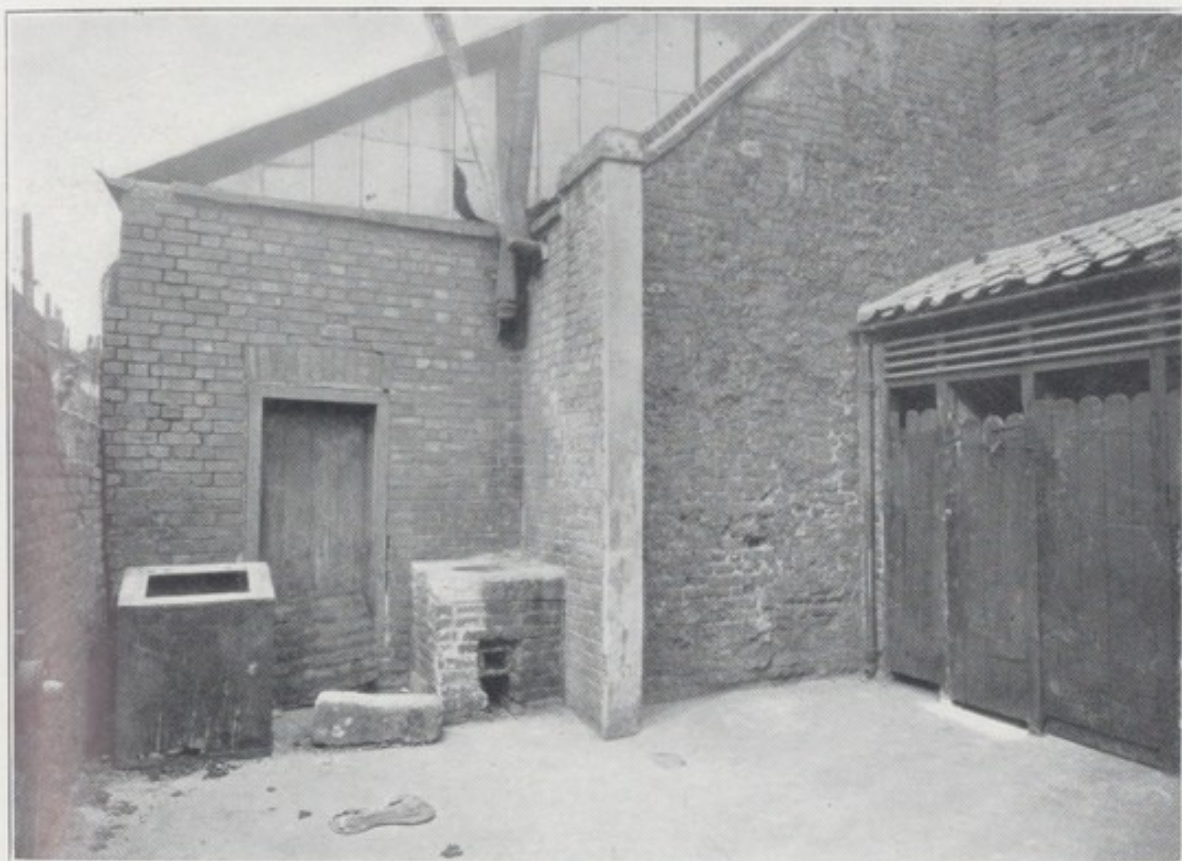
Queen's Court is a narrow cul-de-sac emerging from an opening (4 feet 10 inches wide) out of the main thoroughfare. Here the majority of the cottages are back-to-back with those in Priory Place, and generally have no through ventilation. Here also a very low and demoralising standard of living is imposed upon the occupants of the cottages, which similarly to those in Priory Place, have no yards, and where sanitary conveniences are of a communal nature. A range of five water-closets is provided in the far corner of the cul-de-sac, also a common wash-copper (not utilized) and the common dust receptacle. These closets, used by men, women and children, are not sufficiently screened from view, and can be overlooked from the rear of the adjoining properties, the separate compartments are so constructed as to be only partially partitioned from each other, and not the least objectionable feature is that they ventilate into each other, and are situated in a position where the free circulation of air is greatly impeded by high walls, and where during humid weather the atmosphere must become very objectionable. The same mentality appears to have operated when the wash-copper was constructed, no attempt having been made to make it useful, or to afford protection from inclement weather; in consequence the structure is a wreck and not put to use; and, as in the adjoining court, family washing is done under most unsatisfactory conditions inside the cottages, and the open court used, when possible, as a drying ground.



PHOTOGRAPH No. 27.—Rear of Priory Place and Queens Court, QUEENS COURT AREA.



PHOTOGRAPH No. 28.—Priory Place, QUEENS COURT AREA.



PHOTOGRAPH No. 29.—“Communal Conveniences” in Queens Court, QUEENS COURT AREA.



PHOTOGRAPH No. 30.—Queens Court, looking south, QUEENS COURT AREA.

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Cleansing and scavenging of the court depends on the goodwill and energies of the occupants, and the drain gullies do not appear to be cleansed unless they become choked and flood.

To sum up, these dwellings are back-to-back, badly situated, aged, ill-planned, ill-ventilated and lighted, damp and lack any sort of domestic comfort or satisfactory sanitary conveniences. Viewed in the light of only reasonable modern conditions, these cottages should have long since been demolished.

The photographs numbered 27, 28, 29 and 30, will convey some impression, most inadequate, I am sorry to say, of the real badness of these dwellings.

SMALL DWELLINGS ACQUISITION ACTS, 1899-1923.

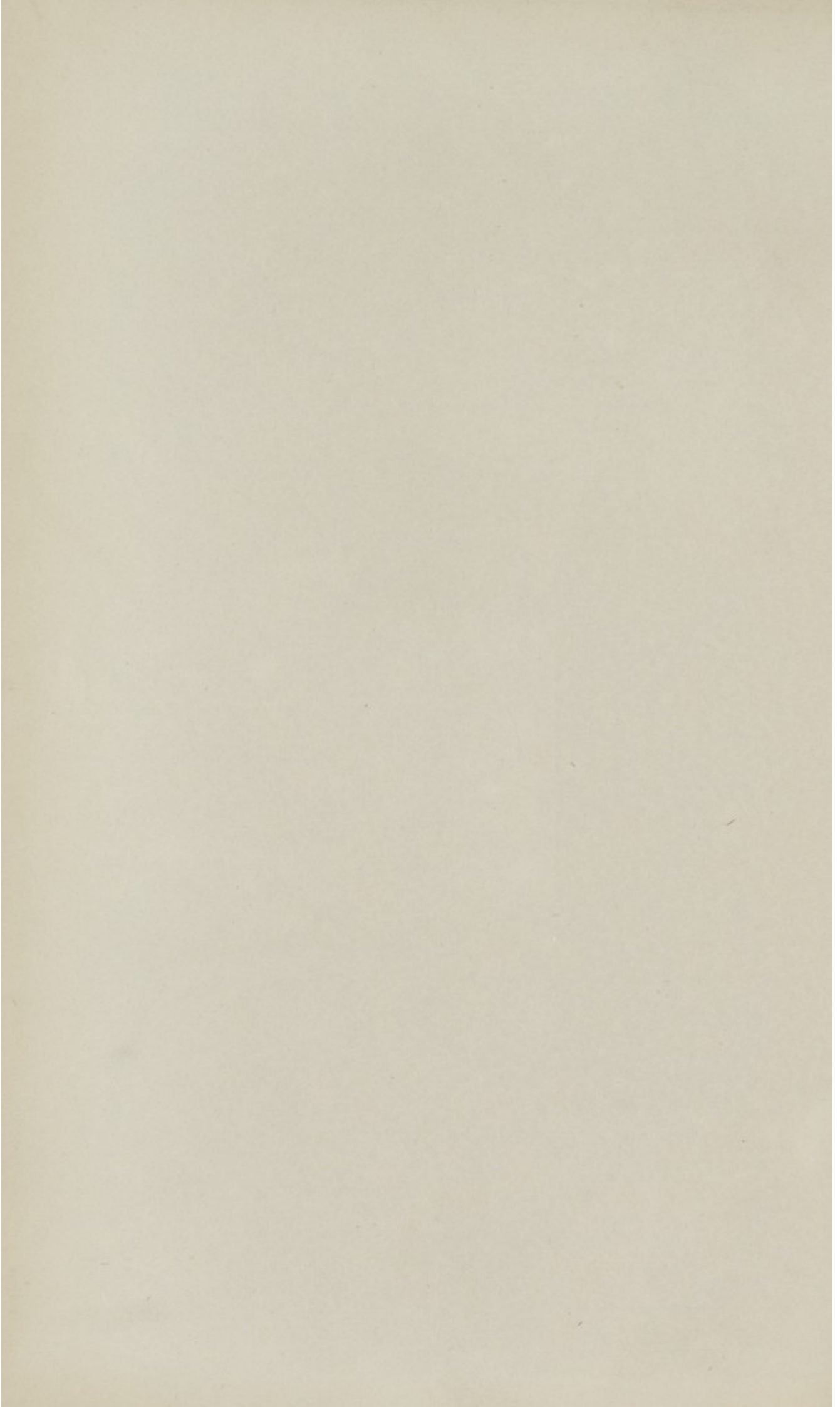
The total cases where advances have been made by the Borough Council to 31st December, 1930, amount to 329, of which 50 were granted during the year.

INSPECTIONS BY SANITARY

INSPECTIONS.	Mr. Fowler, No. 1 District.	Mr. Bew, No. 2 District.	Mr. Vobe, No. 3 District.	Mr. Sadler, No. 4 District.	Mr. Body, No. 5 District.	Mr. High, No. 6 District.	Mr. Sheppard, No. 7 District.	Mr. Long, No. 8 District.	Mr. Goldworthy, No. 9 District.	Mr. Galvin, No. 10 District.
ON COMPLAINT—										
No. of premises inspected ..	247	238	275	278	473	261	356	521	219	234
No. of premises in which defects were discovered	185	158	235	228	394	214	300	408	169	204
BUILDERS' NOTICES—										
No. of premises inspected ..	113	73	70	57	111	33	50	35	58	6
HOUSING (CONSOLIDATED) RE- GULATIONS, 1925 (HOUSE- TO-HOUSE INSPECTIONS)—										
No. of premises inspected ..	..	..	..	..	..	..	..	..	..	..
No. of premises in which defects were discovered	..	..	..	..	..	..	..	..	..	..
No. of premises in which defects were abated	..	..	..	..	..	..	..	..	..	..
No. of premises unfit for human habitation	..	..	..	..	..	..	..	..	..	..
No. of premises not reasonably fit for human habitation ..	..	..	..	..	..	..	..	..	..	..
INFECTIOUS DISEASE—										
No. of premises inspected ..	147	102	72	185	142	127	93	94	109	84
No. of premises in which defects were discovered	29	48	26	36	37	41	38	41	16	23
NOTICES SERVED—										
Total number of Intimation Notices served	262	279	266	295	386	316	360	443	263	231

INSPECTORS, 1930.

Mr. Hillier, No. 11 District.	Mr. Crook, No. 12 District.	Mr. Traslave, No. 13 District.	*Mr. Hall, No. 14 District.	*Mr. Smith, No. 14 District.	*Mr. Alexander, No. 14 District.	Mr. Brown, Special.	Temporary Inspectors.	Mr. Bobbitt, Special.	Mr. Everett, Special.	†Miss Teebay, Special.	†Mr. Nighy, Special.	Miss Portlock, Special.	TOTALS.
269	262	293	86	130	150	37	217	..	..	30	..	..	4576
239	219	241	70	85	109	18	187	..	..	29	..	..	3692
28	47	37	21	19	66	14	16	..	..	..	..	..	854
..	..	..	..	..	..	66	..	..	..	..	..	..	66
..	..	..	..	..	..	35	..	..	..	..	..	..	35
..	..	..	..	..	..	14	118	..	..	..	..	..	132
..	..	..	..	..	..	..	..	..	..	..	..	..	..
..	..	..	..	..	..	..	..	..	..	..	..	..	..
105	158	196	71	69	61	25	75	..	..	..	580	..	2495
42	46	49	24	34	33	1	21	..	..	..	..	..	585
280	271	288	125	189	193	50	224	..	..	75	112	227	5125

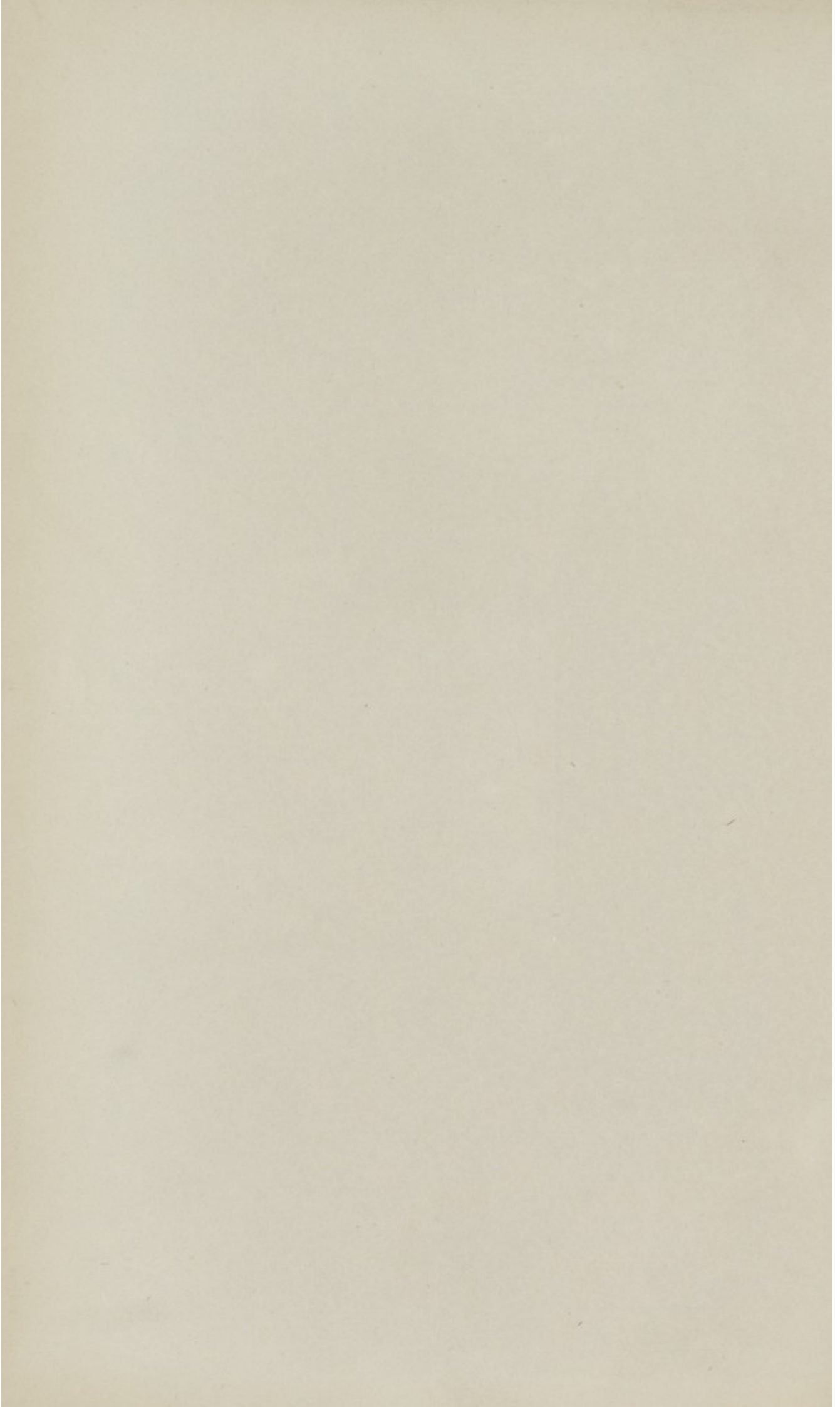


INSPECTIONS BY SANITARY

INSPECTIONS.	Mr. Fowler, No. 1 District.	Mr. Baw, No. 2 District.	Mr. Vobe, No. 3 District.	Mr. Sadler, No. 4 District.	Mr. Body, No. 5 District.	Mr. High, No. 6 District.	Mr. Sheppard, No. 7 District.	Mr. Long, No. 8 District.	Mr. Goldsworthy, No. 9 District.	Mr. Galvin, No. 10 District.
Total number of Final Notices served	45	16	7	2	68	4	18	5	..	1
No. of Statutory Notices served under P.H. (L.) A., 1891 ..	29	38	31	57	110	110	49	173	51	90
Notices served for Infringements of By-Laws	15	3	1	3	13	13	3	22	4	..
Notices served for Infringements of L.C.C. (General Powers) Acts, Public Health Acts, etc.	8	12	7	4	..	..	..	8	..	33
Notices served under Rats and Mice (Destruction) Act, 1919..	2	12	10	..	..	..	..	..	..	..
Proceedings before Magistrate under Public Health (London) Act, etc.	4	1	5	1	7	2	9	7	4	3
Attendances at Police Court ..	7	9	8	4	9	7	11	13	7	7
MISCELLANEOUS INSPECTIONS—										
No. of re-inspections. (All forms of inspection)	1860	1904	1891	1226	1087	1792	1748	2267	2349	631
No. of premises in which defects were discovered. (All forms of inspection)	272	284	266	290	431	316	374	465	258	254
No. of premises in which defects were abated. (All forms of inspection)	271	252	257	285	440	371	311	482	275	223
Inspections for Certificates under Increase of Rent and Mortgage Interest (Restrictions) Acts, 1920-1923	1	..	1	..	..	..	3	1	..	..
Mews and stables	7	8	1	..	..	..	12	12	3	1
Urinals	4	30	12	..	35	23	..	..	14	6

INSPECTORS, 1930.

Mr. Hillier, No. 11 District.	Mr. Crook, No. 12 District.	Mr. Truslove, No. 13 District.	*Mr. Hall, No. 14 District.	*Mr. Smith, No. 14 District.	*Mr. Alexander, No. 14 District.	Mr. Brown, Special.	Temporary Inspectors.	Mr. Bobbitt, Special.	Mr. Peverett, Special.	†Miss Teebay, Special.	†Mr. Nighy, Special.	Miss Portlock, Special.	TOTALS.
..	20	..	11	4	27	2	73	..	..	17	..	8	328
117	44	84	12	69	48	2	73	..	..	5	14	..	1206
15	..	24	6	4	16	3	3	..	..	5	..	..	153
1	14	1	1	..	..	..	2	..	5	..	..	..	96
10	2	12	2	1	..	..	..	..	..	..	..	..	51
4	..	7	..	1	..	..	..	..	..	..	..	..	55
7	2	22	..	5	..	..	4	2	2	..	..	..	126
1367	1534	1802	397	442	811	363	1129	..	..	295	105	665	25665
295	315	310	121	127	210	58	210	..	4	83	112	328	5383
332	300	346	150	141	177	24	362	..	3	84	77	254	5417
..	1	1	..	1	..	..	..	..	..	..	..	..	9
4	2	..	..	..	..	..	1	..	..	..	..	..	51
6	11	..	..	..	4	..	1	..	..	..	..	..	146

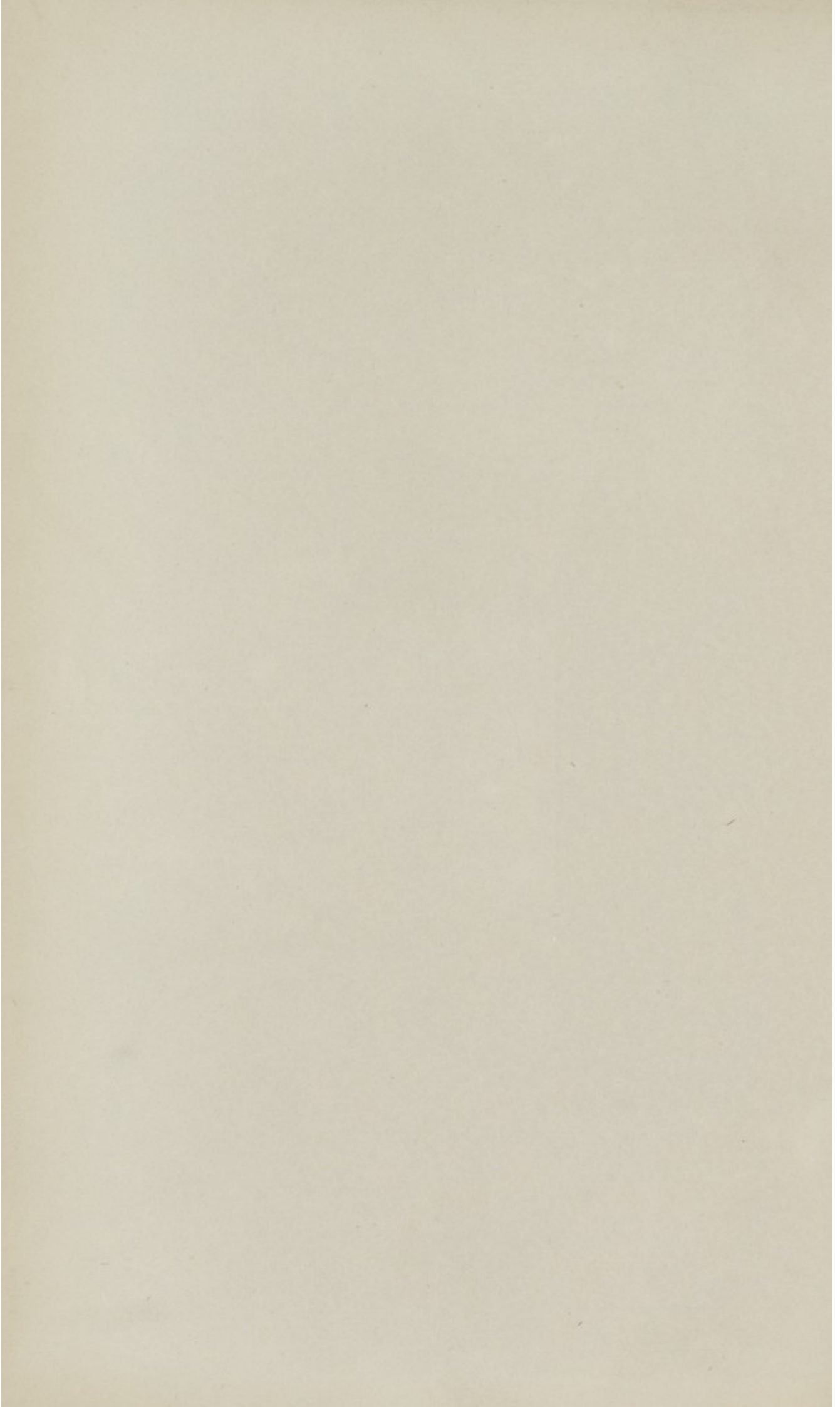


INSPECTIONS BY SANITARY

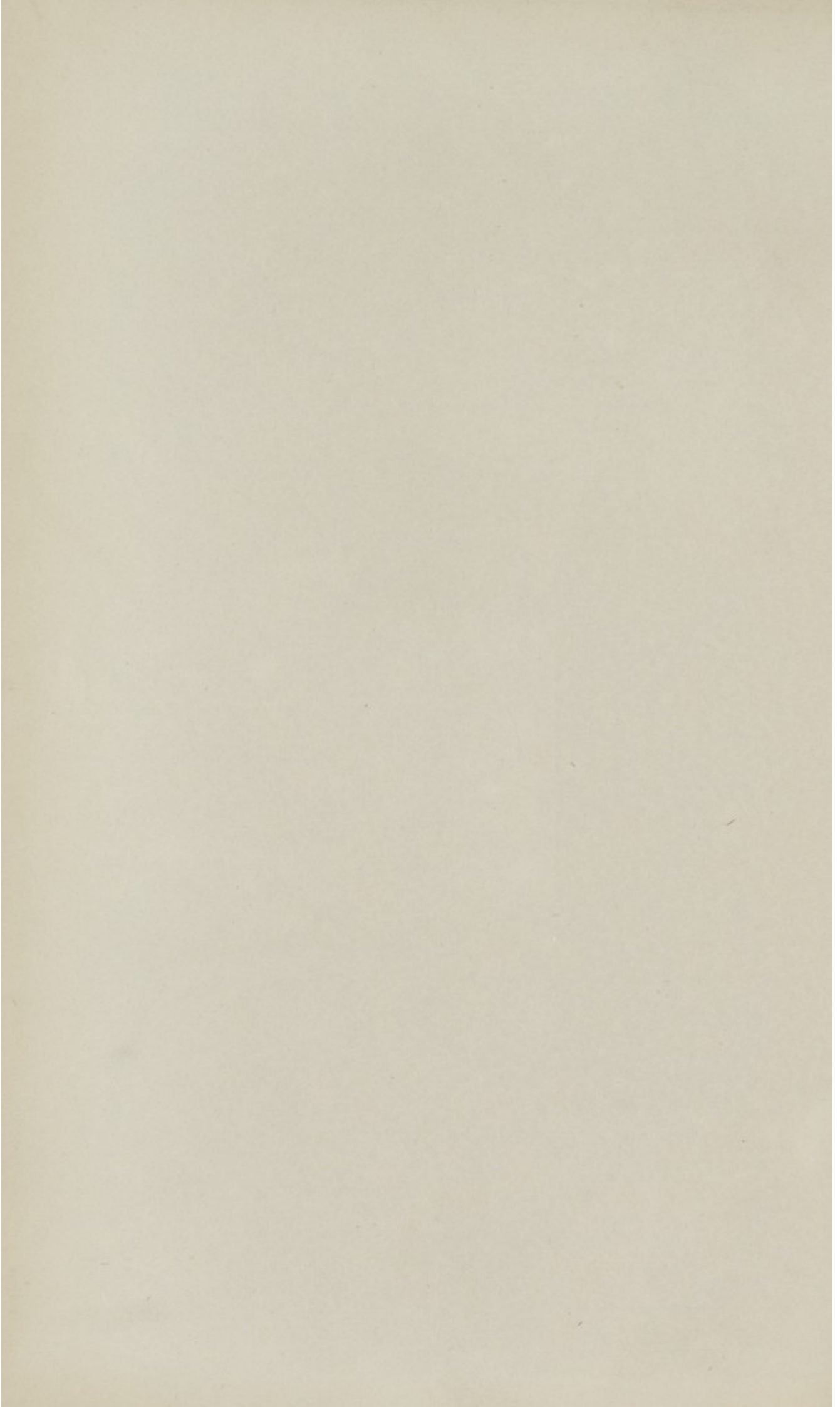
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Canal boats	..	..	..	..	..	..	..	..	..	..
Visits to waterways	..	..	..	..	..	..	..	..	..	..
Animals improperly kept ..	2	..	..	..	1	1	1	1	..	1
Offensive trades	..	2	2	..	4	2	4	..	6	4
New buildings (water certificates)	5	..	7	..	..	..	1	..	..	..
Floodings	..	..	..	..	..	..	..	4	..	3
Special inspections	233	1544	1972	1968	1166	1685	2483	3070	3160	1895
Drains relaid	7	12	19	13	16	12	18	24	14	3
Drains repaired	41	68	24	13	160	26	43	54	26	20
Drains and Sanitary Fittings tested and examined	159	107	198	211	325	229	71	168	51	69
Rat complaints investigated ..	25	36	19	14	25	17	17	106	14	12
HOUSES LET IN TENEMENTS—										
No. of inspections	..	..	..	..	..	..	..	4	..	..
No. of notices	..	..	..	..	..	..	..	4	..	..
No. of prosecutions	..	..	..	..	..	..	..	..	..	..
TENEMENT HOUSES—										
No. provided with additional water supply	..	..	..	..	..	..	..	3	..	..
No. of prosecutions	..	..	..	..	..	..	..	..	..	..
OVERCROWDING—										
No. of houses overcrowded ..	3	2	..	13	7	3	15	2	5	10

INSPECTORS, 1930.

	Mr. Hillier, No. 11 District.	Mr. Crook, No. 12 District.	Mr. Truslove, No. 13 District.	*Mr. Hall, No. 14 District.	*Mr. Smith, No. 14 District.	*Mr. Alexander, No. 14 District.	Mr. Brown, Special.	Temporary Inspectors.	Mr. Robbitt, Special.	Mr. Faverett, Special.	†Miss Tebbay, Special.	†Mr. Nigby, Special.	Miss Fortlock, Special.	TOTALS.
Canal boats	14	..	..	..	..	..	..	..	..	..	..	..	..	14
Visits to waterways	19	..	..	..	..	..	..	..	..	..	..	..	..	19
Animals improperly kept ..	1	1	..	..	1	..	..	..	..	1	..	..	..	11
Offensive trades	..	2	..	1	4	..	..	..	..	..	..	..	..	31
New buildings (water certificates)	..	1	..	..	..	..	..	..	..	..	..	..	..	14
Floodings	29	20	..	..	..	..	..	..	..	..	..	..	..	56
Special inspections	4358	1367	1690	718	1186	338	169	4385	355	1094	..	2473	..	37309
Drains relaid	5	33	8	5	16	14	1	2	..	1	..	..	..	223
Drains repaired	26	89	14	13	18	51	14	1	..	..	..	..	..	393
Drains and Sanitary Fittings tested and examined	127	292	88	119	74	90	7	47	..	5	..	4	..	2441
Rat complaints investigated ..	21	13	28	15	7	17	3	5	..	..	..	..	..	394
HOUSES LET IN TENEMENTS—														
No. of inspections	..	..	..	..	..	..	..	1	..	..	..	..	..	5
No. of notices	..	..	..	..	..	..	..	1	..	..	..	..	..	5
No. of prosecutions	..	..	..	..	..	..	..	..	..	..	..	..	..	..
TENEMENT HOUSES—														
No. provided with additional water supply	..	..	..	..	..	..	..	..	..	..	..	..	..	3
No. of prosecutions	..	..	..	..	..	..	..	..	..	..	..	..	..	..
OVERCROWDING—														
No. of houses overcrowded ..	11	2	8	..	2	3	2	6	..	..	..	..	..	94



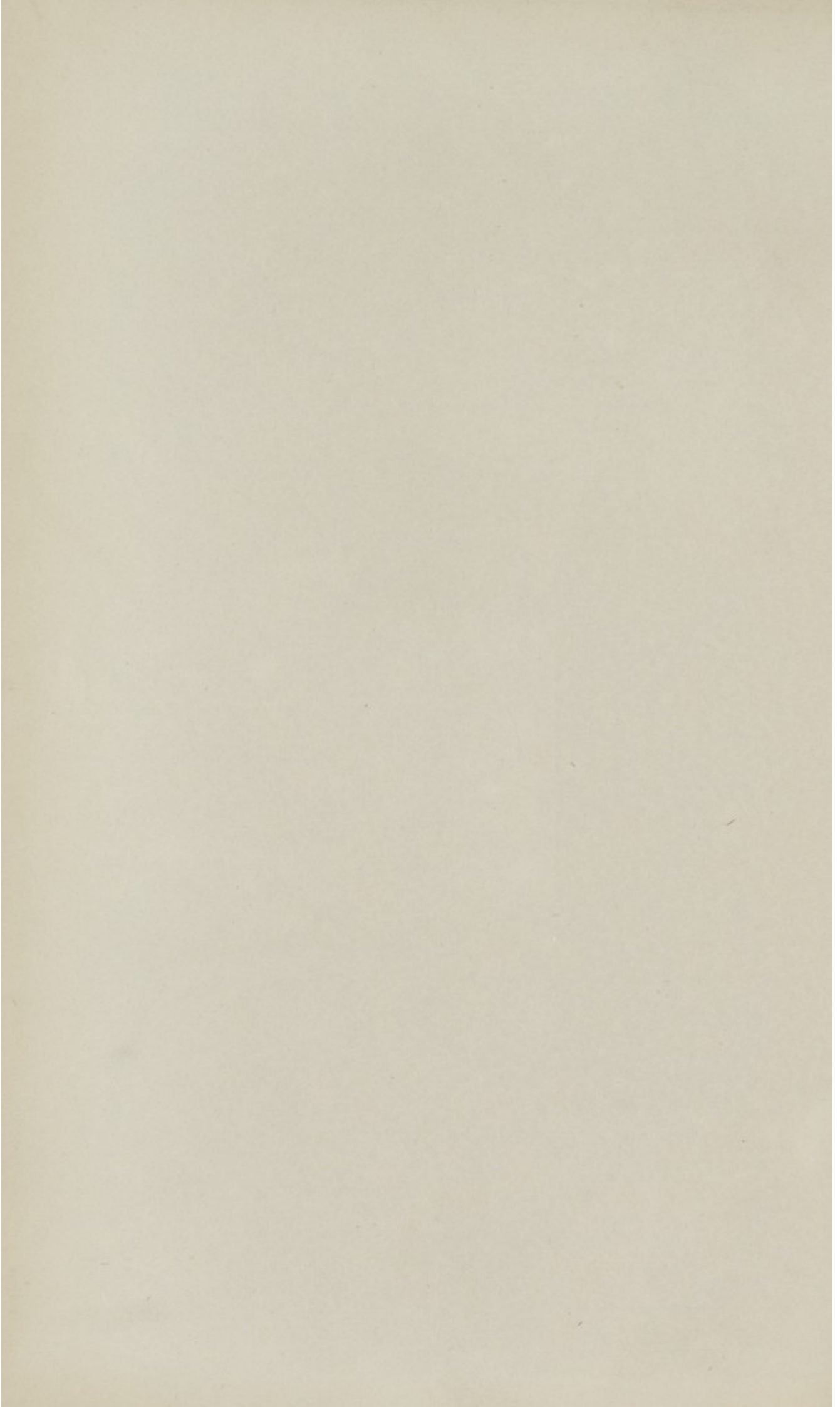
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INSPECTIONS BY SANITARY

INSPECTORS, 1930.

INSPECTIONS.	Mr. Fowler, No. 1 District.	Mr. Bow, No. 2 District.	Mr. Vobe, No. 3 District.	Mr. Sadler, No. 4 District.	Mr. Rudy, No. 5 District.	Mr. High, No. 6 District.	Mr. Sheppard, No. 7 District.	Mr. Long, No. 8 District.	Mr. Goldworthy, No. 9 District.	Mr. Galvin, No. 10 District.	Mr. Hillier, No. 11 District.	Mr. Crook, No. 12 District.	Mr. Trulove, No. 13 District.	*Mr. Hall, No. 14 District.	*Mr. Smith, No. 14 District.	*Mr. Alexander, No. 14 District.	Mr. Brown, Special.	Temporary Inspectors.	Mr. Bobbitt, Special.	Mr. Everett, Special.	†Miss Teebay, Special.	†Mr. Nighy, Special.	Miss Portlock, Special.	TOTALS.
FOOD ADULTERATION—																								
Samples collected for analysis ..	50	54	54	47	53	59	54	48	54	72	48	48	48	12	48	18	20	78	54	53	..	24	..	996
Proceedings taken before Magistrate	1	..	..	..	..	..	..	..	1	..	..	..	..	..	4	..	..	..	2	..	..	..	..	8
Informal samples obtained ..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	4	..	43	..	..	..	..	49
PLACES WHERE FOOD IS SOLD, STORED OR PREPARED FOR SALE—																								
BAKEHOUSES—																								
No. of inspections	23	21	10	20	26	14	16	18	12	10	13	5	4	..	3	11	..	..	..	2	..	..	..	208
No. of notices	7	4	..	5	..	..	..	4	1	..	..	1	4	..	..	3	..	..	..	..	..	..	..	29
No. of prosecutions	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
ICE CREAM PREMISES—																								
No. of inspections	14	11	29	24	48	16	23	28	15	19	19	17	23	..	1	..	..	5	..	..	..	..	..	292
No. of notices	..	..	..	..	..	..	..	5	..	2	..	..	1	..	..	..	..	..	..	..	..	..	..	8
No. of prosecutions	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Restaurants and Eating Houses	17	5	9	8	17	6	6	1	7	3	9	3	3	..	..	..	..	..	..	2	..	..	..	96
Fried Fish Shops	4	6	12	7	23	7	6	3	11	3	7	1	..	..	..	..	..	..	..	..	..	..	..	90
Fish Shops	14	12	8	9	2	2	6	..	5	5	1	6	..	..	..	..	..	1	..	1	..	..	..	72
Provision Stores	17	14	13	2	40	26	5	1	3	..	13	13	..	..	..	..	2	..	65	..	..	..	..	214
Other Food Places	16	12	15	..	31	..	..	13	12	..	1	11	..	..	..	12	..	10	..	73	..	..	..	206
Food Factories	20	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	37	..	..	..	..	..	58

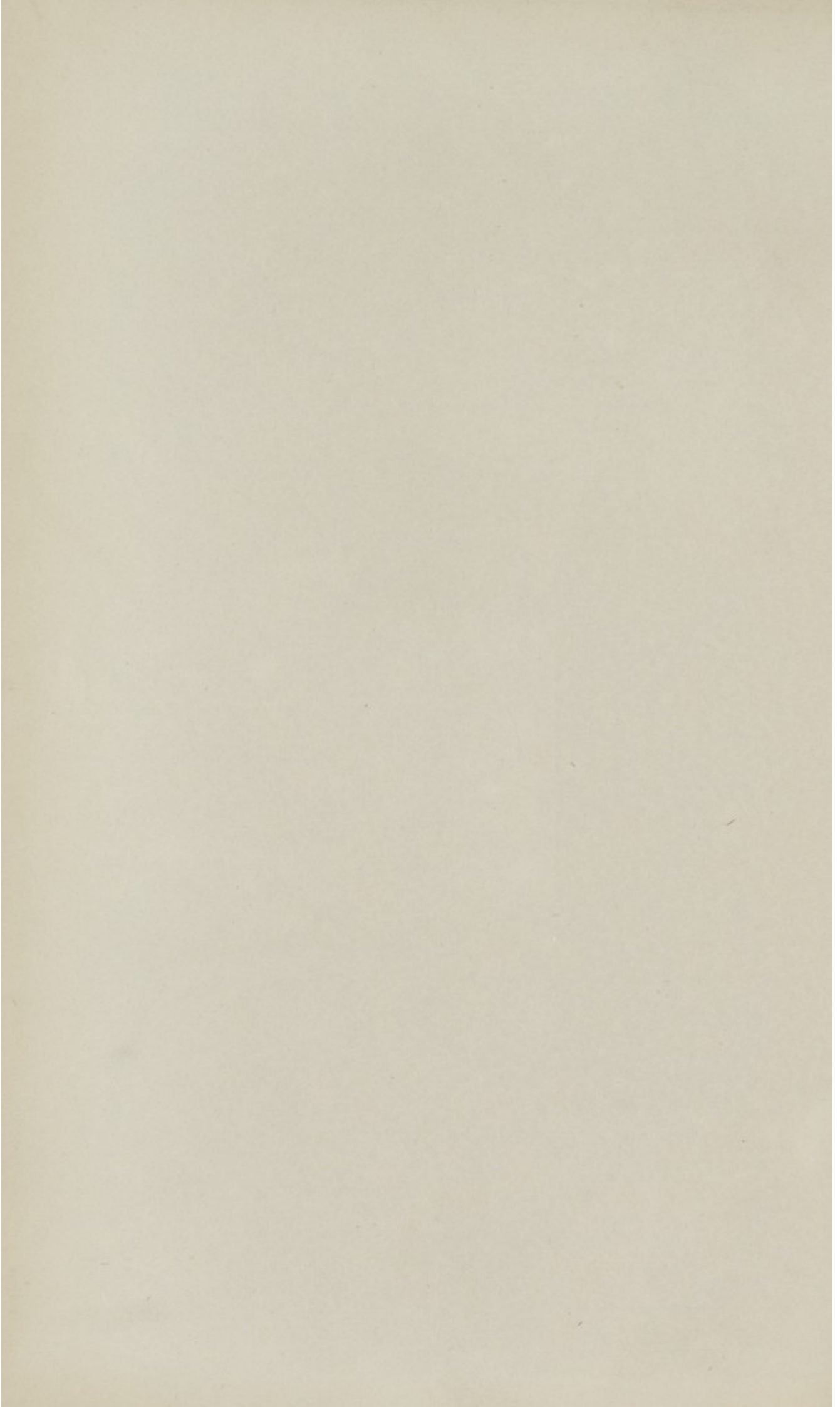


INSPECTIONS BY SANITARY

INSPECTIONS.	Mr. Fowler, No. 1 District.	Mr. Bow, No. 2 District.	Mr. Vobe, No. 3 District.	Mr. Sadler, No. 4 District.	Mr. Body, No. 5 District.	Mr. High, No. 6 District.	Mr. Sheppard, No. 7 District.	Mr. Long, No. 8 District.	Mr. Goldsworthy, No. 9 District.	Mr. Galvin, No. 10 District.
Food Premises—Notices served	19	4	..	6	..	6	..	3	..	2
SLAUGHTERHOUSES—										
No. of inspections	..	..	..	..	..	..	..	..	..	..
No. of premises where infringements of by-laws discovered..	..	..	..	..	..	..	..	..	..	..
MILK AND DAIRIES ORDER, 1926—										
No. of cowsheds inspections ..	..	..	..	..	..	..	..	..	..	..
No. of dairies inspections ..	..	..	..	..	..	..	..	..	..	..
No. of dirty utensils discovered	..	..	..	..	..	..	..	..	..	..
No. of premises where infringements of order discovered ..	..	..	..	..	..	..	..	..	..	..
No. of proceedings before Magistrates	2	..	..	..	..	..	..	..	..	..
No. of new registrations ..	..	..	..	..	..	..	..	..	..	..
PUBLIC HEALTH MEAT REGULATIONS, 1924—										
Butchers' Shops	..	..	..	..	..	..	..	..	..	..
Butchers' Stores	..	..	..	..	..	..	..	..	..	..
Butchers' Stalls	..	..	7	..	..	..	..	..	..	..
Market Street Inspections ..	..	..	..	48	..	..	..	..	..	..
Hawkers' Food Stores	2	14	10	57	24	1	44	..	21	18
Notices under Meat Regulations	..	..	..	..	..	..	..	..	..	..

INSPECTORS, 1930.

Mr. Hillier, No. 11 District.	Mr. Crook, No. 12 District.	Mr. Tuslove, No. 13 District.	*Mr. Hall, No. 14 District.	*Mr. Smith, No. 14 District.	*Mr. Alexander, No. 14 District.	Mr. Brown, Special.	Temporary Inspectors.	Mr. Bobbitt, Special.	Mr. Peverett, Special.	†Miss Teebay, Special.	†Mr. Nisby, Special.	Miss Portlock, Special.	TOTALS.
1	2	1	..	2	7	..	4	16	1	..	..	..	74
..	..	..	..	..	..	..	..	417	27	..	..	..	444
..	..	..	..	..	..	..	..	1	..	..	..	..	1
..	..	..	..	..	..	..	..	33	..	..	..	..	33
..	..	..	..	..	..	..	..	1397	3	..	..	..	1400
..	..	..	..	..	..	..	..	4	..	..	..	..	4
..	..	..	..	..	..	..	..	4	1	..	..	..	5
..	..	..	..	..	..	..	..	..	..	..	..	..	2
..	..	..	..	..	..	..	..	43	..	..	..	..	43
..	..	..	..	..	..	..	..	145	..	..	..	..	145
..	..	..	..	..	..	..	1	..	74	..	..	..	75
..	..	..	..	..	..	..	..	..	861	..	..	..	868
..	..	..	..	..	1	4	..	..	140	..	..	..	193
14	6	10	..	16	50	..	52	3	6	..	..	..	348
..	..	..	..	..	..	..	..	7	..	..	..	..	7

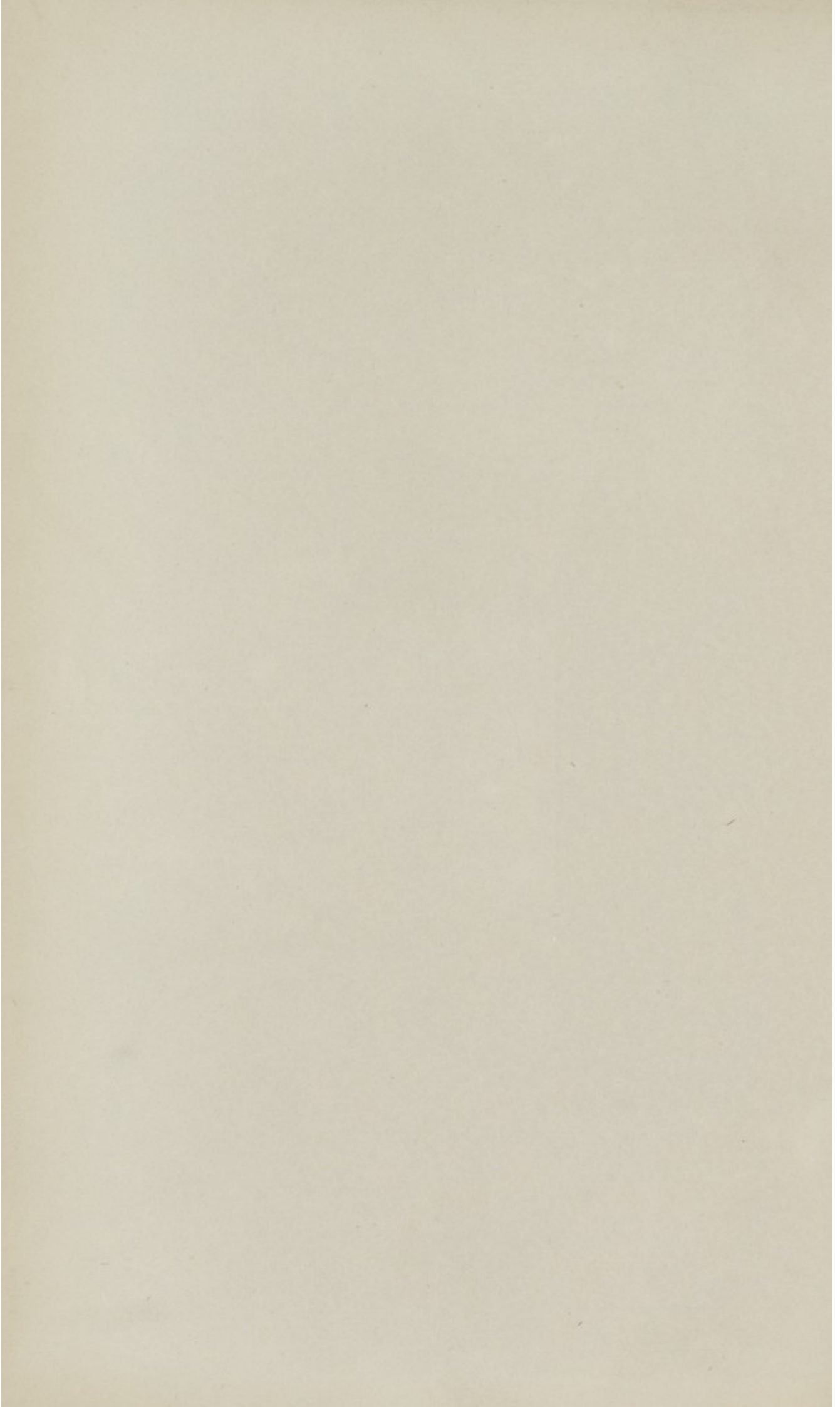


INSPECTIONS BY SANITARY

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INSPECTORS, 1930.

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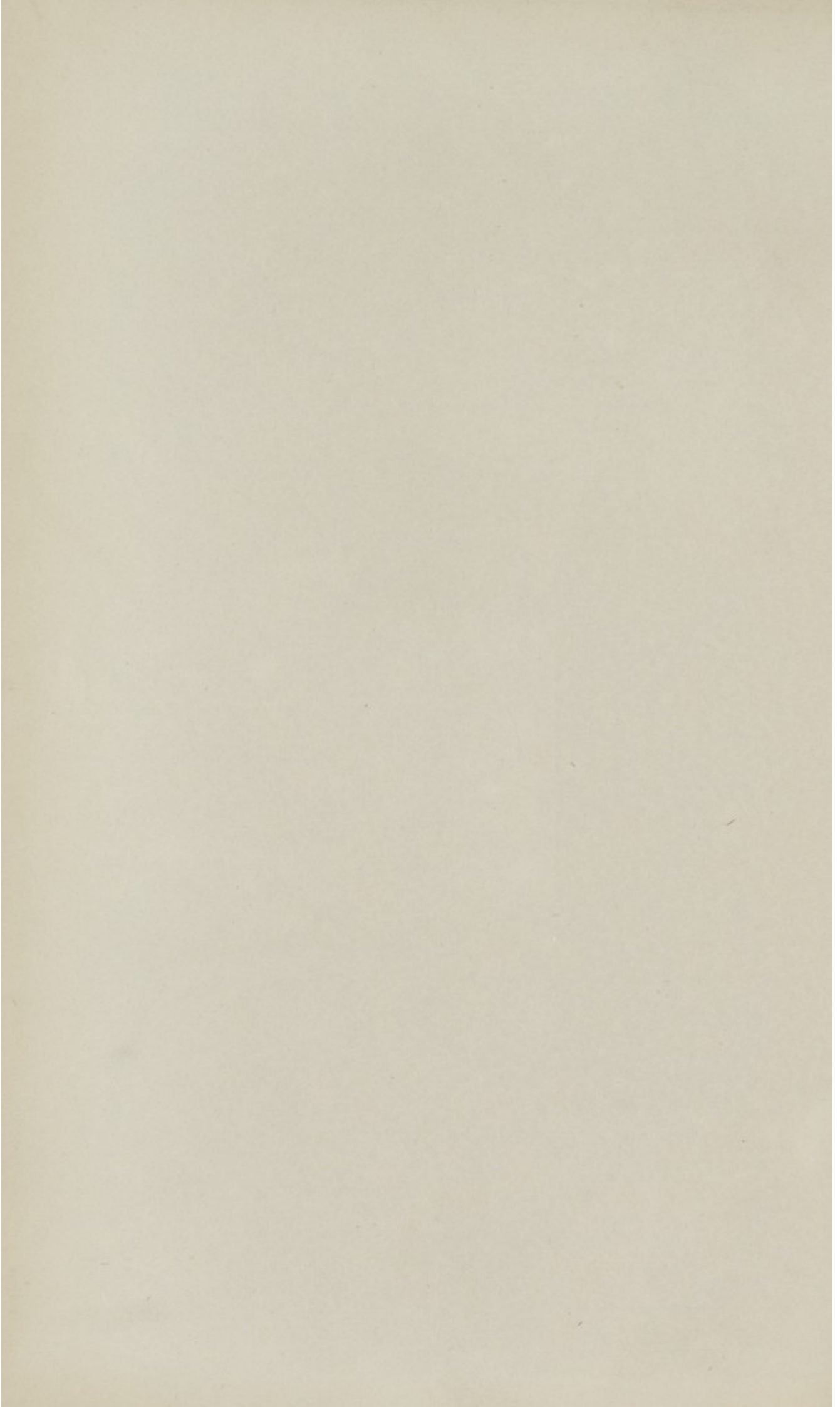
INSPECTIONS BY SANITARY

	Mr. Fowler, No. 1 District.	Mr. Baw, No. 2 District.	Mr. Vobe, No. 3 District.	Mr. Sadler, No. 4 District.	Mr. Brady, No. 5 District.	Mr. High, No. 6 District.	Mr. Sheppard, No. 7 District.	Mr. Long, No. 8 District.	Mr. Godsworthy, No. 9 District.	Mr. Gabel, No. 10 District.
BAKEHOUSES—										
No. on register at end of 1929..	7	10	5	7	9	5	8	8	8	12
No. on register at end of 1930..	7	10	5	7	9	5	8	9	7	11
No. above ground	6	6	1	1	5	1	4	2	5	9
No. underground	1	4	4	6	4	4	4	7	2	2
HOUSES DIVIDED INTO SEPARATE TENEMENTS—										
No. on register at end of 1929..	..	..	..	..	..	..	100	..	..	8
No. on register at end of 1930..	..	..	..	..	..	..	100	..	..	8
ICE CREAM PREMISES—										
No. on register at end of 1929..	12	13	13	21	15	8	20	25	16	18
No. on register at end of 1930..	13	12	15	26	17	7	23	25	13	18
PLACES WHERE FOOD SOLD, STORED OR PREPARED FOR SALE—										
No. on register at end of 1929..	49	36	44	76	64	26	66	35	62	47
No. on register at end of 1930..	44	34	36	56	54	26	50	36	42	42
HOUSING ACT, 1925 (Part II)—										
Inspections made	..	..	..	..	..	..	..	..	..	..
HOUSING ACT, 1925 (Part I)—										
Inspections made	..	..	..	..	..	..	..	..	..	..

INSPECTORS, 1930.

	Mr. Hillier, No. 11 District.	Mr. Cook, No. 12 District.	Mr. Truslove, No. 13 District.	*Mr. Hall, No. 14 District.	*Mr. Smith, No. 14 District.	*Mr. Alexander, No. 14 District.	Mr. Brown, Special.	Temporary Inspectors.	Mr. Bobbitt, Special.	Mr. Peverett, Special.	†Miss Teebay, Special.	†Mr. Nighy, Special.	Miss Fortlock, Special.	TOTALS.
No. on register at end of 1929..	6	2	2	10	..	..	..	..	..	..	..	..	..	99
No. on register at end of 1930..	6	2	2	8	..	..	..	..	..	..	..	..	..	96
No. above ground	6	..	1	1	..	..	..	..	..	..	..	..	..	48
No. underground	..	2	1	7	..	..	..	..	..	..	..	..	..	48
No. on register at end of 1929..	20	..	25	..	..	..	..	..	..	..	..	..	..	153
No. on register at end of 1930..	38	..	24	..	..	..	..	..	..	..	..	..	..	170
No. on register at end of 1929..	12	4	10	25	..	..	..	..	..	..	..	..	..	212
No. on register at end of 1930..	14	6	11	25	..	..	..	..	..	..	..	..	..	225
No. on register at end of 1929..	79	33	76	63	..	..	..	..	215	336	..	..	..	1307
No. on register at end of 1930..	65	35	70	53	..	..	..	..	219	272	..	..	..	1134
Inspections made	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Inspections made	..	..	..	..	..	..	..	..	..	..	..	..	..	..

* Mr. Hall retired on 27th May. District then taken over by Mr. Smith, and subsequently by Mr. Alexander.



HOUSING STATISTICS.

The housing conditions of the Borough are reported upon in the following form in accordance with the directions of the Ministry of Health.

Number of Houses Erected during the Year:—

(a) Total (including numbers given separately under (b)):	
(i) By the Local Authority	127
(ii) By other Local Authorities	48
(iii) By other bodies and persons	18
(b) With State assistance under the Housing Acts:	
(i) By the Local Authority—	
(a) For the purpose of Part II of the Act of 1925	—
(b) For the purpose of Part III of the Act of 1925	—
(c) For other purposes	—
(ii) By other bodies or persons	

Inspection of Dwelling Houses during the Year:—

	No. of Houses.	Total No. of Inspections.
Inspections for housing defects under Public Health or Housing Acts	9,990	35,255
Inspections under the Housing (Consolidated) Regulations, 1925 (included under previous sub-head)	66	198
Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ...	1,042	3,126
Number of dwelling houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	5,494	31,064

Remedy of Defects without Service of Formal Notice:—

Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers	3,801
---	-------

Action under Statutory Powers:—

A.—Proceedings under Section 3 of the Housing Act, 1925:

(1) Number of dwelling houses in respect of which notices were served requiring repairs	—
(2) Number of dwelling houses which were rendered fit after service of informal notices—	
(a) by owners	—
(b) by Local Authority in default of owners	—
(3) Number of dwelling houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close	—

B.—Proceedings under Public Health Acts:—

(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied	4,938
---	-------

- (2) Number of dwelling houses in which defects were remedied after service of formal notices—

(a) by owners	...	...	...	...	...	1,479
(b) by Local Authority in default of owners	...	...	...	...	...	3

C.—Proceedings under Sections 11, 14 and 15 of the Housing Act, 1925 :—

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

Number of Houses Owned by the Local Authority :—

		Houses.	Flats.
(1) Number of houses and flats built before 31st December, 1928, and held by the Local Authority	...	100	135
(2) Number of houses and flats built in the last two years and held under—			
(a) Part III of the Housing Act, 1925	...	—	231
(b) Part II of the Housing Act, 1925	...	—	—
(c) Other powers	...	—	—

*Short List of Causes of Death at Different Periods of Life
of Residents of Hackney during 1930.*

Causes of Death.	Sex.	All Ages.	0—	1—	2—	5—	15—	25—	45—	65—	75—
All causes	M	1185	97	18	40	29	50	115	363	252	221
	F	1196	77	27	19	26	60	130	289	255	313
1 Enteric fever	M	1	..	..	..	..	..	..	..	1	..
	F	..	..	..	..	..	..	..	..	..	..
2 Smallpox	M	..	..	..	..	..	..	..	..	..	..
	F	1	..	..	..	..	..	..	1	..	..
3 Measles	M	26	6	5	12	3	..	..	..	..	..
	F	19	3	8	6	2	..	..	..	..	..
4 Scarlet fever	M	2	..	..	1	1	..	..	..	..	..
	F	2	..	..	1	1	..	..	..	..	..
5 Whooping cough	M	2	1	1	..	..	..	..	..	..	..
	F	2	..	2	..	..	..	..	..	..	..
6 Diphtheria	M	16	1	..	4	9	2	..	..	..	..
	F	18	1	4	6	6	1	..	..	..	..
7 Influenza	M	13	..	..	..	..	1	3	4	3	2
	F	10	..	..	..	1	..	1	2	3	3
8 Encephalitis lethargica ..	M	2	..	..	..	..	2	..	..	..	..
	F	1	..	..	..	..	..	..	..	..	1
9 Meningococcal meningitis	M	2	..	..	..	1	1	..	..	..	..
	F	2	..	1	..	..	1	..	..	..	..
10 Tuberculosis of respiratory system	M	86	..	..	1	1	12	34	31	6	1
	F	89	1	1	..	2	25	41	16	3	..
11 Other tuberculous diseases	M	15	1	..	5	2	4	2	1	..	..
	F	12	1	1	1	3	2	3	1	..	..
12 Cancer, malignant disease	M	142	..	..	1	..	..	9	73	40	19
	F	177	..	..	..	..	1	14	76	50	36
13 Rheumatic fever	M	5	..	..	..	1	1	3	..	..	..
	F	6	..	..	..	1	2	2	1	..	..
14 Diabetes	M	11	..	..	..	..	1	..	3	6	1
	F	16	..	..	..	..	..	..	8	4	4
15 Cerebral haemorrhage, etc.	M	50	..	..	..	..	..	..	11	14	25
	F	62	..	..	..	..	..	1	17	17	27

Causes of Death—continued.

Causes of Death.	Sex.	All Ages.	0—	1—	2—	5—	15—	25—	45—	65—	75—
16 Heart disease	M	236	..	..	..	3	4	13	73	75	68
	F	299	..	..	..	3	10	21	69	91	105
17 Arterio-sclerosis	M	73	..	..	..	..	..	..	15	18	40
	F	60	..	..	..	..	..	..	5	19	36
18 Bronchitis	M	34	2	1	..	..	..	1	11	10	9
	F	46	2	..	..	..	..	4	8	7	25
19 Pneumonia (all forms) ..	M	83	18	7	4	2	..	10	29	8	5
	F	72	18	1	2	5	2	6	10	15	13
20 Other respiratory diseases	M	16	..	..	1	1	1	1	8	3	1
	F	6	..	..	..	..	1	1	1	1	2
21 Ulcer of stomach or duodenum	M	27	..	..	..	..	..	5	18	3	1
	F	4	..	..	..	..	2	..	1	1	..
22 Diarrhoea, etc.	M	14	12	..	..	..	..	1	..	1	..
	F	19	12	2	..	..	1	1	..	3	..
23 Appendicitis and typhlitis	M	10	..	..	2	1	3	3	..	1	..
	F	7	..	..	..	..	1	2	3	..	1
24 Cirrhosis of liver	M	6	..	..	..	..	..	..	2	3	1
	F	4	..	..	..	..	..	..	2	1	1
25 Acute and chronic nephritis	M	37	..	..	..	..	..	3	22	7	5
	F	38	..	..	..	..	..	8	13	10	7
26 Puerperal sepsis	F	2	..	..	..	..	1	1	..	..	..
27 Other accidents and diseases of pregnancy and parturition ..	F	4	..	..	..	..	1	3	..	..	..
28 Congenital debility and malformation, pre-mature birth	M	39	39	..	..	..	..	..	..	..	..
	F	28	28	..	..	..	..	..	..	..	..
29 Suicide	M	18	..	..	..	..	2	2	9	4	1
	F	16	..	..	..	..	..	7	9	..	..
30 Other deaths from violence	M	56	4	1	3	2	11	8	9	10	8
	F	34	2	2	1	1	3	3	6	7	9
31 Other defined diseases ..	M	163	13	3	6	2	5	17	44	39	34
	F	139	8	5	2	1	6	11	40	23	43
32 Causes ill-defined or unknown	M	..	..	..	..	..	..	..	..	..	..
	F	1	1	..	..	..	..	..	..	..	..

METROPOLITAN BOROUGH OF HACKNEY

1930

POPULATION.	214400
BIRTH-RATE FOR WHOLE BOROUGH.	16.4
DEATH-RATE FOR WHOLE BOROUGH.	11.1
INFANTILE DEATH-RATE PER 1000 BIRTHS.	49
POPULATION PER ACRE, WHOLE BOROUGH.	65.1
DIAGRAM SHOWING BIRTH-RATE (B.R.) PER 1000, ESTIMATED	IN EACH OF THE DISTRICTS OF THE BOROUGH DURING 1930
" " DEATH-RATE (D.R.)	
" " NUMBER OF DEATHS OF INFANTS UNDER ONE YEAR OUT OF EVERY 1000 BORN (I.M.)	
" " ESTIMATED POPULATION (POP).	

- CHILD WELFARE CLINICS.
- ⊕ CHILD WELFARE CLINICS & ANTENATAL CLINICS.
- MORTUARY
- ⊗ DISINFECTING & CLEANSING STATION.

STAMFORD HILL

B.R. 16.8
D.R. 12.0
I.M. 60
POP. 33400

CLAPTON PARK

B.R. 16.1
D.R. 9.5
I.M. 47
POP. 40800

WEST HACKNEY

B.R. 16.4
D.R. 11.1
I.M. 52
POP. 18500

THE DOWNS

B.R. 16.7
D.R. 10.4
I.M. 56
POP. 17100

B.R. 16.7
D.R. 10.7
I.M. 45
POP. 34400

HACKNEY

B.R. 15.0
D.R. 11.8
I.M. 35
POP. 26700

KINGSLAND

B.R. 15.5
D.R. 12.4
I.M. 56
POP. 21800

HOMERTON

SOUTH HACKNEY

B.R. 17.6
D.R. 11.3
I.M. 47
POP. 21700

SCALE 0 1/4 1/2 MILE

