

[Report 1949] / Medical Officer of Health, Blaenavon U.D.C.

Contributors

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BLAENAVON URBAN DISTRICT COUNCIL.

PUBLIC HEALTH REPORT

for the year 1949.

F. J. Hallinan,
M.B.E. (Mil), M.B., B.CH., B.A.O., D.P.H.,
Area Medical Officer No 7 Area,
Monmouthshire.
District Medical Officer,
Blaenavon Urban District.

Council Offices,
Lion Street,
Blaenavon.

June, 1950.

BLAENAVON URBAN DISTRICT COUNCIL.

Area of District	4,612 acres
Rateable Value	£34,200
Estimated net product of 1d rate	£125
Population (Estimated: mid 1949)	9,975
Birth rate per 1,000 population (1948)	17.4
Birth rate per 1,000 population (1949)	15.5
Number of live births (1948)	173
Number of live births (1949)	155
Number of illegitimate births (1948)	5
Number of illegitimate births (1949)	4
Number of still births (1948)	4
Number of still births (1949)	2
Number of deaths (1948)	116
Death rate per 1,000 population (1948)	11.7
Number of deaths (1949)	137
Death rate per 1,000 population (1949)	13.7
Infant mortality rate (1948)	46.2
Infant mortality rate (1949)	51.6
Phthèsis death rate per 1,000 population (1948)	0.81
✓ Phthèsis death rate per 1,000 population (1949)	0.30

Annual Report of the Medical Officer of Health to the Urban District Council of Blaenavon, for the year ending December, 31st 1949.

To the Chairman & Members of the Blaenavon Urban District Council.

Mr. Chairman, Ladies & Gentlemen,

The Annual Report for the year 1949 has been prepared in conformity with Articles 6(3) and 7(5) of the Sanitary Officers^s (outside London) Regulations, 1935, and also in accordance with Circular 2/50 (Wales) d/d 25.1.50 of the Ministry of Health, (Welsh Board of Health)

Appointment of full-time Medical Officer of Health.

Prior to January 1949 the Urban District of Blaenavon was served by a part time Medical Officer of Health who was not restricted from participation in private practice. On January 1st 1949 a full-time Medical Officer of Health was appointed for the first time, who was also to act as Area Medical Officer to No. 7 Area under the Local Health Authority, Monmouthshire County Council.

The Medical Officer's time was apportioned in the order of eight elevenths to Pontypool Urban District, two elevenths to Blaenavon Urban District and one eleventh to Monmouthshire County Council. In his capacity as District Medical Officer of Health he was charged with responsibility for the environmental hygiene of the combined districts on the one hand and on the other hand, as Area Medical Officer of Health, with the local supervision in No 7 Area of the decentralised health services of the Local Health Authority under the direction of the County Medical Officer of Health, Monmouthshire. The process of decentralisation by the L.H.A. has been gradual, and by the close of the year embraced District Nurses, County Midwives, Domestic Help Service, Medical Appliances, Immunisation and Vaccination.



General Statistics and Social Conditions

The Registrar General's estimate of the population as at mid 1949 was 9,975, of whom 2,200 were under the age of 15 years.

Estimated population (mid 1949) of adjacent Urban Districts

Abergavenny M.B.	8,597	Abercarn	18,620	Abertillery	28,070
Bedwellty	28,910	Cwmbran	12,950	Ebbw Vale	29,440
Monmouth M.B.	5,360	Tredegar	20,090	Pontypool	42,650

The great majority of the workers in the district are engaged in heavy industry such as coal mining and steel works, while many travel daily to other districts to their place of work further down the valley.

The Blaenavon Urban District is situated at the top of the Eastern Valley and is adequately served by road and rail transport.

Rainfall

The District's rainfall for the year, which was taken in the grounds of No.2 Reservoir, was as follows:-

Jan.	2.99 inches	July	1.19 inches
Feb.	2.48	Aug.	2.96
March.	1.73	Sept.	4.79
April.	4.63	Oct.	12.85
May.	4.14	Nov.	7.18
June.	1.89	Dec.	4.07

Total for year - 50.90 inches
Average daily rainfall - .139 inches.

The District's rainfall during the last 10 years was as follows:-

1940	46.37 inches
1941	47.64
1942	47.18
1943	52.55
1944	47.13
1945	51.15
1946	67.78
1947	47.74
1948	61.72
1949	50.90



VITAL STATISTICS

BIRTHS

	<u>1949</u>	<u>1948</u>	<u>1947</u>	<u>1946</u>	<u>1945</u>
Number of births	155	173	202	169	178
Births rate per 1,000 population.	15.5	17.4	20.6	17.3	18.3

The total live births registered locally during 1949 and allocated to this district was 65, comprised of 40 males and 25 females. (See table I)

The number of inward transferable live births registered outside the district was 90, comprised of 46 males and 44 females. (See table II)

The total live births assigned to this district for 1949 by the Registrar General was 155, comprised of 86 males and 69 females.

The number of legitimate live births according to the Registrar General's returns was 151, comprising 86 males and 65 females.

The number of illegitimate live births according to the Registrar General's returns was 4, all females.

The number of still births assigned to this district by the Registrar General for 1949 was 2, one male and one female. (all legitimate)

The still birth rates per 1,000 population for the Administrative County of Monmouthshire and the Blaenavon U. D. were 0.58 and 0.20 respectively.

There were 18 fewer ^{births} in 1949 than in 1948.

The natural increase (i.e. excess of births over deaths) for this district for 1949 was 18.

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The purpose of this report is to provide information on the activities of the group during the period from 10/1/50 to 10/10/50.

The group was organized in 1948 and has since that time been active in the field of [redacted].

The group's activities have been limited to the collection and dissemination of information on the activities of the [redacted].

The group has been active in the field of [redacted] and has been instrumental in the collection of information on the activities of the [redacted].

The group has been active in the field of [redacted] and has been instrumental in the collection of information on the activities of the [redacted].

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TABLE I. Showing the births registered in, and allocated to the Blaenavon Urban District during 1949 according to sex and month and quarter of occurrence, together with the inward transferable births.

Month	Male	Female	Total	Quarterly Total
January	4	3	7	18
February	3	2	5	
March	4	2	6	
April	5	-	5	15
May	1	-	1	
June	5	4	9	
July	1	6	7	20
August	4	1	5	
September	7	1	8	
October	1	2	3	12
November	3	3	6	
December	2	1	3	
Total	40	25	65	65
Inward transferable births.	46	44	90	
Grand totals for 1949	86	69	155	

Comparative Birth Rates for 1949

Blaenavon U. D.	15.5
Monmouthshire (Admin. County)	18.2
England & Wales	16.7



DEATHS

Number of Deaths	<u>1949</u> 137	<u>1948</u> 116	<u>1947</u> 156	<u>1946</u> 122	<u>1945</u> 151
Death rate per 1,000 population	13.7	11.7	15.8	12.5	15.6

The total deaths from all causes assigned to this district for 1949 numbered 137, comprising 83 males and 54 females. This figure shows an increase of 21 deaths over 1948 when the number was 116.

Table II shows how these 137 deaths have been assigned to the various causes of death.

There were no deaths from typhoid, paratyphoid, scarlet fever, diphtheria or measles. There was one death each from cerebro spinal fever and whooping cough.

It will be seen from Table II that there was one death from maternal causes in the district during 1949.

There were no deaths due to road traffic accidents.

Deaths due to all forms of cancer numbered 18 (7 males and 11 females)

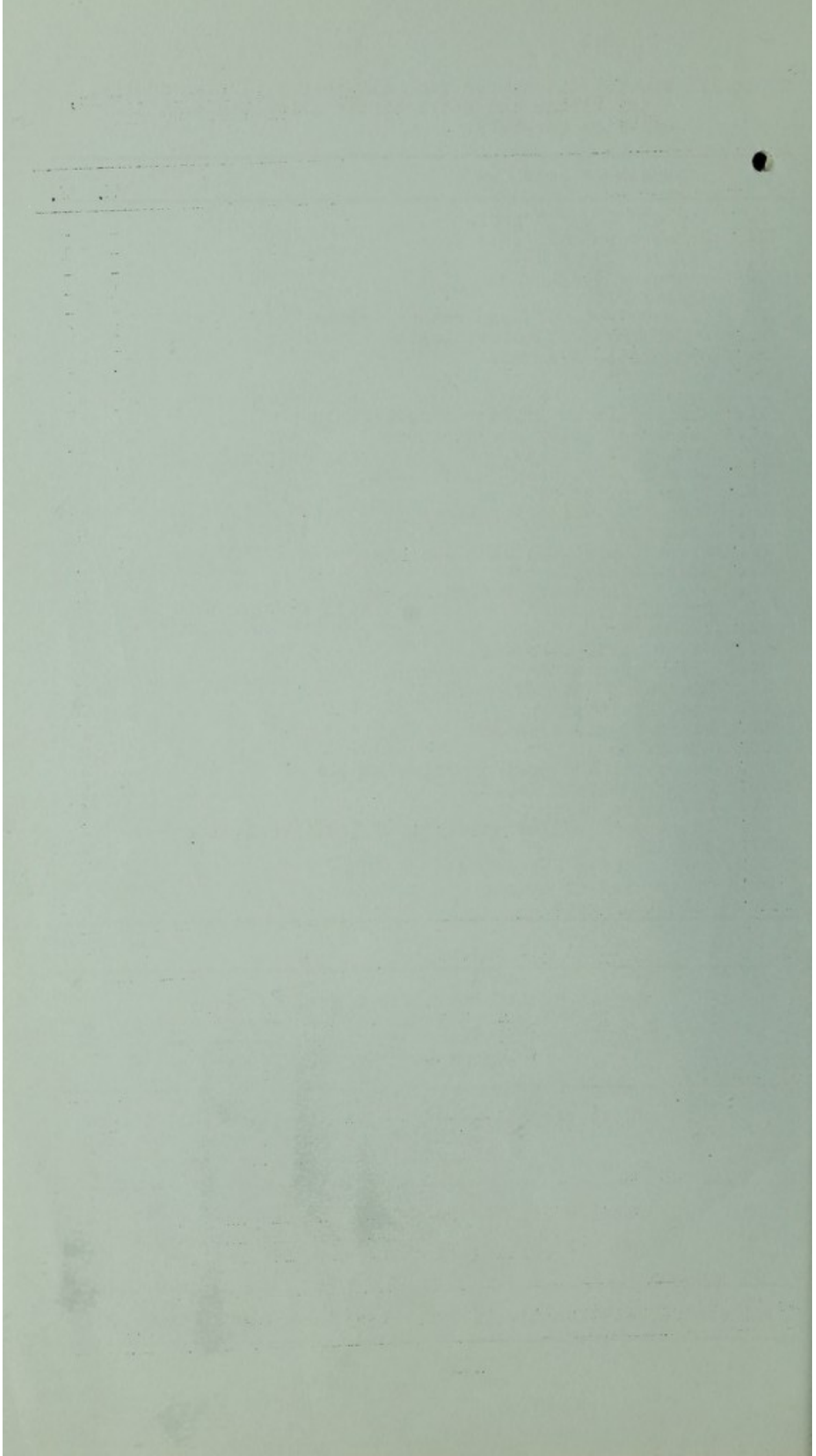
The crude death rate (i.e. the number of deaths registered per 1,000 of the population per annum) for the district for 1949 was 13.7.

The comparative rate for the Administrative County of Monmouthshire was 12.1, while the rate for England and Wales was 11.7 and for the 126 County Boroughs and Great Towns (including London), 12.5.



Table II Showing the deaths from all causes, infant deaths, total births and still births allocated to this district for 1949.

Causes of Death		M.	F.
1.	Typhoid & paratyphoid	-	-
2.	Cerebro spinal fever	-	1
3.	Scarlet fever	-	-
4.	Whooping Cough	1	-
5.	Diphtheria	-	-
6.	Tuberculosis of Respiratory system	1	2
7.	Other forms of tuberculosis	-	-
8.	Syphilitic diseases	-	-
9.	Influenza	1	-
10.	Measles	-	-
11.	Acute poliomyelitis & encephalitis	-	-
12.	Acute infective encephalitis	-	-
13.	Cancer of buc.cav. and oesoph;(M) uterus(F)	-	2
14.	Cancer of stomach and duodenum	2	2
15.	Cancer of breast	-	1
16.	Cancer of all other sites	5	6
17.	Diabetes	-	1
18.	Intracranial vascular lesions	6	9
19.	Heart diseases	29	11
20.	Other diseases: of circ.system	3	1
21.	Bronchitis	12	5
22.	Pneumonia	3	3
23.	Other resp. diseases	1	1
24.	Ulcer of stomach or duodenum	2	-
25.	Diarrhoea under 2 years	1	-
26.	Appendicitis	2	-
27.	Other digve. diseases	1	1
28.	Nephritis	4	2
29.	Puerperal and post abortive sepsis	-	-
30.	Other maternal causes	-	1
31.	Premature birth	1	2
32.	Congenital malformation;birth inj;infant;dis.	2	-
33.	Suicides	-	-
34.	Road traffic accidents	-	-
35.	Other violent causes	2	1
36.	All other causes	4	2
Total all causes		83	54
Deaths in infants under 1 year of age:-			
	Legitimate	6	2
	Illegitimate	-	-
	Total	6	2
Total births			
	Legitimate	86	69
	Illegitimate	-	4
Total still births			
	Legitimate	1	1
	Illegitimate	-	-
Estimated population mid.1949 for birth and death rates 9,975			



INFANT MORTALITY

	<u>1949</u>	<u>1948</u>	<u>1947</u>	<u>1946</u>	<u>1945</u>
Number of deaths in infants under 1 yr.	8	8	7	11	10
Number of births	155	173	202	169	178
Infant mortality rate	51.6	46.2	34.6	65.1	56.2

There were 8 infant deaths during the year which was the same as the figure for 1948. All the deaths occurred in legitimate infants. Of these deaths one occurred outside the district and was an inward transfer.

The infant mortality rate for this district for 1949 was 51.6 compared with a rate of 42.7 for the Administrative County of Monmouthshire for the same period.

Table III gives an analysis by cause of these 8 deaths in age groups. Prematurity accounted for 3 out of the 8 infant deaths and was the greatest single cause of death. Prematurity takes its heaviest toll of life in the first few days of the first week of life.

Table IV Gives a comparison of infant mortality rates for the Blaenavon U.D. with the Administrative County of Monmouthshire and England & Wales etc.

The 'infant mortality rate' is the number of deaths in infants under 1 year per 1,000 registered live births

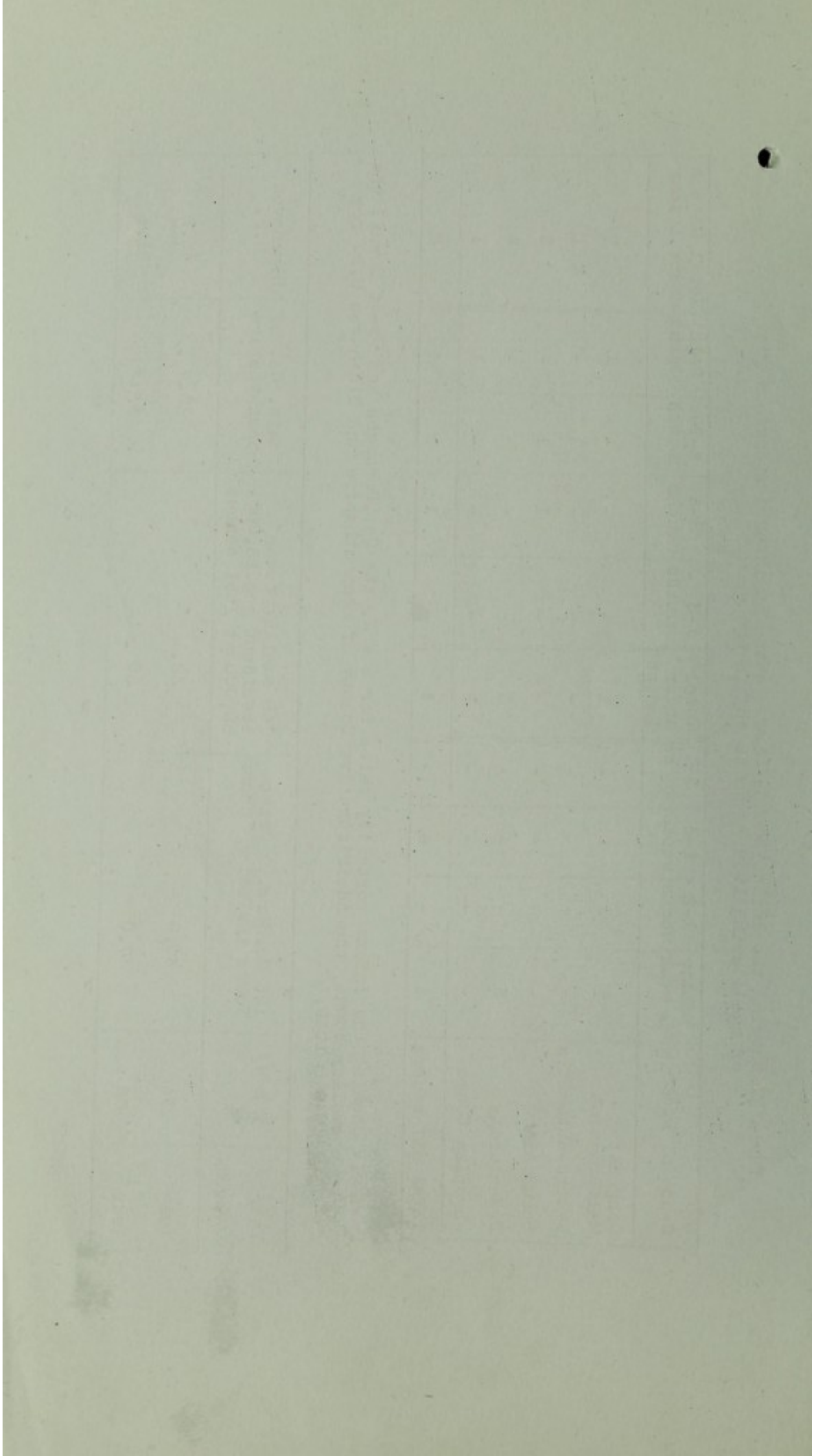


Table III. Showing the infant deaths (i.e. deaths in infants under one year of age) during 1949 by cause and in age groups

Cause of Death	under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total under 1 month	1-3 months	3-6 months	6-9 months	9-12 months	Total Deaths under 1 year
Congenital Malformation	1	-	-	-	1	-	-	-	-	1
Gastro-Enteritis	-	-	-	-	-	-	-	1	-	1
Pneumonia	-	-	-	-	-	-	1	1	-	2
Prematurity	3	-	-	-	3	-	-	-	-	3
Whooping Cough	-	-	-	-	-	-	-	-	1	1
Total all causes	4	-	-	-	4	-	1	2	1	8

Table IV Showing the infant mortality rates for E & W, the Co., Boroughs and Great Towns, the smaller towns, the Administrative County of Monmouthshire and Blaenavon U.D. for 1948 & 1949.

Year	E & W.	126 Co. Bors., & Great Towns including London	148 smaller towns (Resident pop. 25,000-50,000 at 1931 census)	Admin. Co. of Monmouthshire	Blaenavon U.D.
1948	34	39.0	32.	43.7	46.2
1949	32	37.0	30	42.7	51.6



INFECTIOUS DISEASES.

Table V shows the notifiable diseases which were notified in this district during 1949.

Diphtheria

There was one notification of diphtheria during the year, the first since 1946. This case occurred in a male in the 5 - 10 year age group, who was admitted to an isolation hospital and made an uneventful recovery.

Immunisation of the pre-school children in this district is carried out at the local infant welfare clinic, while parents have also got the option of taking their children to their general practitioner if they so desire. It has been shown that the giving of a 'booster dose' at the age of 5 years on first attending school, is most important if the child is to be given the maximum degree of protection by anti diphtheria immunisation. Unfortunately, due to lack of medical staff, this booster dose is not being given at present in the schools of the district.

Scarlet Fever.

There were 30 notifications of scarlet fever, two cases were admitted to isolation hospitals due to unsatisfactory home conditions.

There were no deaths.

Whooping Cough.

There were 49 notifications of whooping cough and one death in a child under 1 year. Whooping cough is a serious disease with a high mortality in the first three years of life, and every effort should be made to protect children of this tender age from contracting the disease.

Measles.

There were no notifications of measles during the year.

Cerebro-spinal fever.

There was one case of cerebro-spinal fever in a child aged 22 months which proved fatal.

Puerperal pyrexia

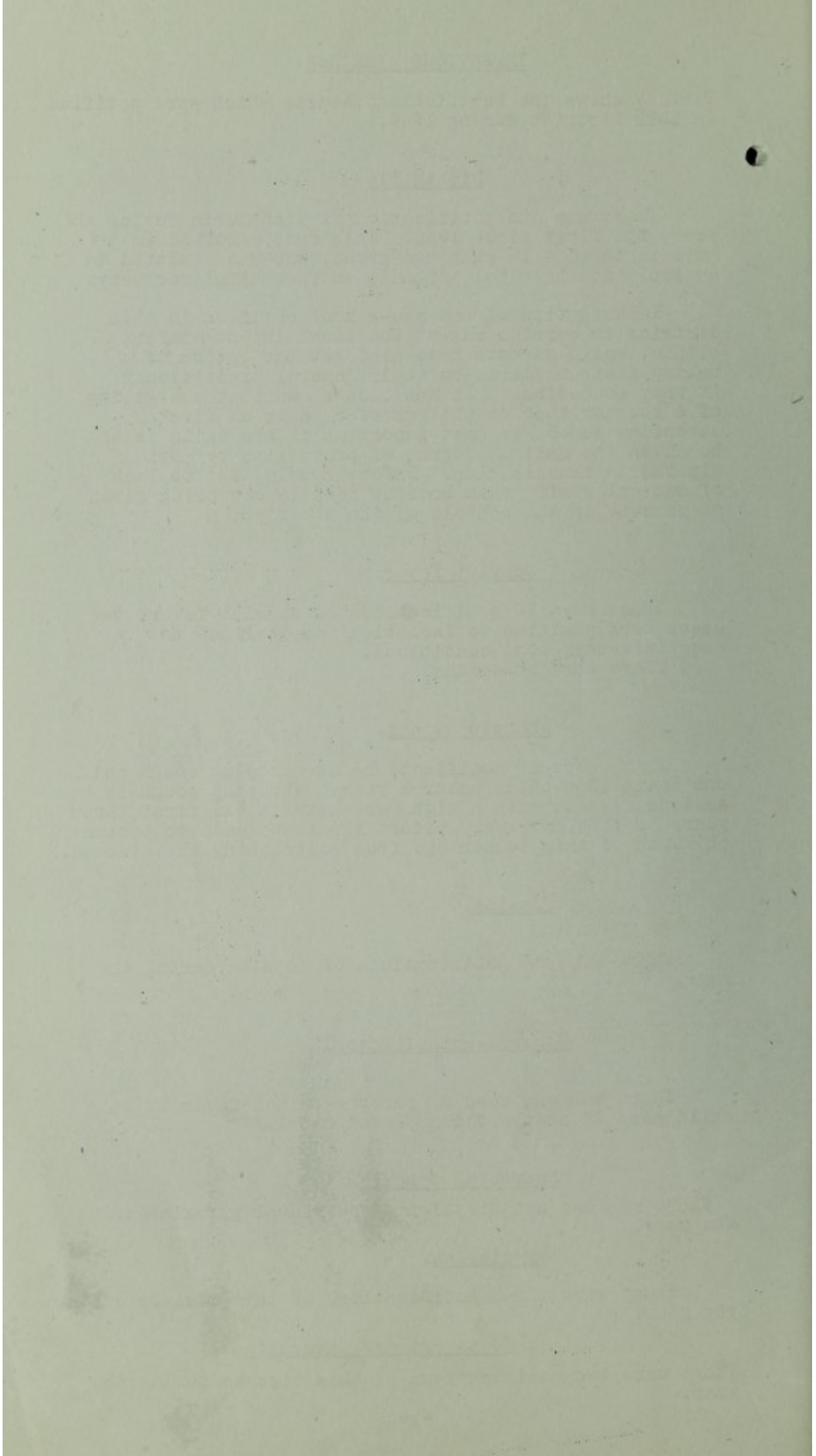
There was one notification of puerperal pyrexia during the year.

Erysipelas.

There were three notifications of this disease during the year.

Acute primary pneumonia

There were two notifications of this disease during the year.



Acute Anterior Poliomyelitis and Acute polio-
encephalitis.

There was one case of acute polio-encephalitis which occurred in an adult male in the 35-64 age group. This patient made an uneventful recovery.

There were six cases of acute anterior poliomyelitis amongst children under the age of 5 years, involving 4 males and 2 females. One case was in the 0-1 year age group; two in the 1-2 year age group; one in the 2-3 year age group and 2 in the 4-5 year age group.

One child of $\frac{8}{12}$ years was one of twins, while two cases occurred in brothers aged 21 months and 13 months in the same household. Three of the cases occurred in close proximity to each other - the two streets involved being only 85 yards apart. Only in one case was there a history of having travelled outside the district within the previous two weeks to areas where the disease was prevalent. There was no evidence of contact between the households in which cases arose.

Child contacts of all cases were excluded from school and kept under supervision for a period of three weeks after removal of the patients to an isolation hospital. Being an Urban Area the question of school closure did not arise, but where these cases occurred in the same week in two adjacent streets, some 30 school children were excluded from school for a period of three weeks as a precaution.

All cases showed paralysis of one or more limbs varying in degree from slight to severe. Hospitalisation was carried out at Allt-yr-yn Isolation Hospital, Newport in all cases and there were no deaths.

These cases occurred sporadically over a period extending from early August to the end of October except for a period when three cases occurred within the same week.

There were no notifications of enteric fever, encephalitis lethargica, dysentery, food poisoning, measles or ophthalmia neonatorum.



Table V Showing the infectious diseases notified during 1949, the age groups and the deaths which occurred together with the number of hospital admissions.

Deaths	Notifications in age groups															Total all ages	Deaths in age groups										Total No. admitted to Hosps.
	under 1 yr.	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45	45-65	65-72	und 1 yr.	1-2	2-3		3-4	4-5	5-10	10-15	15-20	20-35	34-45	45-65	65-72		
Diphtheria	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	
Scarlet fever	-	-	3	1	8	11	5	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	30	
Enteric fever	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Pneumonia	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	
Cerebro spinal fever	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	
Acute poliomyelitis	1	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6	
Encephalitis lethargica	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Dysentery	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Ophthalmia Neonatorum	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Puerperal pyrexia	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	1	
Whooping Cough	5	8	9	7	6	12	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	49	
Measles	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Erysipelae	-	-	-	-	-	-	-	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	
Acute polio-encephalitis	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1	
Food poisoning	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	1	
Totals	6	15	13	8	9	21	13	5	2	3	1	94	1	1	1	1	1	1	1	1	1	1	1	1	1	2	13

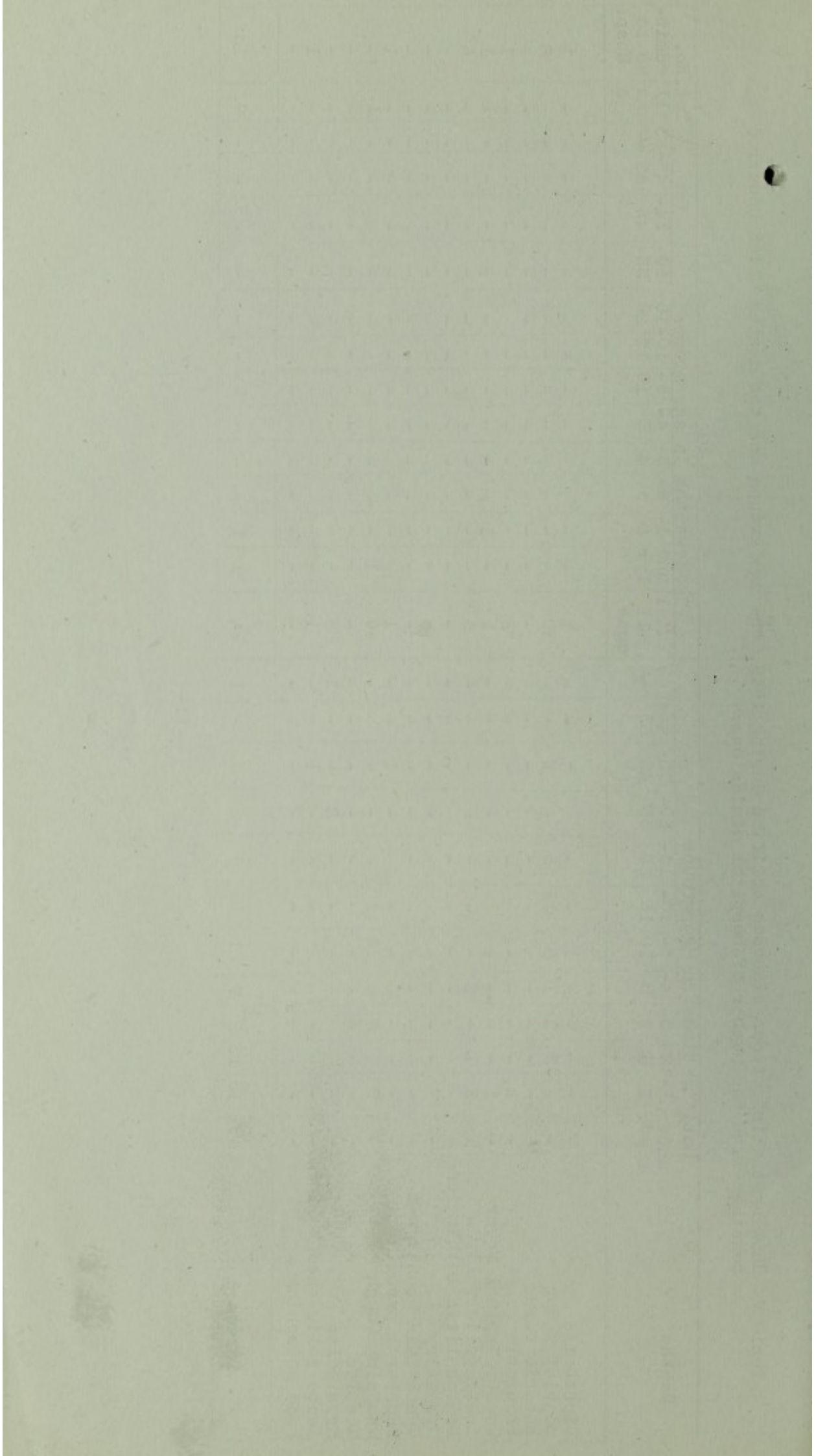


Table VI Showing the number of cases of infectious diseases notified during the last 5 years.

Disease	1949	1948	1947	1946	1945
Small Pox	-	-	-	-	-
Diphtheria	1	-	-	1	1
Scarlet fever	30	34	4	3	23
Typhoid	-	-	-	-	-
Acute primary pneumonia	2	4	-	1	1
Puerperal pyrexia	1	-	-	-	-
Cerebro-spinal fever	1	2	-	-	-
Acute poliomyelitis	6	-	3	-	-
Acute polio-encephalitis	1	-	-	-	-
Encephalitis lethargica	-	-	-	-	-
Ophthalmia Neonatorum	-	-	-	-	-
Dysentery	-	-	-	-	-
Erysipelas	3	8	1	4	4
Measles	-	397	8	3	142
Whooping Cough.	49	6	-	5	1
Food poisoning.	-	-	-	-	-

There was no marked incidence of notifiable diseases during the year apart from 6 cases of paralytic acute poliomyelitis and one case of polio-encephalitis.

Tuberculosis

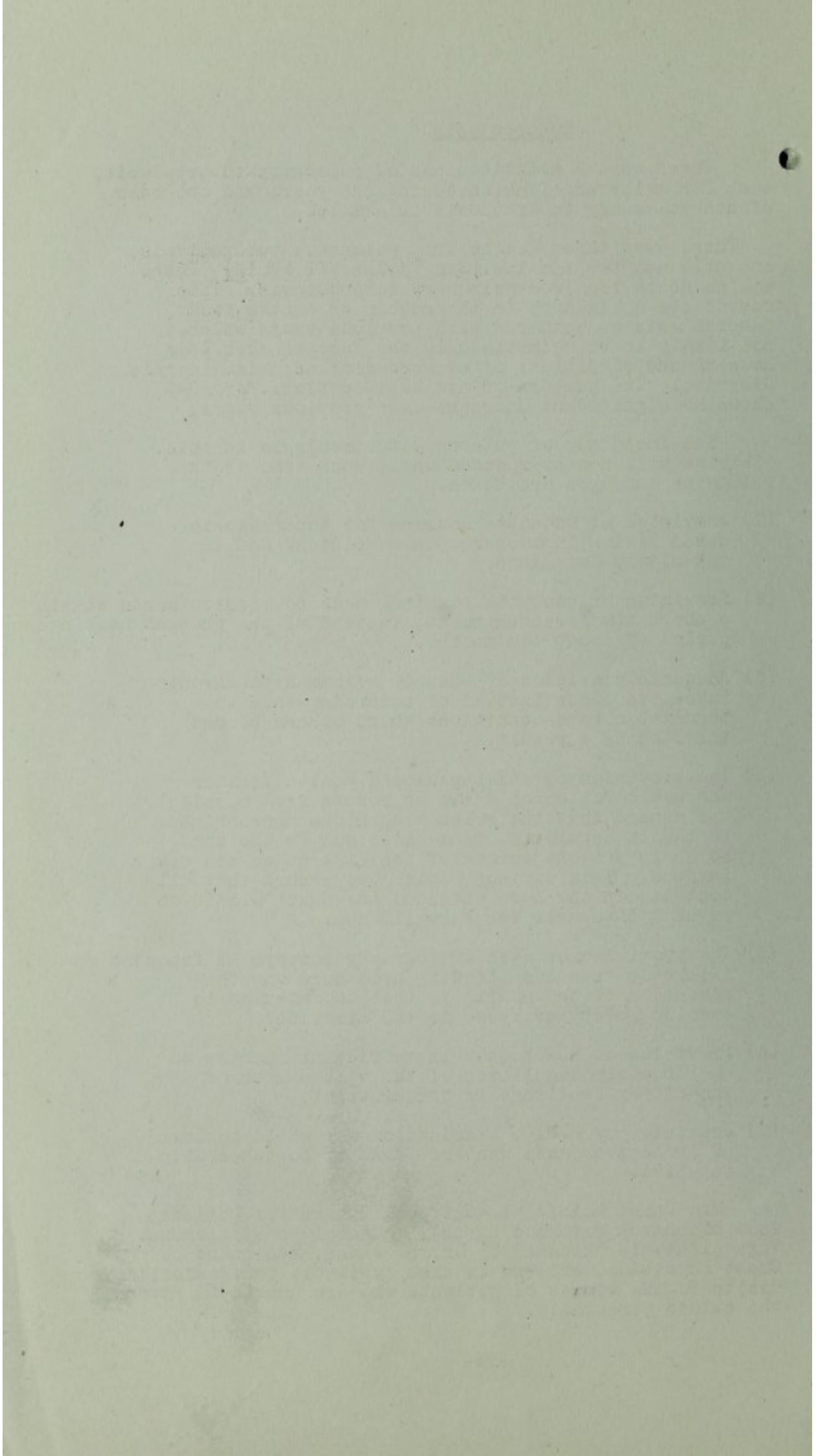
There were 8 notifications of pulmonary tuberculosis each for males and females during the year, and one case of non-pulmonary tuberculosis in a male.

There were three deaths from pulmonary tuberculosis, one male and two females. (See Tables VII & IX) There was no death from non-pulmonary tuberculosis. This represents a big drop in the number of deaths from tuberculosis as compared with previous years which is not likely to be maintained in the face of such poor housing and conditions of overcrowding as exist in this district. The number of new notifications for 1949 shows no significant decrease over previous years.

The incidence of pulmonary tuberculosis in this district will not be reduced until such time as the following measures are taken.

- (1) Provision of adequate housing for tuberculosis cases living in overcrowded conditions and in insanitary dwellings.
- (2) Provision of adequate hospital beds to receive cases within a short time of ascertainment, instead of the present waiting period of about ten months.
- (3) Adequate provision of beds to accommodate chronic infective cases instead of returning them to unsuitable home conditions where others become infected as a result.
- (4) The provision of a Tuberculosis Health Visitor who would follow up cases on return from hospital and ensure that the rules of hygiene appropriate to the tuberculosis are carried out in the home so as to prevent spread of the disease to the other inmates. This visitor would also ensure that all contacts in the home attended the Chest Clinic at regular intervals for surveillance.
- (5) The provision of Mass Radiography surveys at frequent intervals as a case finding procedure and the education of the public so that the service is availed of by everyone in the district.
- (6) Provision of new houses in sufficient numbers to enable early demolition of the vast number of insanitary dwellings in the district.
- (7) Provision of B.C.G. vaccination for child contacts of infective cases who are found to be tuberculin negative.

The Chest Clinic at Pontypool caters for patients from Blaenavon referred by their general practitioners. This clinic is attended by Dr. H. James, Assistant Chest Physician, who who is also available for domiciliary visits to the homes of patients who are unable to attend the clinic personally.



TUBERCULOSIS

Table VII Showing the new cases notified and the deaths from tuberculosis during 1949, analysed in age and sex groups and by type of disease.

Age groups	New Cases				Total	Deaths				Total	
	Pulmonary		Non-pulmonary			Pulmonary		Non-pulmonary			
	Male	Female	Male	Female		Male	Female	Male	Female		
under 1 yr	-	-	-	-	-	-	-	-	-	-	-
1-5 yrs	-	-	-	-	-	-	-	-	-	-	-
5-10yrs	-	-	-	-	-	-	-	-	-	-	-
10-15yrs	-	-	-	-	-	-	-	-	-	-	-
15-25yrs	4	5	-	-	9	-	1	-	-	1	1
25-35yrs	1	2	-	-	3	-	-	-	-	-	-
35-45yrs	1	-	-	-	1	-	-	-	-	-	-
45-55yrs	2	1	1	-	4	1	1	-	-	2	2
55-65yrs	-	-	-	-	-	-	-	-	-	-	-
65 plus	-	-	-	-	-	-	-	-	-	-	-
Total	8	8	1	-	17	1	2	-	-	3	3

The death rate per 1,000 population from pulmonary tuberculosis for 1949 for Blaenavon U.D. was 0.30.

There were no deaths from non-pulmonary tuberculosis during the same period.
The death rate per 1,000 population from all forms of tuberculosis for the same period for England & Wales was 0.45

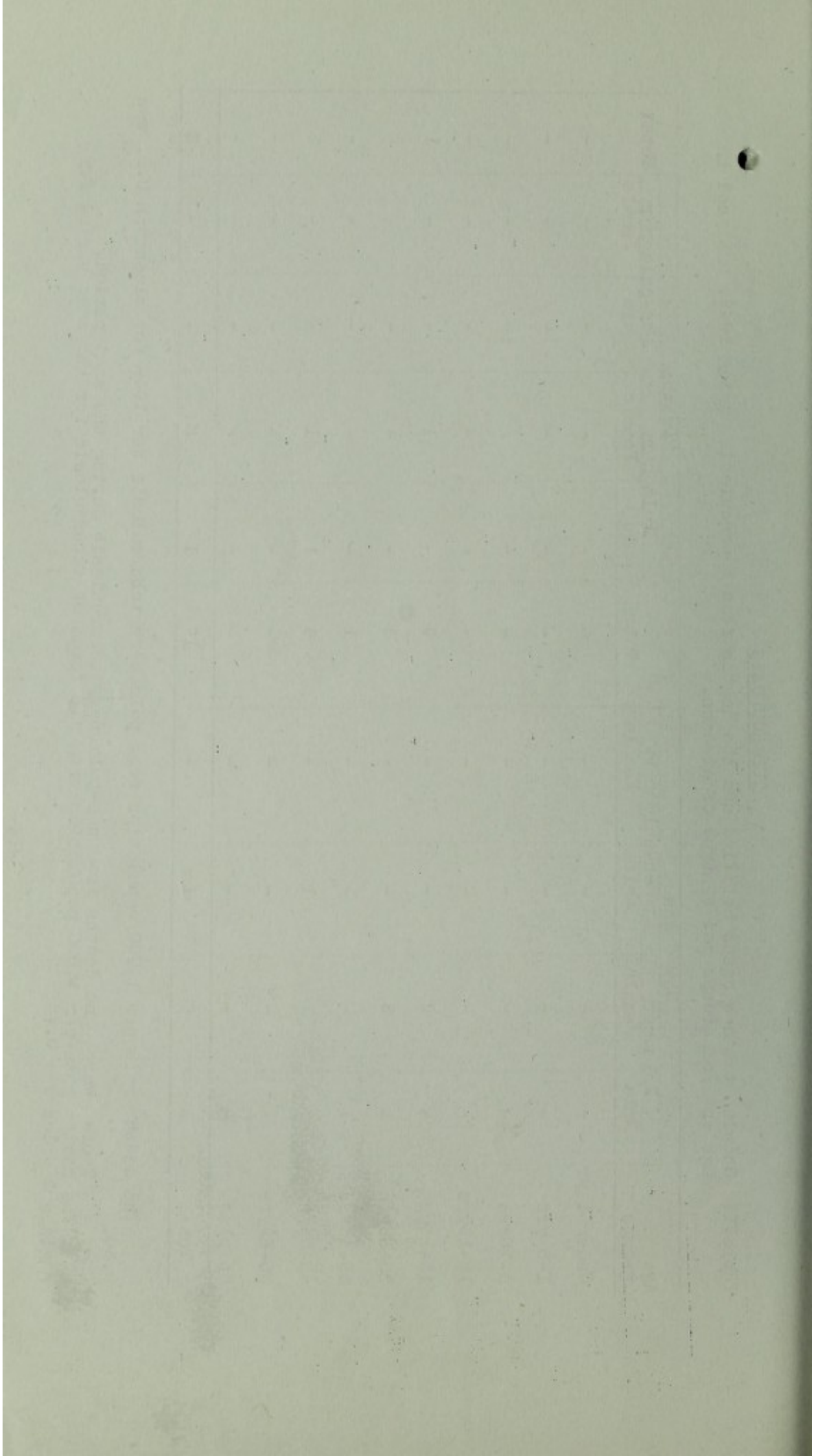


Table VIII Showing the Monthly Notifications of Tuberculosis for 1949

Month	Total	Pulmonary		Non-pulmonary	
		Male	Female	Male	Female
January	0	0	0	0	0
February	3	3	0	0	0
March	3	0	2	1	0
April	0	0	0	0	0
May	2	0	2	0	0
June	0	0	0	0	0
July	1	1	0	0	0
August	3	1	2	0	0
September	2	0	2	0	0
October	1	1	0	0	0
November	0	0	0	0	0
December	2	2	0	0	0
Total	17	8	8	1	0

Table IX Showing the Comparison of Notifications and Deaths from Tuberculosis during the past 5 years.

Year	Pulmonary		Non-pulmonary		Total
	Male	Female	Male	Female	
1945					
Notifications	7	8	1	1	17
Deaths	0	4	1	3	8
1946					
Notifications	10	7	5	0	22
Deaths	1	4	1	1	7
1947					
Notifications	6	9	2	0	17
Deaths	3	6	3	2	14
1948					
Notifications	9	6	0	1	16
Deaths	3	5	1	0	9
1949					
Notifications	8	8	1	0	17
Deaths	1	2	0	0	3



Table X Showing the occupational incidence of new cases of tuberculosis in males notified during the year 1949.

Occupation	Pulmonary	Non-pulmonary	Total
Miners	2	1	3
Labourers	1	-	1
Fitters	1	-	1
Coke Oven Worker	1	-	1
Garage Hand	1	-	1
Mortar Mill Attendant	1	-	1
Steelworker	1	-	1
Total	8	1	9

Table XI Showing the occupational incidence of new cases of tuberculosis in females notified during the year 1949.

Occupation	Pulmonary	Non-pulmonary	Total
Housewife	4	-	4
Typist	2	-	2
Canteen Assistant	1	-	1
Factory Worker	1	-	1
Total	8	-	8

Public Health (Prevention of Tuberculosis) Regulations, 1925.

No action was taken under the above regulations since no tuberculous employees were engaged in the milk trade.

Table 1 showing the number of persons in each of the following categories in each of the following areas.

Area	Category	Number
Area A	Male	12
	Female	18
	Male	15
	Female	20
	Male	10
	Female	15
Area B	Male	8
	Female	12
	Male	10
	Female	15
	Male	5
	Female	10

Table 2 showing the number of persons in each of the following categories in each of the following areas.

Area	Category	Number
Area C	Male	10
	Female	15
	Male	12
	Female	18
	Male	8
	Female	12
Area D	Male	5
	Female	10
	Male	7
	Female	12
	Male	4
	Female	8

Table 3 showing the number of persons in each of the following categories in each of the following areas.

National Health Service Act, 1946

Local Health Services under Part III of the above Act in the District are exercised by the Monmouthshire County Council, which is the Local Health Authority.

National Assistance Act, 1948

No action was taken by this Council during 1949 under Section 47 of the above Act for the removal to suitable premises of persons in need of care and attention.

Water Supply.

The water supply to the Blaenavon U.D. has been the subject of adverse comment for very many years in the Annual Reports of previous Medical Officers of Health and the position has remained unchanged to this day. The town is supplied from multiple sources within the Urban District Area augmented by an additional intake from the Aberbillery Water Board. Of the sources within the district it can be said that the storage reservoirs in certain instances are damaged by subsidence and otherwise so that they cannot be utilised to their fullest capacity, while the facilities for treatment are outmoded to such an extent as to be incapable of giving satisfactory results. The supply from the Aberbillery Water Board is adequately chlorinated and satisfactory.

The provision of a water supply to this Urban District, adequate both in quality and quantity, is a necessary prerequisite to the further development of new housing sites to replace the many ruinous dwellings at present in existence

Number of dwelling houses in area	2,779
Estimated <u>mid population</u> mid 1949	9,975
Number of houses supplied from water mains	2,656
(1) Direct to houses	2,593
(11) By means of stand pipes	63

Public Swimming Baths

The Local Authority in this area does not own a public swimming baths, but the district is served by an open air pool which has been provided by the Workmen of the town in conjunction with the Miners' Welfare Association.

This bath is provided with an up-to-date filtration and chlorination plant which is adequately maintained. In this respect the Urban District of Blaenavon is more fortunate than many other larger Authorities.

Disposal of house and trade refuse.

The present method of disposal in this Urban District is the unsatisfactory one of uncontrolled tipping. These uncontrolled tips, besides being an eyesore, afford excellent breeding facilities for rodents and flies, as well as being a potential nuisance owing to their tendencies to catch alight.

It is very strongly recommended that a system of controlled tipping be adopted in this area to replace the present unsatisfactory method.

The possibility of adopting a standard type of refuse bin for householders might also be pursued. At present refuse is placed by householders for collection in a varied assortment of containers which are mostly unsuitable, allowing the contents to spill over and interference by prowling domestic animals.

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SEWERAGE

It is gratifying to note that during the year big strides were made by the Eastern Valley (Mon) Joint Sewerage Board on the scheme to lay a main trunk sewer to take the sewage from Blaenavon, which, at present, finds its way to the Avon Llwydd river in the form of untreated effluent causing heavy pollution of this water course and forming a source of persistent nuisance right down the valley. The work of laying the subsidiary sewers in the Blaenavon Urban District has proceeded throughout the year and it is to be hoped that, so far as is physically possible, sewage effluent from all dwelling houses will be piped away into the main sewer and none will be missed out.

Food - meat and other foods

Regular inspections were made throughout the year relative to the preparation and distribution of food within the Urban District. Conditions generally were found to be satisfactory.

There is no slaughterhouse situated in the Blaenavon U.D., so that ante-and post-mortem examinations of animals therein did not arise. The fresh meat offered for retail sale in Blaenavon is slaughtered in the public slaughterhouse at Brynmawr where it is inspected by meat inspectors as to fitness for human consumption.

Food poisoning outbreaks

There were no notifications of cases of food poisoning made to the medical officer of Health by the general practitioners in the area during the year.

Clean Food Campaign.

Towards the close of 1949 a Clean Food Campaign was sponsored in the area by the Blaenavon Urban District Council. This culminated in the setting up of a Clean Food Guild after the Council and officials of the Public Health Dept., had met the traders in conference and an Advisory Committee was set up under the Chairmanship of the Chairman of the Council. Codes of practice for each food trade were prepared by the Health Dept., and sent to each trader in the town, with an invitation to apply for membership of the Blaenavon Clean Food Traders' Guild. At the close of the year applications for membership were slowly coming in and my report for 1950 will relate whether the efforts of the Council and the initial enthusiasm of the traders have borne fruit. During the year the Council decided to adopt the new model Byelaws relative to the preparation, handling and distribution of food stuffs for human consumption within the Urban District.

Foods and Drugs Act.

The Blaenavon Urban District Council is not a Food and Drugs Authority under the above Act so that sampling in the area under this enactment is carried out by the Monmouthshire County Council.

The following is a list of the names of the persons who were present at the meeting held on the 15th day of May, 1900, at the residence of Mr. J. H. Smith, at the corner of Main and Elm streets, in the city of New York.

List of Names

Mr. J. H. Smith
Mr. W. B. Jones
Mr. C. D. Brown
Mr. E. F. Green
Mr. G. H. White
Mr. I. K. Black
Mr. L. M. Gray
Mr. N. O. Blue
Mr. P. Q. Red
Mr. R. S. Yellow
Mr. T. U. Purple
Mr. V. W. Orange
Mr. X. Y. Green
Mr. Z. A. Blue

Minutes of Meeting

The meeting was held at the residence of Mr. J. H. Smith, at the corner of Main and Elm streets, in the city of New York, on the 15th day of May, 1900, at 8 o'clock in the evening. The meeting was called to order by Mr. J. H. Smith, who acted as the moderator. The following is a list of the names of the persons who were present at the meeting:

Minutes of Meeting

The meeting was held at the residence of Mr. J. H. Smith, at the corner of Main and Elm streets, in the city of New York, on the 15th day of May, 1900, at 8 o'clock in the evening. The meeting was called to order by Mr. J. H. Smith, who acted as the moderator. The following is a list of the names of the persons who were present at the meeting:

Factories Act, 1937

The following tables show the inspections made of factories during the year relative to the maintenance of provisions for health.

Conditions were found to be generally satisfactory, and where defects were found, remedial action was promptly taken.

Table XII Showing the number of factories and inspections thereof carried out during 1949.

Premises	Number on Register	Number of		Occupiers Prosecuted.
		Inspections	Written Notices	
(1) Factories in which sects. 1, 2, 3, 4 & 6 enforced by Local Authority.	9	38	Nil	Nil
(2) Factories not included in (1) to which Sec. 7 is enforced by the L.A.	25	86	3	Nil
(3) Other premises in which Sec. 7 is enforced by the L.A. (Excluding out-workers premises)	-	-	-	-
Total	34	124	3	Nil

Table XIII Showing the defects found in factories and action taken.

Particulars	Number of Defects			Number of Prosecutions
	Found	Remedied	Referred by H.M. Inspector	
Want of cleanliness (S.1.)	-	-	-	-
Overcrowding (S.2)	-	-	-	-
Unreasonable temperature (S.3)	-	-	-	-
Inadequate Ventilation (S.4)	-	-	-	-
Ineffective drainage of floors (S.6)	-	-	-	-
Sanitary Conveniences (S.7)(a) Insufficient	-	-	-	-
(b) Unsuitable or defective.	3	3	-	-
(c) Not separate for sexes	-	-	-	-
Other offences against the Act (not including offences relating to outwork)	-	-	-	-
Total	3	3	-	-

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Housing

The following tables show the number of houses owned by the Council as at 31.12.49 and the number of new houses erected during 1949 by the L.A. and private enterprise etc.

	Temporary pre-fab.	Permanent pre-fab	Traditional	Total
No. of houses owned by L.A. on 31.12.49	50	50	248	348
No. of L.A. houses on course of erection on 31.12.49	-	-	20	20
No. of houses for which sanction has been given but which had not been commenced on 31.12.49	-	-	16	16

Total number of houses erected during 1949

	<u>Pre-fab</u>	<u>Permant pre-fab</u>	<u>Traditional</u>
By Local Authority	-	-	8
By private enterprise	-	-	1
Total	-	-	9

No of houses under construction by private enterprise but not completed on 31.12.49 5

The housing position in Blaenavon is indeed acute, and while the general health of the people, as measured by our usual yard sticks, maintains itself remarkably well, there are some significant points in the incidence of and mortality from tuberculosis. Apart from poliomyelitis the common infectious diseases show no alarming increase in incidence. Poliomyelitis incidence however, has not, so far, been shown to be influenced for worse by overcrowding in the home.

It is only too obvious to Public Health workers that there is a mounting dissatisfaction coupled with frustration and despair as a result of obligatory and seemingly never ending sharing of households which is reflected in broken homes, psychosomatic disorders and anti-social behaviour. The supply position is not nearly adequate to meet the urgent demand for new houses brought about by the late war when building was held up; lack of supplies hindered repairs leading to abnormal deterioration in property, houses scheduled for clearance were not dealt with and more young couples with growing families appeared on the scene.

All the efforts of this Authority should continue to be directed towards the provision of adequate housing to relieve the position of the many people in this area who are living two and three families in houses with three or four rooms.

In conclusion I wish to thank Mr. W. A. Curtis, Sanitary Inspector to the Blaenavon Urban District Council, for his most helpful co-operation during the year.

Yours obediently,

F. J. Mallinan.

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