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Rhondda Urban District Council.

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REPORT

OF

The Medical Officer of Health

AND SCHOOL MEDICAL OFFICER

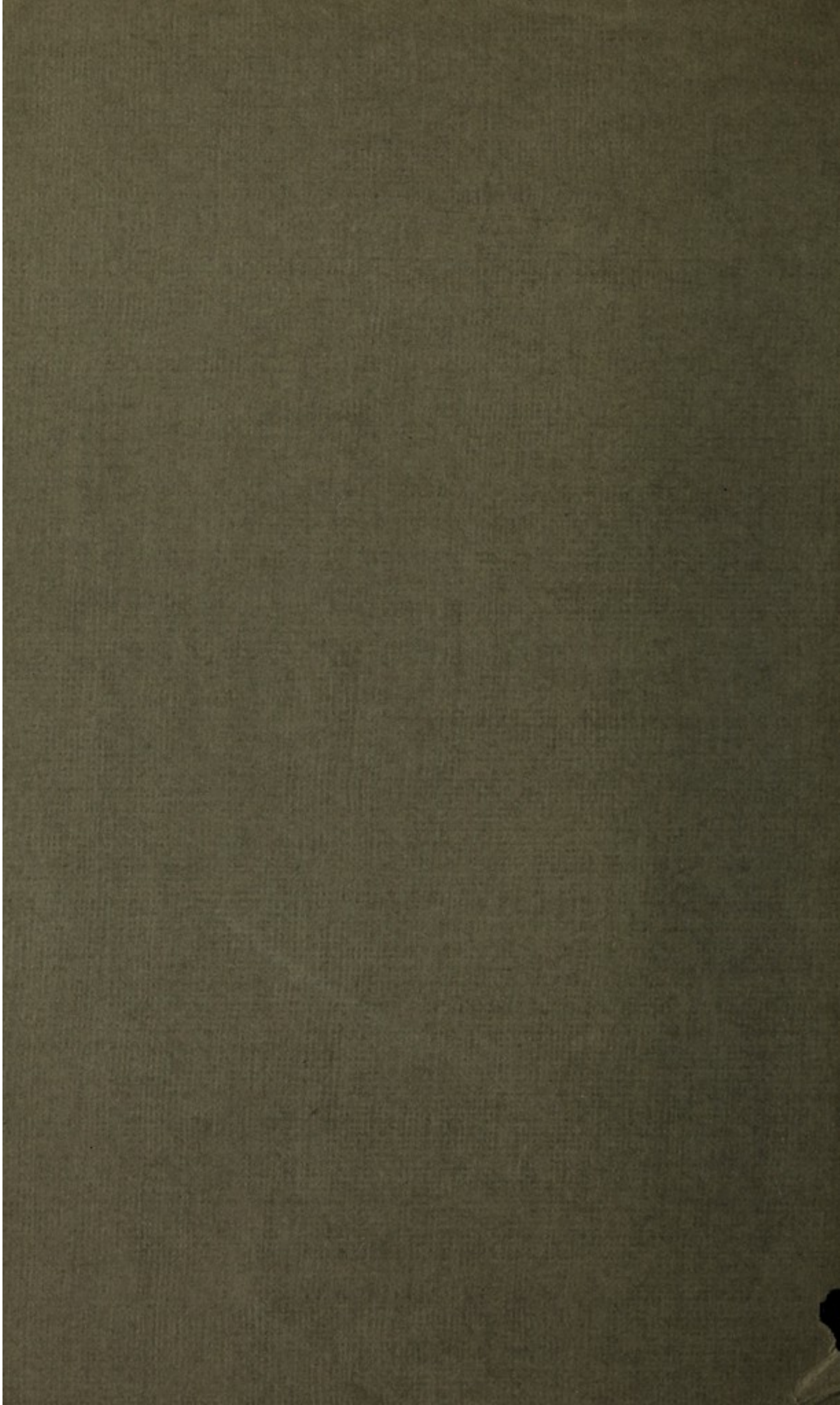
FOR

THE YEAR 1920.

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Rhondda Urban District Council.

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REPORT

OF

The Medical Officer of Health

FOR

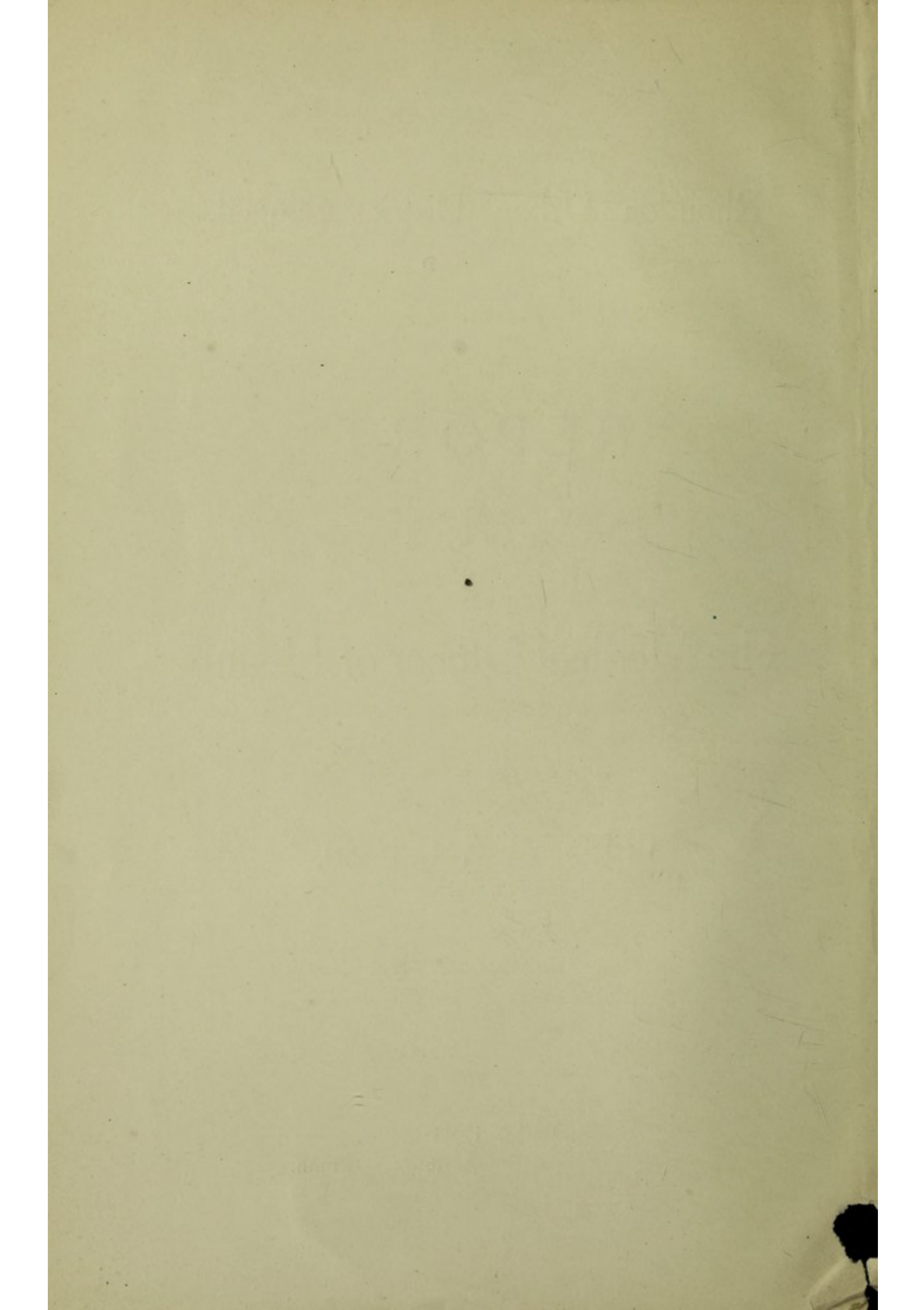
THE YEAR 1920.

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# Rhondda Urban District Council.

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## Members of the Council.

COUNCILLOR ABEL JACOB, J.P. (Chairman).

COUNCILLOR DAN DAVIES, J.P. (Vice-Chairman).

- „ REES MORGAN REES.
- „ GWILYM LLOYD.
- „ JOHN MINTON.
- „ WILLIAM PHILLIP THOMAS, J.P.
- „ ALFRED GLADSTONE TRIBE.
- „ WILLIAM LEWIS.
- „ WILLIAM D. MORGAN.
- „ ISAAC T. REES.
- „ ELIZA WILLIAMS (9 months).
- „ JAMES JAMES.
- „ WILLIAM EVANS THOMAS, M.D., J.P.
- „ THOMAS THOMAS (3 months).
- „ THOMAS OWEN.
- „ EVAN JOSHUA RODERICK.
- „ WILLIAM SAMUEL LANE.
- „ MARK HARCUMBE.
- „ OWEN JAMES BUCKLEY.
- „ THOMAS R. DAVIES.
- „ LEWIS HOPKINS (3 months).
- „ THOMAS HENRY SMITH (9 months).
- „ GOMER JONES.
- „ EDGAR MORGAN.
- „ THOMAS GRIFFITHS, J.P.
- „ BENJAMIN DAVIES.
- „ ARTHUR JAMES COOK.
- „ JOHN TALWRN JONES.
- „ EDWARD THOMAS WOOD (3 months).
- „ LLEWELLYN JONES (9 months).

- COUNCILLOR THOMAS REES.  
 „ JOHN KANE.  
 „ ROWLAND HUGHES.  
 „ HENRY EDWARD MALTBY.  
 „ DANIEL EVANS, J.P.  
 „ JOHN WILLIAMS  
 „ THOMAS BRYN THOMAS (6 months).  
 „ JOHN BOWEN (3 months).

*Clerk to the Council :*

Sir WALTER NICHOLAS.

---

### The Health Committee.

- COUNCILLOR WILLIAM SAMUEL LANE (Chairman).  
 „ DAN DAVIES, J.P.  
 „ ALFRED GLADSTONE TRIBE.  
 „ WILLIAM D. MORGAN.  
 „ ELIZA WILLIAMS (9 months).  
 „ WILLIAM EVANS THOMAS, M.D., J.P.  
 „ MARK HARCOTBE (3 months).  
 „ THOMAS R. DAVIES (9 months).  
 „ EDGAR MORGAN.  
 „ BENJAMIN DAVIES.  
 „ EDWARD THOMAS WOOD (3 months).  
 „ LLEWELLYN JONES (9 months).  
 „ JOHN WILLIAMS.  
 „ THOMAS BRYN THOMAS (6 months).  
 „ HENRY EDWARD MALTBY.

## The Maternity and Child Welfare Committee.

The Members of the Health Committee, together with  
the following co-opted Members:—

MRS. PRISCILLA BROWN.

For portion of the year:

LADY FLORENCE NICHOLAS.

MRS. ROSAMOND C. DAVIES.

MRS. EVELYN WILLIAMS.

MRS. FLORENCE MAUD BARTLETT.

MRS. FRANCES SMITH.

## The Housing Committee.

All the Members of the Maternity and Child Welfare  
Committee (3 months).

All the Members of the Health Committee (9 months).

## Officials of the Health and School Medical Service Departments.

*Medical Officer of Health, Medical Superintendent of the Council's  
Hospitals and School Medical Officer—*

J. D. JENKINS, M.D., B.S. (Lond.), D.P.H., &c.

*Assistant and Deputy Medical Officer of Health and School  
Medical Officer—*

J. P. H. DAVIES, M.A., M.B., B.C. (Cambs.),  
D.P.H., &c.

*Assistant Medical Officers of Health and School Medical Officers—*

HELENA G. JONES, M.B., B.S. (Lond.), D.P.H. ;  
D. R. GILDER, M.R.C.S. (Eng.), L.R.C.P. (Lond.)  
D.P.H. ;

For portion of year:

WILLIAM A. MURPHY, M.B., B.Ch. (N.U.I.),  
D.P.H. ;  
CAROLINE J. MACLENNAN, M.B., Ch.B. (Glasgow).

*Matron of the Fever Hospitals—*

ROSE E. SMITH.

*Assistant Matron—*

JESSIE L. MCGREGOR.

*Inspector of Nuisances—*

(a) J. TOWY THOMAS.

*Assistant Inspectors of Nuisances—*

(a.b.)	GWILYM REED	...	Sanitary District No. 6
(a.b.)	JAMES WILLIAMS	...	do. No. 3
(a.b.)	LEWIS T. DAVIES	...	do. No. 5
(a.b.)	DAVID JONES	...	do. No. 1
(a.)	D. BOWEN DAVIES	...	do. No. 2
(a.b.)	GWILYM GRIFFITHS	...	do. No. 4
(a.b.)	EDGAR M. THOMAS.		
(a.)	OWEN M. LEWIS.		
(a.b.)	WILLIAM JAMES EVANS.		
(a.c.)	IDRIS T. WATKINS.		

*Shops Inspectors—*

(a.b.) THOMAS OSBORNE.

For portion of Year:—

(a.b.) RICHARD THWAITES.  
(a.b.) DANIEL MORGAN.

*Health Visitors and School Nurses—*

(g.h.)	MRS. LAURA JONES	...	No. 9 District.
(g.)	MISS ELIZABETH HUGHES	No. 3	„
(a.g.)	MISS KEZIAH EDWARDS	No. 8	„
(g.h.)	MISS GERTRUDE WATTS	No. 5	„
(h.)	MISS SOPHY WILLIAMS	No. 7	„

- (e.f.g.h.) MISS GWENDOLEN WILLIAMS No. 6 Dist.  
 (g.) MISS EDITH M. WATKINS No. 2 ,,  
 (g.h.) MISS BEATRICE M. LEWIS No. 10 ,,  
 (h.) MISS NELLIE D. JENKINS No. 4 ,,

For portion of year:

- (g.) MISS SOPHIA THOMAS ... No. 1 ,,  
 (h.) MISS GWEN JONES  
 (g.h.) MISS ADA J. WOOSNAM... No. 1 ,,  
 (h.) MISS KATE EVANS ... No. 9 ,,

*Clerks—*

T. J. REES.  
 A. O. MORGAN.  
 D. J. LEWIS.  
 D. H. DAVIES.  
 MISS ANNIE R. JAMES.  
 MISS ANNIE M. EVANS.  
 D. G. ROSSER.  
 MISS BRONWEN JONES.  
 J. EMLYN JONES.

*In charge of Disinfector—*

L. TRENBERTH.

---

N O T E S .

- (a.) Holds the Sanitary Inspectors' Certificate granted by the Royal Sanitary Institute.  
 (b.) Holds the Meat Inspectors' Certificate granted by the Royal Sanitary Institute.  
 (c.) Holds the Certificate in Sanitary Science granted by the Royal Sanitary Institute.  
 (d.) Holds the Sanitary Inspectors' Certificate granted by the London Sanitary Inspectors' Examination Board.

- (e.) Holds the Health Visitors' Certificate granted by the Royal Sanitary Institute.
- (f.) Holds Certificate of Royal Sanitary Institute for Maternity and Child Welfare Workers.
- (g.) Holds the Midwives' Certificate granted by the Central Midwives' Board.
- (h.) Has Nursing experience.

---

### Telephone Numbers.

Medical Officer of Health—Office	...	39	Pentre
„ „ Hospital	...	47	Pentre
Assistant and Deputy Medical Officer	...	43	Pentre
Inspector of Nuisances	... ..	17	Pentre
Assist. Inspector of Nuisances No. 1 Dist.		3	Treorchy
„ „ No. 2	„	41	Pentre.
„ „ No. 3	„	8	Tonypandy
„ „ No. 4	„	13	Tonypandy
„ „ No. 5	„	3	Porth
„ „ No. 6	„	2	Ferndale

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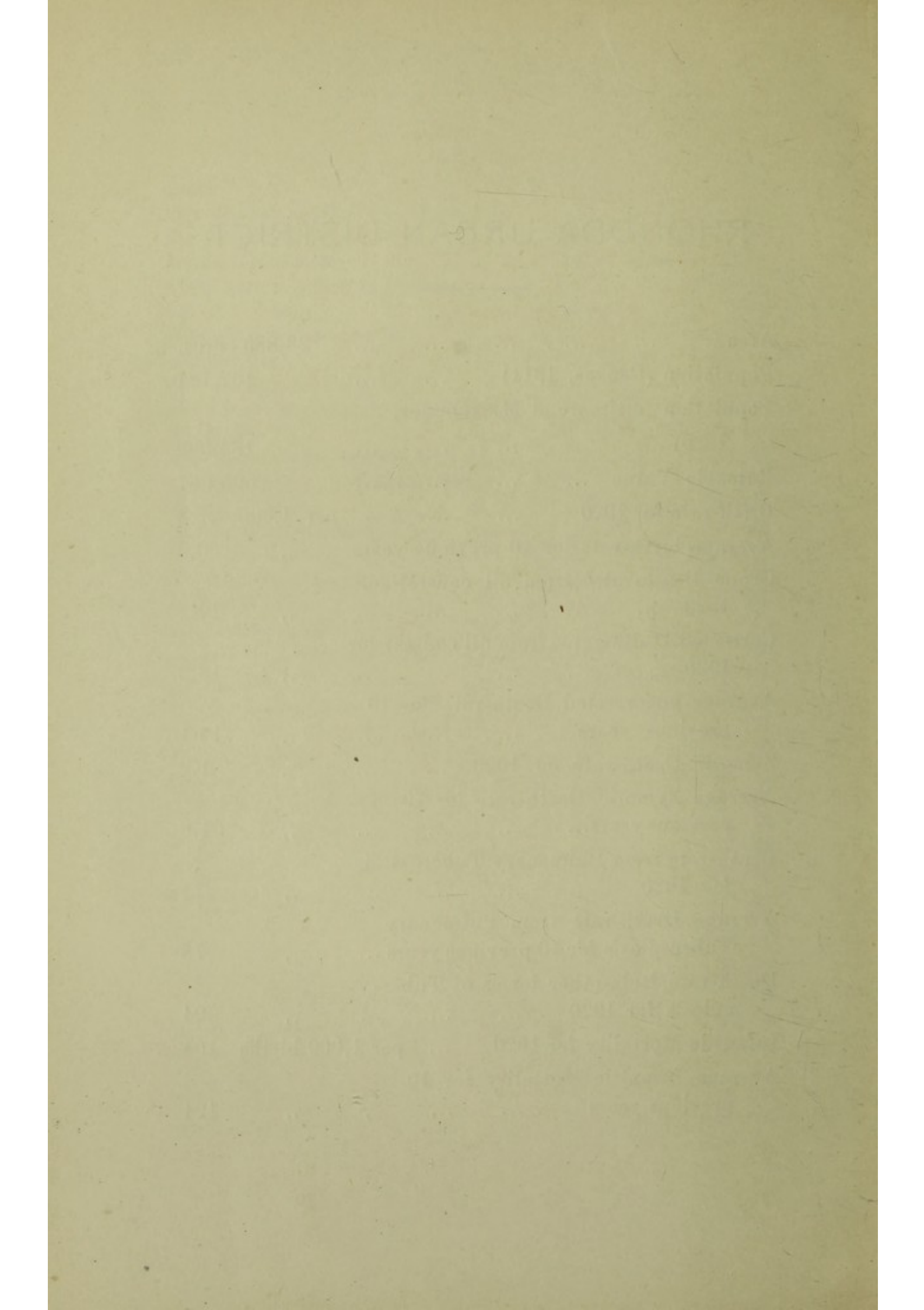
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## RHONDDA URBAN DISTRICT.

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Area...	...	...	...	...	...	23,885 acres.
Population (Census, 1911)	...	...	...	...	...	152,781
Population (estimate at Midsummer, 1920)	...	...	...	...	...	184,999
Rateable Value	...	...	...	...	...	£595,067
Birth-rate for 1920	...	...	...	...	per 1,000	27.3
Average birth-rate for 10 previous years	...	...	...	...	,,	30.5
Crude Death-rate (from all causes) for 1920	...	...	...	...	,,	12.1
Corrected Death-rate (from all causes) for 1920	...	...	...	...	,,	13.3
Average uncorrected Death-rate for 10 previous years	...	...	...	...	,,	14.1
Zymotic Death-rate for 1920	...	...	...	...	,,	1.2
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Rhondda Urban District Council.

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ANNUAL REPORT

OF

The Medical Officer of Health  
FOR 1920.

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*To the Chairman and Members of the Rhondda Urban  
District Council.*

LADIES AND GENTLEMEN,

I beg to submit for your consideration my annual report upon the vital statistics and sanitary condition of the Rhondda Urban District during the year 1920.

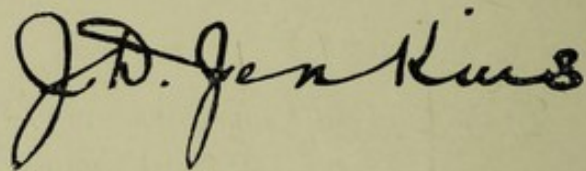
The outstanding characteristic of the year was the maintenance of the general improvement in the health of the district which it has been possible to record in recent years. Although the year under review did not establish any records, the statistics generally encourage the belief that the recent improvements have been of a durable character, the rates of 12.1 and 1.2 per 1,000 of the living population for the general and zymotic death-rates respectively and of 104 per 1,000 births for the infantile death-rate closely approximating in each instance the lowest hitherto recorded.

The restraint upon progress which the present economic conditions have imposed has been most severely

felt and most regretted when militating against the improvement of the housing conditions, the destructive effect of subsidence upon the existing houses in several portions of the district and the almost complete suspension of building on the one hand and the continued growth of the population and the return of demobilised soldiers on the other hand having combined to make the need for additional houses urgent, insistent and outweighing in importance all other public health questions.

I am,

Yours faithfully,

A handwritten signature in cursive script, reading "J.D. Jenkins". The signature is written in dark ink and is centered on the page.

Medical Officer of Health.

The Council Offices,  
Rhondda.

## POPULATION.

1911 (last Census year) ... ..	152,781
1920 (Registrar-General's estimate) ... ..	184,999

The Registrar-General's estimate of the population of the Rhondda Urban District is largely based upon the returns forwarded under the scheme for the rationing of food during the period of the war, and it is less by 330 than the estimate for the birth-rate in 1919.

As the year under review is considerably removed from the last Census year, considerable inaccuracy regarding the estimated population may be expected and is unavoidable, and our statistics which are calculated from such estimates must be regarded as only approximate.

The "natural increase" in the population, or the excess of births over deaths in the course of the year, amounted to 2,809. The estimated district ward populations now range from 13,702 in the case of Ward 3 to 27,975 in Ward 9. Steps are however being taken to sub-divide the last-mentioned into two wards.

Coal-mining is the overwhelmingly predominating industry carried on in the district and claims the energies of the vast majority of the males occupied within the area.

---

The provisional figures prepared from the census taken on the night of June 19th, 1921, which have been published since the preparation of this section, give the population of the Rhondda as only 162,729 persons, or no fewer than 23,270 persons below the Registrar-General's estimate for 1920. Having regard to the fact that the census was taken after eleven weeks of uninterrupted national coal-strike, it was expected that the figures would confirm the general belief that the Rhondda population would be considerably reduced for the time being owing to the absence of a large number of the unemployed who migrated during the strike into other, especially agricultural areas. An adjustment of the misleading figures already issued may prove necessary before the census returns in their final form will be published.

## BIRTHS.

		Average for Ten Years	
		1920.	1910-1919.
Number of Births ... ..	...	5,046	4,964
Birth-rate in Rhondda ... ..	...	27.3	30.5
Birth-rate in England and Wales ...		25.4	21.8

The total number of births amounted to 5,046, as compared with 4,263 during 1919. The resulting birth-rate of 27.3 is the highest since 1915, but it is still less than the average for the periods 1900-1909 and 1910-1919 by 11.2 and 3.2 per 1,000 respectively.

There has been a more or less steady decline in the birth-rate in the Rhondda as well as in the Country generally, although the rate in the Rhondda compares favourably with that for England and Wales, the 96 great towns and the 148 smaller towns with their respective rates of 25.4, 26.2 and 24.9 per 1,000 of the population.

The excess of male over female births was 178 as compared with 19 in the previous year.

There was considerable irregularity in the quarterly distribution of the births, the number for the four quarters in order being 1,417, 1,338, 1,178 and 1,113.

---

 ILLEGITIMACY.

The number of illegitimate births registered as belonging to the Rhondda during 1920 was 162. With the sole exception of 1918, it is the largest recorded in the district since 1894, and is equal to a rate of 32 per 1,000 births, and 0.87 per 1,000 of the total population.

The corresponding rates for England and Wales as a whole were 60.5, and 1.1 respectively for the year 1919, the figures for 1920 not being yet available at the time of writing.

These comparisons are apparently very much to the advantage of the Rhondda. Owing however to the exceptionally small proportion of the total Rhondda population which consists of females of child-bearing age the ratios given are fallacious, but a more reliable comparison cannot be made until a more recent analysis of the age and sex distribution of the population than the 1911 Census returns show becomes available.

---

### DEATHS.

	Average for Ten Years.	
	1920.	1910-1919.
Number of Deaths ... ..	2,237	2,207
Rate per 1,000 in Rhondda...	12.1	14.1
Rate per 1,000 in 96 Great Towns...	12.5	—
Rate per 1,000 in England and Wales	12.4	14.5

There were registered in the district during 1920 a total of 2,129 deaths, of which 27 were of persons not usually resident in the Rhondda. In addition, the deaths of 135 Rhondda residents occurred outside the district, giving a net total of 2,237 deaths of persons belonging to the Rhondda Urban District in the course of the year. This total is equivalent to a crude death-rate of 12.1 per 1,000 of the living population. If due allowance be made for the age and sex distribution in the Rhondda population ascertained at the 1911 Census, the corrected death-rate of 13.3 per 1,000 is arrived at. The 135 deaths of Rhondda residents which occurred elsewhere were accounted for by 29 at the Cardiff Hospital, 30 at Bridgend Asylum, 25 at the Pontypridd Homes and 51 at various other places throughout the country.

Reference to statistical records serves to show that the Rhondda is bracketed with Bath and Bristol for the 36th place among the 96 Great Towns in respect of its death-rate.

The most important conditions which accounted for the Rhondda deaths were the following:—

Bronchitis ... ..	257
Pneumonia (all forms) ... ..	221
Tuberculosis (all forms) ... ..	176
Premature and Marasmic Group ... ..	167
Organic Heart Disease ... ..	141
Violent Deaths ... ..	123
Cancer ... ..	122
Measles ... ..	110

The number and the percentage proportions of the deaths, divided into their respective age-groups, belonging to the Rhondda during the year are as follows:—

526 or 24 per cent., under 1 year of age.
155 or 7 per cent., 1 year and under 2 years.
147 or 7 per cent., 2 years and under 5 years.
123 or 5 per cent., 5 years and under 15 years.
127 or 6 per cent., 15 years and under 25 years.
316 or 14 per cent., 25 years and under 45 years.
476 or 21 per cent., 45 years and under 65 years.
367 or 16 per cent., 65 years and over.

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### UNCERTIFIED DEATHS.

Of the 2,129 deaths which were registered within the Rhondda Urban District during the year, 1,971 were certified by registered medical practitioners, the District Coroner held inquests on 146 and the remaining 12 were uncertified by either Coroner or medical attendant.

The respective proportions of the certified deaths, inquest cases and uncertified deaths were 92.6, 6.8 and .6.

In the case of the twelve uncertified deaths, the causes of death assigned were as follow:—

Atelectasis	...	...	...	...	...	1
Congenital Debility	...	...	...	...	...	1
Convulsions	...	...	...	...	...	2
Diarrhœa	...	...	...	...	...	2
Heart Disease	...	...	...	...	...	1
Intestinal Obstruction	...	...	...	...	...	1
Premature Birth	...	...	...	...	...	3
Syncope	...	...	...	...	...	1

### STILL-BORN CHILDREN.

I am indebted to Mr. William Powell, the Clerk to the Burial Board, for a record of the number of still-born children brought to the three cemeteries for burial during the years 1901 to 1920.

Year.	No. of Still-born Children recorded.	No of Births Registered.	Rate per 1,000 Births.	Average for 10 year periods.
1901	348	4,586	75.9	} 67.4
1902	333	4,937	67.5	
1903	333	4,897	68.0	
1904	301	4,860	61.9	
1905	367	4,664	78.7	
1906	323	4,751	67.9	
1907	346	4,831	71.6	
1908	354	5,454	64.9	
1909	337	5,577	60.4	
1910	321	5,628	57.0	

Year.	No. of Still-born Children recorded.	No. of Births Registered.	Rate per 1,000 Births.	Average for 10 year periods.
1911	292	5,491	53.2	52.6
1912	268	5,236	51.2	
1913	330	5,505	59.9	
1914	355	5,558	62.1	
1915	257	4,983	51.6	
1916	230	4,481	51.3	
1917	236	4,145	56.9	
1918	203	4,346	46.7	
1919	205	4,263	48.1	
1920	226	5,046	44.8	

For purposes of comparison I also append a table giving the corresponding figures for premature births:—

Year.	Deaths from Premature Birth.	No. of Births Registered.	Rate per 1,000 Births.	Average for 10 year periods.
1901	74	4,586	16.1	14.8
1902	53	4,937	10.7	
1903	84	4,897	17.1	
1904	69	4,860	14.1	
1905	62	4,664	13.3	
1906	69	4,751	14.5	
1907	68	4,831	14.1	
1908	88	5,454	16.1	
1909	93	5,577	16.7	
1910	85	5,628	15.1	
1911	85	5,491	15.5	17.0
1912	87	5,236	16.6	
1913	84	5,505	15.3	
1914	99	5,558	17.8	
1915	65	4,983	13.0	
1916	75	4,481	16.7	
1917	72	4,145	17.4	
1918	77	4,346	17.7	
1919	98	4,263	23.0	
1920	87	5,046	17.2	

The information furnished by the midwives of the still-births attended by them refer to only 98, of which 50 were of male and 48 of female children.

Exactly one half of them were recorded as macerated, three were said to be under 7 months, 35 between 7 and 8 months and 60 from 8 to 9 months.

The total number thus recorded formed 1.96 per cent. of the children born alive and in 33 of them the presentation was abnormal, the breech presenting in the majority of instances.

---

### INFANTILE MORTALITY. Average for Ten Years.

		1920	1910-1919.
Rhondda, per 1,000 births ...	...	104	124
96 Great Towns ...	...	85	...
England and Wales ...	...	80	102

The term "Infantile Mortality" is used to denote the proportion which the number of deaths of children under one year of age bears to the number of births during the same period.

In 1920 there were 5,046 births in the Rhondda and 526 deaths of children under one year of age and a consequent infantile mortality of 104, or 7 per 1,000 below that pertaining to the previous year. From a consideration of a detailed statement of the causes of infantile deaths (see Table IV. appendix) it will be seen that bronchitis and pneumonia accounted for no fewer than 122, or 23 per cent. of the whole, and premature birth for 87, or 15 per cent. A large proportion (123, or 24 per cent.) died within the first week of life and no fewer than 209,

or 40 per cent., within a month of birth. The relatively small number of 70, or 13 per cent., were certified as having died from gastro-intestinal diseases. This summary indicates that unfavourable pre-natal conditions and post-natal disease of the respiratory tract were the most potent causes of infantile deaths in the course of the year. In view of the importance of these two factors, Dr. Helena G. Jones, the Council's Medical Officer in attendance at their Welfare Centres, draws attention, in a report prepared by her on the subject, to some influences bearing upon these aspects of the problem.

(1) VENEREAL DISEASES are a not infrequent cause of premature births and early deaths of infants. While the ideal course is to obviate the occurrence of these diseases by promulgating the importance of clean conduct on the part of all members of the community, it is equally important under present conditions to exercise every means at our disposal to secure adequate and prolonged treatment for those already suffering at the special clinics provided for the purpose by the County Council under the Venereal Diseases Regulations. This is especially true regarding expectant mothers, for it is only by such treatment that a reasonable hope of propagating healthy offspring can be entertained.

(2) INDUCED ABORTION is suspected to have been the cause of prematurity at birth or of still-birth in a number of instances in the course of the year. Were women in a position to realize not only the legal responsibilities which they thus incur but also the very considerable risk to their own physical welfare as well as to that of their developing children which the more common of these measures bring in their train, whether successful or no, it is certain that such attempts to frustrate nature's laws would be seldom made.

(3) The serious ill-health of the mother, from whatever source arising, is, as might be expected, a not uncommon cause of the under-development or prematurity of her offspring. In some of these cases, however, the strain may manifest itself chiefly in an aggravation of the mother's condition rather than in a marked effect upon the length of pregnancy or the condition of the child at birth.

(4) Although comparatively few of the married women of the Rhondda find it necessary or have the opportunity to supplement the family income by undertaking paid labour, the nature and amount of the household duties performed are not infrequently in excess of their strength. In this connection, it can be confidently stated that the establishment of pit-head baths throughout the Rhondda would serve to relieve a large proportion of the women of the district of some of the more irksome, laborious and unpleasant of their duties as well as incidentally, to raise the standard of cleanliness throughout the area.

(5) The unnecessary frequency with which artificial feeding is substituted for breast feeding is an exceedingly important factor to which many influences contribute. It is certain that in many of these instances resort to the feeding-bottle might have been obviated to the child's as well as to the mother's advantage by the exercise of a little more perseverance on the part of those concerned and by a little more firmness and definiteness in the advice which it is the duty of both the medical attendant (if any) and the midwife or monthly nurse to give. The spread of a more wholesome and less accommodating doctrine on this point is one of the most important duties of doctors, midwives and health visitors, whether at the centres or at the homes, and there have been satisfactory instances where the influence of the Council's

centres in this direction has been exercised to the ultimate benefit of both mother and child.

(6) Other very important post-natal factors in the causation of excessive infant mortality are over-crowding at the homes and the prevalent habit of overheating living-rooms which are at the same time ill-ventilated. Children brought up under such conditions are more vulnerable to the harmful influence of sudden changes of temperature and the large proportion of 23 per cent. of the total deaths due to respiratory diseases may largely be attributed with some reason to this cause.

During the year inquiries were made by the health visitors into the circumstances attending 5,030 of the total number of 5,046 births which occurred during this period. It was found that only 3,718, or 74 per cent., were wholly breast-fed and that 265, or 5 per cent, were

#### Some Statistics relating to Diets and Modes of Feeding.

	Total number in respect of whom records are available (5030).	Percentages of the total.	No of deaths in each group. (501).	Percentage of deaths to number in each group.	Percentage of deaths in each group to fatalities investigated.
Breast-fed .. .. .	3,718	74	215	5·8	43
Partly breast-fed .. .. .	265	5	45	16·9	9
Entirely Bottle-fed .. .. .	929	18	123	13·2	25
Spoon-fed .. .. .	32	0·6	32	100·0	6
Unfed .. .. .	86	2	86	100·0	17
Bottle Used { Boat-shaped .. .. .	1062	21	142	13·4	29
{ Tube .. .. .	121	2	26	21·5	5
{ Boat-shaped and Tube .. .. .	11	0·2	—	—	—
Varieties of Milk Used { Cows' Milk .. .. .	160	3	56	35·0	11
{ Condensed Milk .. .. .	440	9	78	17·7	16
{ Other Foods (Glaxo, Cow and Gate, etc.) .. .. .	626	12	66	10·5	13

partly breast-fed and partly fed artificially. The number of babies entirely bottle-fed was 929, or 18 per cent. A further decrease in the proportionate number of breast-fed babies, as compared with recent years, has thus to be recorded, the differences amounting to 7 and 3 per cent., in comparison to 1918 and 1919 respectively (cf. observations in par. (5) above).

There were 215 deaths among the babies that were breast-fed, equivalent to a death-rate of 58 per 1,000 births, as compared with 123 and 132 respectively among the bottle-fed. The death-rate among the latter is therefore very much greater than among the former and this difference is consistent with universal experience.

There were 162 illegitimate births recorded during 1920 and of these 29 died before attaining the age of twelve months with a resulting mortality of 179 per 1,000 births. This rate is a welcome reduction as compared with that of 236 for the previous year. Although the general circumstances attending the early life of these illegitimate children remain more or less the same, it is probable that this improvement may be attributable to some extent to the timely help given to the necessitous among them in pursuance of the arrangement under the Council's milk assistance scheme.

It is a matter for deep regret that the Child Welfare Centre at Ystrad was destroyed by fire on March 18th, 1920, this misfortune resulting in the total loss of the contents including the records bearing upon the work. Both the building and the contents were insured, but the fire resulted in much inconvenience and disorganisation of the work, especially until the opening of the Ynyshir Centre in June. During the short period for which the Ystrad Centre was available, 983 visits were paid to the institution on 32 occasions with an average of 31 visits per session. The new cases among them amounted to 292, of which

241 were under 12 months old, the remaining 51 being between one and five years of age. The re-visits reached 691, babies under one year of age being the subjects in 541 instances and children between one and five forming the remaining 150.

After the destruction of the Ystrad Centre steps were immediately taken to expedite the equipment of the Ynyshir Centre, but owing to various causes it did not become available until the 16th June. Between that date and the end of the year it was used in the interests of Maternity and Child Welfare on 107 occasions, the number of visits paid to the Centre being 2,371, with an average of 22 visits per session. The number of new cases reached 1,036, children under one year of age forming 828 and those between one and five contributed the remaining 208. The re-visits totalled 1,335, no fewer than 1,136 being of children under one, the remaining 197 being made up of those above that age. The highest number of visits paid by an individual child under one was 21, the corresponding maximum for a child over one being six.

There were 21 deaths among the 828 children who attended the Ynyshir Centre, equivalent to a mortality rate of 25.4 per 1,000, whereas the rate among those of corresponding age periods who did not attend the centre amounted to 73.8 per 1,000. In making this comparison babies dying under one month old are eliminated from both groups for the vast majority of those who are brought to the Centre are above that age.

During the year, dried milk was supplied in large quantities to borderland cases at cost price as before, and, in necessitous cases, at less than cost price. Owing to the difficulty and unavoidable delay in obtaining fresh and pure cow's milk in the Rhondda District, this facility is believed to have been of great advantage to the children depending entirely on artificial feeding.

Besides visits paid by the nursing mothers and their babies, 18 expectant mothers attended for advice, the total number of visits and re-visits paid by them being 27.

Beyond those consequent upon the destruction of the Ystrad Centre, no changes have been made in the organisation of the Welfare Centres, and periodical visits to the homes were paid by the health visitors.

The number of visits thus paid by the health visitors during the year amounted to 23,893. Home visitation, if conscientiously carried out, may be considered to be of the very highest importance in any scheme of maternity and child welfare, and our experience in this district justifies the adoption of a similar attitude towards this work. It is to be hoped that with a return of more normal conditions advantage may be taken of the offer of the Carnegie United Kingdom Trustees to build and equip a Model Welfare Centre in the Rhondda.

The treatment of dental disease among the expectant and nursing mothers has been available since the beginning of November, 1920. During that period, six nursing mothers were examined and referred for treatment by the Dental Surgeon in the service of the Council. Of these only four cases presented themselves for treatment. The total number of visits paid by them to the Dental Clinic was 10. Nineteen permanent teeth that were found unsaveable were extracted, while filling was done in the case of three permanent ones. Nitrous Oxide gas was used in one case, and two cases were treated under local anæsthesia.

The accompanying table provides summarised information bearing upon infantile mortality in the district throughout the year:—

Table giving in detail the information obtained by the Health Visitors concerning deaths of 501 children under one and of 245 children born dead.

		Deaths of children under one.		Still-Births.	
		Total Number.	Per Cent of Total Cases.	Total Number.	Per Cent of Total Cases.
Sex	Male .. .. .	289	58	132	54
	Female .. .. .	212	42	113	46
Ages at Death.	0 to 12 hours .. .. .	39	8		
	12 to 24 ,, .. .. .	16	3		
	1 to 7 days .. .. .	74	15		
	1 to 4 weeks .. .. .	89	18		
	1 to 2 months .. .. .	40	8		
	2 to 3 ,, .. .. .	26	5		
	3 to 4 ,, .. .. .	31	6		
	4 to 5 ,, .. .. .	25	5		
	5 to 6 ,, .. .. .	35	7		
	6 to 7 ,, .. .. .	26	5		
	7 to 8 ,, .. .. .	23	5		
	8 to 9 ,, .. .. .	20	4		
9 to 10 ,, .. .. .	17	3			
10 to 11 ,, .. .. .	26	5			
11 to 12 ,, .. .. .	14	3			
Maturity	Mature .. .. .	366	73	125	51
	Premature .. .. .	135	27	120	49
	Insured .. .. .	107	21		
	Not well from birth .. .. .	162	32		
Previously visited by Health Visitor	299	60			
Separated from mother .. .. .	..	..			
Breast-fed .. .. .	215	43			
Partly breast-fed and partly other-wise .. .. .	45	9			
Bottle-fed .. .. .	123	25			
Spoon fed .. .. .	32	6			
Unfed .. .. .	86	17			
Bottle used.	Boat-shaped .. .. .	142	29		
	Tube .. .. .	26	5		
	Boat-shaped and tube .. .. .	..	..		
Milk	Cows' .. .. .	56	11		
	Condensed .. .. .	78	16		
	Patent Foods .. .. .	66	13		
Abnormal number of flies in house	2	0.4			
Insanitary condition of house	4	1			
Overcrowding .. .. .	33	7			
Previous deaths—					
1 child under one year of age	48	10	35	15	
2 children ,, ,, .. .. .	26	5	8	3	
3 children ,, ,, .. .. .	5	1	6	2	
4 or more children ,, ,, .. .. .	4	1	3	1	
Total number with previous deaths of Infants under one year .. .. .	83	17	52	21	
Number with 1 previous still-birth .. .. .	24	5	29	12	
,, ,, 2 ,, still-births .. .. .	6	1	9	3	
,, ,, 3 ,, ,, .. .. .	6	1	4	2	
,, ,, 4 or more ,, ,, .. .. .	1	0.2	10	4	
Total number with previous still-births .. .. .	37	7	52	21	
Abnormal condition of mother .. .. .	78	16	95	39	
Difficult birth .. .. .	78	16	95	39	
Illegitimate .. .. .	24	5	6	2	

The following table shows the extent to which the Notification of Births Act, 1907, has been observed since its adoption in 1909:—

		Births registered with District Registrars.	Births notified to Medical Officer of Health.	Percentage proportion of latter to former.
Portion of District served by Health Visitors.	1909( $\frac{1}{2}$ )	1,550	1,546	100
	1910	3,079	3,023	98
	1911	3,059	3,144	103
Portion of District not served by Health Visitors.	1909( $\frac{1}{2}$ )	1,237	1,050	85
	1910	2,549	1,236	48
	1911	2,404	1,670	69
Whole of Rhondda	1909( $\frac{1}{2}$ )	2,787	2,596	93
	1910	5,628	4,259	76
	1911	5,463	4,814	88
	1912	5,202	4,898	94
	1913	5,479	5,522	101
	1914	5,541	5,444	98
	1915	4,960	4,995	101
	1916	4,481	4,695	105
	1917	4,145	4,361	105
	1918	4,346	4,349	100
	1919	4,263	4,573	107
<b>1920</b>	<b>5,046</b>	<b>5,365</b>	<b>106</b>	

NOTES.—(1) In 1912 Health Visitors were appointed to serve the whole of the Urban District.

(2) The excess of the number of births notified to the Medical Officer of Health over the number registered in some years is due to the inclusion of still-births in the former, and to the discrepancies arising in consequence of the different intervals after birth allowed for notification and registration respectively.

## MIDWIVES ACT, 1902, AND SUPERVISION OF MIDWIVES.

At the present time the supervision of Midwives in the District is carried out by the Rhondda Urban District Council, the Glamorgan County Council having delegated the necessary powers under Sec. 9 of the Act, as from October 1st, 1918. The arrangement is found to be satisfactory, as the close association with the midwives thus made possible, enables the District Council to secure greater efficiency and thoroughness in the promotion of certain phases of Maternity and Child Welfare work. Dr. Helena G. Jones, one of the Assistant Medical Officers under the Council, has continued to act as Inspector of Midwives under the Act.

There are altogether 131 Midwives practising in the district, of whom 94 possess the certificate of the Central Midwives Board, or its equivalent, and 37 are on the Midwives Roll in virtue of their being in practice prior to 1st August, 1901.

Table giving the Ward distribution of Midwives, 1920.

Wards.	Total.	Trained.	Untrained.
1	12	9	3
2	15	13	2
3	5	3	2
4	8	6	2
5	12	9	3
6	11	6	5
7	8	4	4
8	9	7	2
9	33	25	8
10	18	12	6
<b>Total</b>	<b>131</b>	<b>94</b>	<b>37</b>

The total number of births in the district being only 5,046 during the year, their equal distribution among the midwives would allow only 39 for each midwife. The Medical Inspector paid visits to the homes of these mid-

wives in the course of the year on 260 occasions, special circumstances calling for 20 of these visits.

In the last series of visits paid in the course of the year the proportion of the satisfactory ones amounted to 77 per cent. In the majority of instances, minor errors in connection with the equipment and practice were the main reasons for the unfavourable report by the Medical Inspector. A large proportion of the unsatisfactory ones are old women, who will probably cease to practise in the near future.

Of the 5,046 births, 4,290 were attended by the midwives only, and medical attention was required in 756 cases, or 14.9 per cent., of the whole. The most common causes, for which medical aid was sought, were exhaustion due to prolonged labour and the presence of conjunctivitis or ophthalmia in the baby.

The accompanying table provides a summary of the information given by the midwives of the district under the rules of the Central Midwives Board concerning the causes calling for medical attendance, distinction being made between day and night calls, the grouping in the other columns being in accordance with the Ward distribution of such calls.

Under the regulation requiring a midwife to notify to the Supervising Authority any instance in which the mother resorts to artificial feeding of her infant, during the period of her attendance on such mother, 73 notifications were received during the year. In 42 cases, or 57 per cent. of the whole, the stated cause was either the weakness of the mother, insufficiency of the mother's milk or the advice of the medical attendant. In six cases artificial feeding was resorted to because the mother desired to return to her previous employment. Although the total number of babies thus deprived of their natural source of sustenance is fortunately small and amounting

## Record of Sending for Medical Help, 1920.

Reason given for Sending.	Day.	Night.	WARD										Total.
			1	2	3	4	5	6	7	8	9	10	
Abortion or Threatened Abortion .. .. .	25	14	6	5	3	2	2	3	7	5	3	3	39
Dangerous Varicose Veins .. .. .	1	1	1	..	..	..	..	..	..	..	..	1	2
Fits or Convulsions .. .. .	8	..	1	..	..	..	..	2	1	..	3	1	8
Purulent Discharge .. .. .	3	1	4	..	..	..	..	..	..	..	..	..	4
Sores of the Genitals .. .. .	..	2	2	..	..	..	..	..	..	..	..	..	2
Malpresentation .. .. .	17	15	..	7	2	3	1	1	4	7	3	4	32
Where there is excessive bleeding .. .. .	14	5	8	..	1	1	1	3	2	..	2	1	19
Retained Membranes .. .. .	18	10	9	1	..	2	1	4	4	2	3	2	28
Rupture of the Perineum .. .. .	58	21	13	8	9	4	4	7	4	1	13	16	79
Rigid Os .. .. .	4	5	..	2	..	1	..	2	2	..	..	2	9
Persistent Occipito-Posterior..	4	3	..	2	..	..	..	2	2	1	..	..	7
Prolonged Labour .. .. .	116	104	28	48	4	8	9	7	11	33	46	26	220
Adherent Placenta .. .. .	13	10	..	2	..	..	1	..	2	5	7	6	23
Ante Partum Hæmorrhage .. .. .	7	6	2	3	1	..	1	1	..	2	1	2	13
Post Partum Hæmorrhage .. .. .	5	5	1	..	..	2	..	..	1	..	..	6	10
Obstructed Labour .. .. .	15	17	2	5	2	2	4	3	..	5	7	2	32
Uterine Inertia .. .. .	20	7	3	9	..	3	1	3	..	1	3	4	27
Impacted Head .. .. .	4	1	2	..	..	..	..	1	2	..	..	..	5
Contracted Pelvis .. .. .	7	4	1	1	..	..	1	..	3	..	2	3	11
Exhaustion .. .. .	5	3	3	1	..	..	..	..	..	1	..	3	8
General Weakness .. .. .	2	4	1	1	..	..	1	..	..	1	2	..	6
Prolapse of Uterus .. .. .	..	1	..	..	..	..	..	..	..	..	..	1	1
Still Birth .. .. .	5	2	..	2	1	3	..	..	1	..	..	..	7
Severe Abdominal Pains .. .. .	3	..	1	..	..	1	..	..	..	..	1	..	3
Instrumental Delivery.. .. .	2	5	1	..	..	..	..	..	..	2	4	..	7
Prolapse of Cord .. .. .	2	..	1	..	..	..	..	..	1	..	..	..	2
Prematurity .. .. .	4	6	4	..	..	..	2	1	..	..	2	1	10
Rash on Body .. .. .	1	1	2	..	..	..	..	..	..	..	..	..	2
Pendulous Abdomen .. .. .	..	1	..	..	..	..	..	1	..	..	..	..	1
Bronchitis of Mother .. .. .	..	1	..	..	..	..	..	..	1	..	..	..	1
Pain in Side .. .. .	..	1	1	..	..	..	..	..	..	..	..	..	1
Patient's Bladder very distended .. .. .	1	..	1	..	..	..	..	..	..	..	..	..	1
Bright's Disease .. .. .	1	..	..	..	..	..	..	..	1	..	..	..	1
Weak Heart .. .. .	3	..	1	1	..	..	..	..	1	..	..	..	3
Chorea .. .. .	1	..	..	..	..	..	..	..	..	..	..	1	1
Pains in the Leg .. .. .	1	..	..	1	..	..	..	..	..	..	..	..	1
Slight retroverted Uterus .. .. .	1	..	..	..	..	..	..	..	..	..	..	1	1
Rise in Temperature .. .. .	15	7	1	2	1	1	..	2	5	2	6	2	22
Malformation of Child.. .. .	10	2	2	..	..	..	3	3	..	1	2	1	12
Dangerous Feebleness .. .. .	21	9	1	1	4	2	..	3	4	3	5	7	30
Inflammation of or discharge from the Eyes .. .. .	50	..	4	3	1	3	4	1	20	1	9	4	50
Watery blisters on Baby .. .. .	1	..	1	..	..	..	..	..	..	..	..	..	1
Asphyxia Pallida .. .. .	..	1	..	..	..	..	..	..	..	..	1	..	1
Phimosis .. .. .	3	..	..	..	..	1	..	..	1	..	1	..	3
Jaundice .. .. .	2	..	..	..	..	..	1	1	..	..	..	..	2
Inflammation about or Hæmorrhage from the Navel .. .. .	4	..	2	..	..	..	..	..	2	..	..	..	4
Nævus .. .. .	1	..	..	..	..	..	..	1	..	..	..	..	1
Convulsions .. .. .	..	1	..	..	..	..	..	..	1	..	..	..	1
Tongue Tie .. .. .	2	..	..	..	..	..	..	..	..	..	1	1	2
Totals..	480	276	110	105	29	39	37	52	83	73	127	101	756

to only 1.4 per cent. of the total births, it appears that in a large proportion of these cases the change is made without mature consideration and probably without sufficient perseverance on the part of the mother.

During the same period six notifications were received from midwives about their liability to be a source of infection; in 4 cases the stated cause was septic infection while ophthalmia and diphtheria accounted for one each.

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### OPHTHALMIA NEONATORUM.

During 1920, 98 cases of ophthalmia neonatorum were notified throughout the district, of which 21 were notified by medical practitioners only, 62 by midwives only, and 15 by both. This gives a proportion of 19 per 1,000 births. Both the eyes were affected in 71 cases, the right eye in 13 cases, and the left in 14 cases.

Of the 98 cases, 94 cleared up completely, permanent damage was done to the right eye in one case, and three babies died before the disease ran its full course.

Active assistance was rendered by the health visitors in 62 cases, the average number of visits per case paid by them being 11.5. The highest number of visits paid to individual cases varied from 64 to one.

The average duration of the disease was 23.7 days, varying from 93 to 4 days. Compared with the average of 30 days for the previous year, it is satisfactory to note the downward tendency as indicating the more successful application of treatment or a milder form of the disease.

Inquiries made by the health visitors elicited the information that in 18 cases the mothers suffered from vaginal discharge before the birth of the child. Although

no definite information could be obtained as to the character of the discharge in these cases, it is probable that in some of these it was venereal in origin. In only one case was there a definite history of the mother having suffered from gonorrhœa previous to the birth of the child.

All the Wards in the district contributed towards the total number of notifications, Ward 7 heading the list with 21 cases, and Ward 9 with 15 cases being the next highest.

The average age of the child on the day of onset of the disease was 6 days, varying from one day in 7 cases to the 21st day in two instances.

The highest number recorded in any individual midwife's practice was 21, no other midwife having a larger number than five.

An analysis of the reports upon these cases makes it clear that a vast majority of them were cases of mild conjunctivitis.

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### PUERPERAL FEVER.

				1920.	Average for Ten Years. 1910-1919.
Number of Cases	...	...	...	15	14
Number of Deaths	...	...	...	8	7
Death-rate per 1,000, Rhondda	...	...	...	.04	.05

Puerperal fever, or bed fever, arises owing to septic infection of the lying-in woman. This may occur owing to want of sufficient care on the part of those in attendance or possibly owing to auto-infection from the woman's genitals. The disease is more likely to occur where much manipulation has been carried out as in instrumental delivery where the nature of the confinement is such as to result in rupture or bruising of the parts. The adoption of strict antiseptic methods in midwifery

practice on the part of doctors and midwives undoubtedly serves to reduce the occurrence of infection to a minimum but the conditions under which confinements occur at many of the homes in the district render this ideal difficult of attainment.

The total number of cases of puerperal fever which were notified during the year amounted to 15, equivalent to an incidence of 3.0 per 1,000 births, and the 8 deaths which resulted gave a fatality of 53.3 per cent. of the cases and a death-rate of 0.04 per 1,000 of the living population. While the incidence rate is exceptionally high as compared with recent years, the high fatality rate among the cases notified rather indicates that many milder cases escaped recognition or, more probably, notification and that were all the cases which can legitimately be called puerperal fever reported the incidence rate would have been still higher.

Six of the 15 cases that were notified were attended by midwives only as were also the actual births in the case of three others, medical practitioners being called in immediately afterwards to deal with hæmorrhage, adherent placenta or ruptured perineum. The remaining six were attended at birth by both doctors and midwives, two of them requiring instrumental delivery. All the cases occurred in the practices of different midwives of whom 9 were trained and 6 were untrained, the proportion being distinctly unfavourable to the latter, of whom there are only 37 out of the 131 midwives practising in the district.

Improved facilities for dealing with lying-in women are required in our district, especially in certain directions such as the provision of hospital accommodation for difficult cases or those placed under exceptionally unfavourable conditions and a greater appreciation of the advantages derivable from attendance at our ante-natal centres.

While these factors are to some extent inter-dependent it may confidently be stated that, even in the absence of the former, advice sought and acted upon before birth will sometimes serve to lessen the risks which are always attendant upon child-birth but which are increased by the presence of certain removeable conditions in the mother.

ZYMOTIC DISEASES.	Average for Ten Years.	
	1920.	1910-1919.
Total number of Deaths in Rhondda		
from Zymotic Diseases ... ..	214	245
Zymotic Death-rate for Rhondda ...	1.2	1.6

For statistical purposes, the following diseases are grouped together under the term "Zymotic Diseases":— Small-pox, measles, scarlet fever, diphtheria, whooping cough, typhoid and other continued fevers, and diarrhœa.

Zymotic death-rate is the ratio of the number of deaths from these diseases to the living population, and may be considered one of the most reliable indices of the sanitary condition of a district. The total number of deaths due to zymotic diseases in the Rhondda in 1920 amounted to 214, equivalent to the zymotic death-rate of 1.2 per 1,000 of the living population. This rate is 0.4 less than the average for the ten previous years, the latter in its turn being exactly one-half of the average zymotic death-rate during the decennium 1900-1909. Measles was responsible for 110 of the 214 zymotic deaths and thus contributed more than half the total and approximately four times the number caused by scarlet fever, which was the next most fatal cause of death among the zymotic group (cf. Appendix Table 12).

Ward 1 with 2.43 and Ward 3 with 0.36 per 1,000 were respectively the least and most satisfactory localities in this respect, measles alone being responsible for a rate of 1.24 in the former Ward.

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## SMALL-POX.

There was no case of Small-pox notified during the year.

While the freedom of the District from this much-dreaded disease gives one a legitimate cause for satisfaction, it has to be borne in mind that owing to easily-obtained exemptions from vaccination during the last ten years, a large section of the population is growing up in our midst without the protection against small-pox which is afforded by efficient vaccination with glycerinated calf lymph.

It only requires the introduction of the disease into the district, especially if the introducing case or cases be allowed, before detection, to spread the infection among the susceptible portion of the population, for the community to realize the risk to which the district is exposed by the illogical and selfish attitude adopted by those who obtain exemptions in respect of their children who are not in a position to protest against their being denied the definite protection which such a trivial operation as vaccination is capable of affording without expense or other than negligible suffering to the benefitting individual. In this connection it should be added that the mere fact that vaccination has been performed is not in itself sufficient, but the operation carried out must be adequate and should result in an area of pitted scar tissue such as that given by four good marks,

In order to secure reasonable protection against small-pox for life it should be sufficient for every individual not exceptionally exposed to infection to be re-vaccinated once at some convenient time such as just before or just after leaving school.

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### MEASLES.

	1920.	Average for Ten Years. 1910-1919.
Number of Deaths ... ..	110	70
Death-rate per 1,000, Rhondda ...	.59	.45
Death-rate per 1,000, 96 Great Towns	.22	.35
Death-rate per 1,000, England and Wales ... ..	.19	.27

Measles ceased to be compulsorily notifiable after the 31st December, 1919, so that it is not possible to compare the incidence during 1920 with the records for 1916 to 1919, during which period the Public Health (Measles and German Measles) Regulations, 1915, were in force.

The deaths from Measles amounted to 110, or more than four times the number in the previous year and the largest total recorded since 1912.

The death-rate per 1,000 in the Rhondda for the year is considerably in excess of the rates for England and Wales and the 96 Great Towns, the figures being .59, .19 and .22 respectively. The largest number of deaths occurred in Ward 1, the number varying from 21 in that district to four in each of Wards 3 and 10.

During the year 1920 the number of deaths caused by Measles exceeded the aggregate due to the six remaining members of the zymotic group. It is significant that during the four years during which this disease was

compulsorily notifiable the total number of deaths was the smallest recorded for any other group of four successive years for the last 20 years, and that in the course of the very first year after the cessation of compulsory notification and the resulting measure of administrative control the fatalities again reached a height not attained since 1912 (cf. Appendix Table 12).

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### SCARLET FEVER.

	1920.	Average for Ten Years. 1910-1919.
Number of Cases ... ..	1164	649
Number of Deaths ... ..	29	13
Death-rate per 1,000, Rhondda ...	.16	.08
Death-rate per 1,000, 96 Great Towns	.04	.06
Death-rate per 1,000, England and Wales ... ..	.04	.05

There was an exceptional prevalence of Scarlet Fever during the year under review, the number of cases notified reaching the large total of 1,164.

This aggregate is the largest since 1910 and is practically twice the average for the ten previous years. The number of deaths caused by the disease was 29 and is equivalent to a mortality rate of 0.16 per 1,000 and to a fatality-rate of 2.5 per cent. of the cases notified. Although an exceptional prevalence of the disease was experienced throughout the country generally, especially in London and in Wales, the Rhondda rates compared unfavourably with those pertaining to England and Wales as a whole with a mortality-rate of .04 per 1,000 and a fatality-rate of 1.1 per cent.

It is noteworthy that 60.6 per cent. of the cases occurred amongst children between the ages of 5 and 12

years of age whilst children under 5 contributed 24.4 per cent. of cases.

The fatality among the younger group was nearly six times that in the older group (6.3 per cent. as compared with 1.1 per cent.). The distribution of the disease throughout the area was very general but irregular, Ward 1 with 202 cases and Ward 7 with 39 cases being respectively the most and least affected.

During the year 438 cases, or 37.6 per cent. of the cases notified, were removed to the Isolation Hospital and the 7 deaths which occurred among the admitted cases were equivalent to a fatality-rate of 1.6 per cent. During the height of the prevalence it was not possible to admit all the removeable cases owing to the want of sufficient accommodation. Had such been available it may be confidently stated that not only would some of the secondary cases have been prevented but some of the 22 deaths which occurred among those accommodated at their homes would have been obviated. The deaths do not represent the only losses to the suffering families and to the community but a considerable proportion of those who escape a fatal issue during the attack is partially disabled by the persistence of one or more of the complications, such as kidney and middle ear disease, which are so apt to supervene in the course of this disease.

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### DIPHTHERIA.

	Average for Ten Years.	
	1920.	1910-1919.
Number of Cases ... ..	258	174
Number of Deaths ... ..	24	24
Death-rate per 1,000, Rhondda ...	.13	.15
Death-rate per 1,000, 96 Great Towns	.16	.14
Death-rate per 1,000, England and Wales ... ..	.15	.13

There were notified during the year 258 cases of Diphtheria as compared with 203 in 1919 and with 120 in 1918. The annual total is in excess of the average for the previous ten years by 84 and is the highest recorded since 1913. The Rhondda mortality of 0.13 per 1,000 of the population compared favourably, however, with the corresponding rates of 0.16 and 0.15 for the 96 Great Towns and for England and Wales respectively.

Of the 258 cases notified 24 proved fatal and occasioned a case mortality of 9.3 per cent. which is one of the three lowest yet recorded in the district since 1894 when the disease first became notifiable.

Patients under 12 years of age constituted 87.2 per cent. of the notified cases and of these 150, or 67 per cent., were between 5 and 12 years of age and the remaining 75, or 33 per cent., were under five. The disease was most fatal in children under 3 years of age, 12 out of 35, or 34.2 per cent., of whom died.

The seasonal incidence of the disease was highest in March with 31 notifications and lowest in August with 11 notifications. It is significant that the schools were closed in August for the summer holidays.

The incidence of the disease upon the Wards throughout the year varied from 8 in Ward 7 to 34 in Ward 4.

In only 5.4 per cent. of the infected homes did other cases of the disease occur and 130, or 50 per cent., of the total notified were removed to the Isolation Hospital with the resulting fatality of 4.6 per cent. as compared with 14.1 per cent for those dealt with at home throughout their illness.

## TYPHOID FEVER.

	1920.	Average for Ten Years. 1910-1919.
Number of Cases ... ..	7	55
Number of Deaths ... ..	2	9
Death-rate per 1,000, Rhondda ...	.01	.06
Death-rate per 1,000, 96 Great Towns	.01	.04
Death-rate per 1,000, England and Wales ... ..	.01	.04

Only 7 notifications of Typhoid Fever were received in the course of the year. This total is the lowest number recorded in any year since the disease became notifiable in 1894 and forms practically one-eighth of the annual average for the ten previous years. Even this low number has to be reduced to 5, because further observation of two of the six notified cases removed to the hospital led to the conclusion that the disease from which the patients were suffering was pneumonia. Two of the remaining five cases proved fatal and caused a fatality-rate of 40 per cent.

The cases were widely distributed throughout the district, only Wards 2, 5, 7 and 10 remaining entirely free from the disease throughout the year. Contrary to the usual experience the majority of the cases occurred during the first four months of the year.

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 CEREBRO-SPINAL FEVER.

Number of Cases ... ..	7
Number of Deaths ... ..	3
Death-rate per 1,000, Rhondda ... ..	.02

Seven notifications of Cerebro-Spinal Fever were received in the course of the year under review. Of these, one related to a baby, 5 months old, in Mikado Street,

Penygraig, and the investigations carried out after death led to the belief that the described symptoms and history of the case were more in conformity with the diagnosis of tuberculous meningitis than of cerebro-spinal fever. On the other hand it is believed that a case of somewhat obscure disease which occurred at Hafod and which had a fatal issue on the 9th of March, was one of cerebro-spinal fever although it was not notified. This case formed one of a group of seven cases which occurred in that locality in March and of which a summarised report was submitted to the Ministry of Health in July, 1920. The material facts given in the report are here reproduced.

The Medical Officer of Health was first communicated with on March 16th, and, on inquiry, ascertained that a young man, 21 years of age, living at 19 Pleasant View, Trehafod, was taken suddenly ill on the 6th of March and died three days later, the chief symptoms being violent headache followed by delirium. Death was certified as having been due to "Influenza, Uræmia."

A few days later two women who had helped to nurse the fatal case were taken with illness similar to but less violent and pronounced than that which had proved fatal.

At this juncture the Health Department was communicated with and inquiries immediately made confirmed the suspicion held by the medical attendant that the disease in all the cases was cerebro-spinal fever, and cerebro-spinal fluid taken from one of the surviving patients was submitted to the Ministry of Health for examination. On the 18th a telegraphic report was received to the effect that the fluid contained the meningococcus, the organism now accepted as the essential cause of this disease.

A day or two later, another case—J.M., female, 48 years of age—was taken ill very suddenly and died on

the 21st before she was seen by a doctor. An inquest was held and the verdict gave cerebro-spinal fever as the cause of death. In addition three other cases of the same disease were notified from the same locality so that the total number of cases believed to have suffered from the disease was not fewer than seven.

When the nature of the cases were first recognized there was no accommodation for cases of this disease available at our Isolation Hospital, but at a later date it became possible to empty one of the wards for this purpose, and three of the cases were admitted. After having been submitted to repeated intra-theccal administration of anti-meningococcic serum the three cases were discharged as cured after a stay of some weeks. Of the two remaining cases one was so mild in character, and was so well isolated, that it was not considered necessary to remove him, whereas the other was so seriously ill that her removal would be attended by too much immediate risk, but ultimately she also recovered.

The distribution of the cases in point of locality and time suggests the existence of a close connexion between them and the investigations made indicate that six of the cases were all attributable to direct or indirect infection from the unrecognized case which ended fatally on March 9th. No well-founded explanation of the occurrence of the first case can be offered. The inquiries concerning it were not made until a week after the fatal issue as the nature of the disease was not suspected until other associated cases had occurred.

The contacts were comparatively few in number and were kept under observation until it was believed that no other cases were likely to occur.

Tabular Statement relating to a Group of Seven Cases believed to have suffered from Cerebro-spinal Fever at Hafod.

No.	Name.	Age.	Sex.	Address.	Date of Notification.	Date of Onset.	Exam. of Cerebro-spinal fluid by M.H.	Whether removed to Hospital	Result.	Remarks.
1	P.N.H.	21	M	19 Pleasant View, Hafod	Not Notified	6 March, 1920	None taken	No	Died on 9 March, 1920	Nature not recognised and death cert. as due to "Influenza, Uremia."
2	H.D.	50	F	18 Pleasant View Hafod	20 March, 1920	12 March, 1920	Positive	Yes	Recovery	Treated with Serum intrathecally. Nursed case (1) above.
3	N.H.	50	F	35 Woodfield Terr., Hafod	20 March, 1920	13 March, 1920	Not taken	No	Recovery	Treated Medicinally; no Serum used. Nursed case (1).
4	C.E.	50	F	17 Rheola Terrace Hafod	17 March, 1920	15 March, 1920	Excess of Multi-nuclear leucocytes culture plates sterile. do.	Yes	Recovery	Treated with Serum intrathecally. Visited home of case (1) during his illness.
5	G.D.B.	31	M	32 Woodfield Terr., Hafod	20 March, 1920	16 March, 1920	do.	Yes	Recovery	Treated with Serum intrathecally. Discharged from Army Feb. 1919, was Hospital Orderly in Italy (? Otranto).
6	J.M.	48	F	17 Pleasant View, Hafod	22 March, 1920	21 March, 1920	Not taken	No	Died on 21 March 1920	Illness of very short duration (less than 24 hours). Nursed case (1) Inquest held, Verdict "Death from Cerebro-spinal Fever."
7	T.D.	20	M	18 Pleasant View, Hafod	28 March, 1920	27 March, 1920	Not taken	No	Recovery	Very mild case. Son of case (2) Treated medicinally. No Serum used.

## ACUTE POLIOMYELITIS.

Number of Cases	...	...	...	...	...	1
Number of Deaths	...	...	...	...	...	2

One fatal case of this disease was notified from Ward 4, and a further death from Ward 5 was certified as being due to Infantile Paralysis.

In the only notified case there was no evidence in support of associating the disease with the existence of insanitary conditions or of any prior or subsequent cases.

In contrast to the previous year, when no case of this disease was notified, one notification was received in the course of 1920. There is no doubt however that instances of the disease escape notification every year either because the disease remains unrecognized throughout or is only recognized after the acute stages of the illness have passed. There is evidence however that the obligations under which the medical practitioner is placed regarding the notification of this disease are becoming gradually realized and that consequently greater vigilance is being shown in differentiating between it and similar diseases, notifiable and non-notifiable.

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 ENCEPHALITIS LETHARGICA.

Number of Cases	...	...	...	...	...	5
Number of Deaths	...	...	...	...	...	3
Death-rate per 1,000, Rhondda	...	...	...	...	...	.02

Five cases of this disease were notified during the year. In the case of one of the five, inquiries made after the receipt of the notification led to the conclusion that the disease affecting the patient,—a child three years of age,—was most probably tuberculous meningitis.

The remaining four cases consisted of three females and one male and all occurred during the last two months of the year. The three first-mentioned, of the respective ages of 17, 47 and 4 years, were patients of the same practitioner in Wards 3 and 4, and the male, aged 29 years, lived in Ward 10. Two of the women sufferers died in a comatose condition but the other two slowly recovered. Inquiry failed to disclose any personal association between the four cases reported and no mild and possibly missed instance of the disease which might have formed a link in the chain of infection was discovered.

On the recognition of the first clinically unequivocal case of the disease in the district, all the medical practitioners in the area were sent a brief summary of the most constant and characteristic symptoms of the disease which, owing to its multiform character, simulates several other diseases of the nervous system. The summary was accompanied by a letter inviting early information from every practitioner regarding any doubtful case coming under his observation so that an opportunity to assist or advise might be afforded the Council's Health Department as soon as possible.

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### WHOOPING COUGH.

	1920.	Average for Ten Years. 1910-1919.
Number of Deaths ... ..	24	36
Death-rate per 1,000, Rhondda ...	.13	.23
Death-rate per 1,000, 96 Great Towns	.14	.23
Death-rate per 1,000, England & Wales	.11	.19

The number of deaths from Whooping Cough was 24, as compared with 38 in the previous year. The death-rate of .13 per 1,000 is considerably less than the average for the last ten years. The fatal cases occurred in

children under five years of age and were generally distributed throughout the district, Wards 3, 7 and 8 being the only localities not to contribute fatal cases.

In spite of the reduction in the number of deaths from this disease during the year it is to be noted that there were fewer deaths from Scarlet Fever and Diphtheria than from Whooping Cough. Among the factors which tend to a relatively high mortality are the long duration of the disease and the lack of a general recognition of the need to take any particular precautions to avoid infection and the occurrence of lung complications which are usually the cause of death. The absence of whooping cough from the list of notifiable diseases helps the formation of the attitude of mind so commonly held that the disease is unimportant and non-preventable.

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### DIARRHŒA.

	1920.	Average for Ten Years. 1910-1919.
Number of Deaths ... ..	25	93
Death-rate per 1,000, Rhondda ...	.14	.59

In 1920 there were 25 deaths from Diarrhœa as compared with 26 in 1919. The number of deaths and the death-rate per 1,000 (0.14) are approximately one quarter of the average for the ten years 1910-1919.

Thirteen out of the 25 deaths occurred between September 4th and October 23rd the parts of the district chiefly implicated being Wards 5 and 9 with five deaths in each. During most of this period the weather was dry and warm, the total rainfall for the seven weeks ended October 9th being only 1.1 inch and the general conditions favoured the creation and distribution of dust of all kinds as well as the fermentation of food.

## TUBERCULOSIS.

The total number of deaths due to all forms of Tuberculosis in the district in 1920 amounted to 176, giving a death-rate of 0.95 per 1,000 of the population. The corresponding figures for 1919 were 148 and 0.83 respectively.

The increase in the number of deaths from this disease has raised its position from fifth to third among the diseases which caused the highest mortality in the district during the whole year.

It is interesting to note that the years in which the fatal cases were first notified included all the years from 1911 downwards but the number contributed in any one year up to 1918 did not exceed four, whereas the numbers notified in 1918, 1919 and 1920 were 9, 26 and 119 respectively.

Eleven of the fatal cases had not been notified at any time, the majority of them being instances of cases which died of the disease after their removal to hospitals, asylums or other institutions situated outside the Rhondda Urban District.

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### PULMONARY TUBERCULOSIS.

	Average for Ten Years.	
	1920.	1910-1919.
Number of Cases ... ..	199	—
Number of Deaths ... ..	131	123
Death-rate per 1,000, Rhondda ...	.71	.78

During the year the number of cases notified remained the same as in 1919, but owing to the increase in the number of deaths, the corresponding mortality rate rose from 0.66 in 1919 to 0.71 in 1920. The latter rate,

however, is still slightly lower than the average for the ten previous years, the figures being 0.71 and 0.78 respectively. Of the notified cases 57 per cent. were between 15 and 45 years of age, while 68 per cent. of the deaths from this disease occurred in the same age-group.

The distribution of the disease in the various Wards of the district ranged from 31 cases in Ward 9 to 12 cases in Ward 1.

Pulmonary Tuberculosis ranks the sixth amongst the chief causes of death in the Rhondda, nearly 17 per cent. of the deaths in the age-group 25 to 45 years being due to this disease.

The arrangements made for the domiciliary and institutional treatment of this disease are dependent upon the medical practitioners in the district and the Welsh National Memorial Association, the treatment being carried out at the patients' own homes, local tuberculosis dispensaries, or at the Association's sanatoria or hospitals, in accordance with the nature, stage and circumstances of each case. The preventive duties, such as disinfection, ventilation, improvement of home environment, and control of milk and other foods are attended to by the Council as the Local Sanitary Authority.

The district is still unprovided with hospital accommodation within reasonable distance for cases which are in too advanced a stage to justify hopes of cure but which are, owing to their infective condition, a source of much danger to those with whom they are necessarily and often closely associated at home.

## NON-PULMONARY TUBERCULOSIS.

Number of notified Cases	...	...	...	...	116
Number of Deaths	...	...	...	...	45
Death-rate per 1,000 Rhondda	...	...	...	...	0.24

There were notified during the year 116 cases of Tuberculosis of parts of the body other than the lungs and there resulted 45 deaths with a district death-rate of 0.24 per 1,000 of the population, the corresponding figures for the previous year being 84, 32 and 0.18 respectively.

Ward 10, with 29 cases, contributed the largest number of notifications, the smallest numbers being 3, 4, 5 and 6 in Wards 3, 2, 1 and 8 respectively. A proportion of 38 per cent. of the notified cases was derived from age-group 5 to 12 years.

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## VENEREAL DISEASES.

The arrangements for the free diagnosis and treatment of patients continued as in recent years under the scheme of the Glamorgan County Council as the executive authority for the administration of the Public Health (Venereal Diseases) Regulations, 1916.

The Clinic situated at the Central Homes, Pontypridd, is the one which most conveniently serves the needs of patients in this District. The days and hours of attendance, both for men and women, are as follow:—

### MEN :

Tuesday	...	10 a.m. to 12-30 p.m.	2 p.m. to 4-30 p.m.
Wednesday		2 p.m. to 4-30 p.m.	6 p.m. to 8 p.m.
Friday	...	10 a.m. to 12-30 p.m.	6 p.m. to 8 p.m.

### WOMEN :

Monday	...	10 a.m. to 12-30 p.m.	2 p.m. to 4 p.m.
Thursday	...	10 a.m. to 12-30 p.m.	2 p.m. to 4-30 p.m.

Although no special steps are adopted by the Health Department with a view to discovering unrecognized or unattended cases of venereal disease, advantage is taken of the not infrequent occasions on which we are made aware of such instances, either incidentally or on direct inquiry by the sufferers, by making them acquainted with the steps to be taken to secure adequate treatment in the County Council's Clinic.

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### INFLUENZA.

Number of Deaths	...	...	...	...	...	76
Death-rate per 1,000 Rhondda	...	...	...	...	...	.41

Both the number of deaths and the mortality rate show a very considerable reduction as regards Influenza, when compared with the figures for the previous year. The mortality rate is practically a third of that for the year 1919, the figures being 0.41 for 1920 and 1.1 for 1919. Notwithstanding this diminution the amount of suffering and the number of deaths attributable to this disease were much in excess of the district's experience during a normal year with its 20 or 30 deaths, the months of April and May having, in 1920, contributed 71 cases of pneumonia complicating influenza and 39 deaths.

Subsequent to May however the extent of the prevalence of the disease as gauged from the bills of mortality did not on the average exceed normal proportions.

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### ACUTE INFLUENZAL PNEUMONIA.

Number of Cases	...	...	...	...	...	114
Number of Deaths	...	...	...	...	...	46
Death-rate per 1,000, Rhondda	...	...	...	...	...	0.25

There were notified during the year 114 cases of Acute Influenzal Pneumonia which resulted in 46 deaths, equivalent to a death-rate of 0.25 per 1,000 living.

The months of April and May contributed 25 and 46 cases respectively or, in the aggregate, 62 per cent. of the annual total. The incidence of the disease was greatest during the age-period 25-45 years, 36.8 per cent. of the cases falling within that age-group, the other age-group most implicated being that between 45 and 65 years with a percentage of 26.3.

Most of the cases notified were of the male sex to which 78 cases, or 68.4 per cent., belonged.

The distribution of the cases was somewhat irregular in point of locality. The largest number of cases notified and of deaths recorded were derived from Wards 2, 8 and 9, the respective totals being 35, 14 and 25 for notifications and 14, 19 and 7 for deaths.

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### ACUTE PRIMARY PNEUMONIA.

Number of Cases	...	...	...	...	...	373
Number of Deaths	...	...	...	...	...	221
Death-rate per 1,000, Rhondda	...	...	...	...	...	1.19

As a result of the Public Health (Pneumonia, Malaria, Dysentery, &c.) Regulations, 1919, Acute Primary Pneumonia, in common with other diseases embraced by these Regulations, was made compulsorily notifiable from 1st of March, 1919. There were notified during the year 373 cases, resulting in 221 deaths and a mortality-rate of 1.19 per 1,000 living and a fatality or case-mortality of 59 per cent. for the district.

The height of the last-mentioned percentage suggests that only the most serious forms of pneumonia were notified by the medical attendants, for seldom does an observed and continuous series of cases of pneumonia result in so many deaths relatively to the total under observation as that experienced in the Rhondda during the year under review.

The largest number of cases occurred in the winter months, January, February, March, April and December contributing 43, 57, 60, 57 and 42 respectively.

Males suffered more frequently than females in the proportion of 224 males to 151 females and quite a large proportion,—22.5 per cent.,—of the attacked persons were between 25 and 65 years of age.

### MALARIA.

Number of Cases	...	...	...	...	...	7
Number of Deaths	...	...	...	...	...	—

There were notified during the year 7 cases of malaria, all the sufferers having contracted the disease during service abroad, two each in India and Salonika, one each in South Africa and Mesopotamia, the source of the seventh being unknown. The experience of the previous year was repeated regarding the non-transmission of the disease from the infected to the healthy under the conditions obtaining in the district. All but one of the sufferers were between 15 and 45 years of age.

The distribution of the cases was very general, each of the ten Wards except Nos. 1, 6 and 7 contributing one case.

In no instance did malaria prove fatal in the course of the year.

## DYSENTERY.

No case of this disease was reported nor was it certified as the cause of or contributory to any death in the district in the course of the year.

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## TRENCH FEVER.

No instance of Trench Fever has been reported throughout the district since March 1st, 1919, when the disease was first made compulsorily notifiable.

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## COLLIERY FATALITIES.

Number of Deaths	...	...	...	...	...	56
Death-rate per 1,000, Rhondda	...	...	...	...	...	.30

There were 56 deaths caused by colliery accidents during the year, equivalent to 0.30 per 1,000 of the population. The corresponding figures for 1919 were 47 and 0.26 respectively and the average number of colliery fatalities during the last ten years was 57.

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## INQUESTS.

Total in 1920	...	...	...	...	...	146
Rate per cent. of Deaths	...	...	...	...	...	6.8

The number of inquests held in the district in the course of the year amounted to 146, equivalent to 0.79 per 1,000 of the population.

## THE TYNTYLA ISOLATION HOSPITAL.

The conditions and arrangements at the Hospital remained unaltered during the year, the accommodation available for the reception and treatment simultaneously of a maximum of four infectious diseases amounting to 80 beds. Under ordinary conditions these are allotted to typhoid fever, diphtheria and scarlet fever as follows:—

	Ordinary Beds.	Observation Beds.
Diphtheria ... ..	20	2
Typhoid Fever ... ..	20	2
Scarlet Fever ... ..	34	2
	—	—
	74	6

There is in addition accommodation for eight or ten patients in the small building formerly serving as the isolation hospital for the whole area.

The total number of patients admitted into the hospital in the course of the year 1920 amounted to 577, this being the largest number accommodated in any one year. The numbers for the seven immediately preceding years were 388, 179, 231, 385, 441, 344 and 398 respectively.

The following table furnishes a summary of the number of cases treated, the number of deaths from each disease and the fatality which resulted from each of the diseases during 1920.

	No. of Cases.	No. of Deaths.	Mortality per cent.
Diphtheria ... ..	130	6	4.6
Typhoid Fever ... ..	6	*3	50.0
Scarlet Fever ... ..	438	7	1.6
Cerebro-Spinal Fever ...	3	—	—
	—	—	—
Totals ...	577	16	2.8

\*Of the three deaths included in the above figures relating to typhoid fever only one was certified as having

been caused by that disease, the other two having been ascribed to pneumonia uncomplicated by any other disease, further observation of the cases at the hospital having served to exclude typhoid fever.

Below is given a table to show the mortality-rate of hospital-treated cases as compared with that of patients treated at their own homes and also the case-mortality for the whole area, both groups of cases included.

	Whole District.			Hospital Cases.			Rest of Dist. (Hospital excluded.)		
	Cases	Deaths	Mortality per cent.	Cases	Deaths	Mortality per cent.	Cases	Deaths	Mortality per cent.
DIPHTHERIA (including membranous croup) ...	258	24	9·3	130	6	4·6	128	18	14·1
TYPHOID FEVER (including continued fever) ..	5	2	40·0	4	1	25·0	1	1	100·0
SCARLET FEVER ...	1164	29	2·5	438	7	1·6	726	22	3·0
CEREBRO-SPINAL FEVER	7	3	42·9	3	0	0	4	3	75·0
Totals.. ..	1434	58	3·3	575	14	2·4	859	44	5·1

The above figures do not include two cases notified and admitted to hospital as suffering from typhoid fever and later certified as having died from pneumonia.

Each district ward, to the extent given in the sub-joined table, contributed to make up the total number of patients admitted to the hospital.

Ward.	RECOVERED CASES.				FATAL CASES.			
	Diph-theria.	Typhoid Fever.	Scarlet Fever.	Cerebro-Spinal Fever.	Diph-theria.	Typh'd Fever.	Scarlet Fever.	Cerebro-Spinal Fever.
1	2	1	88	0	2	0	1	0
2	12	0	27	0	0	0	1	0
3	22	1	24	0	1	0	0	0
4	23	0	58	0	2	0	2	0
5	15	0	20	0	0	0	1	0
6	8	0	92	0	0	1	2	0
7	7	0	11	0	0	6	0	0
8	14	0	27	3	0	1	0	0
9	13	1	51	0	1	1	0	0
10	8	0	33	0	0	0	0	0
Totals	124	3	431	3	6	3	7	0

The average time spent in hospital by recovered cases was 37 days in the case of diphtheria (with extremes varying from 14 to 203 days) 31 in the case of typhoid fever (between the limits of 21 and 44), 42 in the case of scarlet fever (with extremes of 15 and 195 days) and 39 in the case of cerebro-spinal fever (with limits of 32 and 49 days). For the cases which terminated fatally the average time in hospital was 12 days in diphtheria (from 1 to 45 days), 4 days in typhoid fever (from 1 to 10 days), and 12 days in scarlet fever (1 and 45 days respectively).

The year 1920 saw the attainment of the highest point reached in the cost of living since the outbreak of the war, the maximum record being a percentage increase of 176 in the month of November. It has continued impracticable to contract with tradesmen for the supply of necessaries for the hospital except in the case of one or two articles such as milk and meat and even in these instances allowance had to be made for market fluctuations in the course of the period involved. In view of these facts an increase of the maintenance rate per patient per week was unavoidable and the rate of £2 9s. 2d. for 1920 (including the cost of repairs, renewals of stock and painting amounting in the aggregate to £1,021) or £2 3s.

without these items, compares not unfavourably with that of £1 16s. 6d. for the previous year when the cost of living was lower by 34 per cent. The relatively large number of patients accommodated at the hospital during the year helped to prevent a still higher rate of maintenance and much credit is due to the Matron (Miss R. E. Smith), assisted by the resident staff, for the unflagging and devoted attention which she gives to the interests of the institution whose needs she now knows so well how to meet without undue waste and with satisfaction to the patients and their friends.

## STATEMENT OF EXPENDITURE IN 1920.

	£	s.	d.
Salaries and Wages ... ..	1916	2	0
Health and Unemployment Insurance			
Contributions ... ..	28	12	10
Bread ... ..	251	12	0
Eggs ... ..	34	6	1
Fish ... ..	98	6	6
Fruit and Vegetables ... ..	226	17	5
Milk ... ..	819	14	2
Meat ... ..	738	1	9
Groceries ... ..	816	19	8
Stimulants (Brandy, etc.) ... ..	15	3	0
Drysaltery (Soap, Polishes, etc.) ... ..	140	10	11
Drugs, Instruments, etc. ... ..	365	13	5
Methylated Spirits, Turpentine, etc. ... ..	7	16	11
Gas ... ..	70	19	11
Electricity ... ..	182	15	10
Water ... ..	44	10	2
Gas, Water and Electricity Repairs ... ..	32	13	6
Fuel ... ..	613	6	3
Horse Feed, Shoeing, Saddlery, etc. ... ..	134	17	9
Advertisements ... ..	5	17	9
Stationery, Printing, etc. ... ..	60	4	1
Postages, Fares and Carriage ... ..	10	2	10

## Statement of Expenditure in 1920—continued.

	£	s.	d.
Telephone Charges (Maintenance etc.)	...	13	10 0
Boiler Insurance...	...	6	16 0
General District Rate	...	82	10 0
Poor Rate	...	112	10 0
Crockery, Drapery, etc.	...	83	18 3
Ironmongery	...	21	18 6
Brushes, etc.	...	20	7 8
Ambulance Repairs	...	159	8 6
Repairs to Cart	...	4	16 6
Repairs to Steam Boiler...	...	65	15 2
Machinery Repairs and Renewals	...	3	19 10
Sundries	...	13	13 9
		<hr/>	
		£7204	8 11
General Repairs	...	79	13 3
Linen	...	416	9 8
Painting	...	525	0 0
		<hr/>	
		<u>£8225</u>	<u>11 10</u>

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## PENRHYS ISOLATION HOSPITAL.

The Penrhys Isolation Hospital, with accommodation for 20 patients in two separate blocks, has been designed and erected for the reception and treatment of one or more cases of small-pox and is always held ready for such use at short notice.

Fortunately no case of this disease was introduced into the district throughout the year so that the occasion for the use of the hospital for this purpose did not arise.

## SCAVENGING AND REFUSE DISPOSAL.

During 1920, the collection and disposal of the house refuse were carried out under the same unsatisfactory conditions in relation to thoroughness, regularity and frequency as in recent years. The total cost per house went up from 16/2 in 1919 to 21/10.6 in 1920, the cost of living, labour and material having reached during the year the highest points yet attained since the outbreak of war. There was not a corresponding improvement in the nature of the service rendered, much forbearance in dealing with the defaulting contractors having had to be exercised under the difficult conditions which existed. The refuse is disposed of either at the Council's Destructor and Electricity Works at Dinas under the supervision of Mr. J. M. Bowman, the Electrical Engineer, or by depositing it at one of half a dozen tips or refuse depôts scattered throughout the district.

According to information obtained from the department of the Surveyor and Engineer to the Council the total cost of the collection of house refuse and of its cartage to the various tips or to the destructor amounted during the year ended September 30th, 1920, to £30,986 12s. 10d., including the cost of dealing with scavenging districts 8, 9, 10, 11, 16, 19, 20, 21, 22 and 23, which are attended to by the Council by direct labour. The total amount is equivalent to an expenditure of 21/10.6 per house as compared with 6/-, 5/6, 4/11, 4/4, 4/6, 6/10.7, 4/10, 5/2, 5/3.4, 4/9.4, 6/2.1, 7/0.4, 7/0.9, 8/-, 8/8.7, 11/2, 12/6 and 16/2 for the years 1901-2 to 1918-19 respectively.

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## DRAINAGE AND SEWERAGE.

With the exception of the sewage from a relatively few houses, the scheme of sewage disposal within the district is satisfactory. The main sewer, which was laid

in 1892 by the Joint Board of the Pontypridd and Rhondda Urban District Councils, discharges into the sea between Cardiff and Newport after running a course of over 17 miles. Owing to underground workings and the irregular conformation of the district subsidence is fairly general and the consequent damage done to the sewers, in common with other pipes laid in the ground, is in places considerable. The work in the form of the relaying of a long length of the Council's main sewer at Hafod at the lower end of the district, referred to in the report for the previous year as having suffered from this cause, is being proceeded with and when completed will serve to obviate the discharge into the river of a considerable volume of sewage. A considerable length of the new sewer is being laid on pillars placed in or by the side of the river bed and will in this position offer the dual advantages of being at a sufficiently low level to be available for all the houses in the district and of being easily observable and accessible in case of any damage or defect arising from any cause.

The number of houses within the Urban District still unconnected with the sewerage system amounts to 277, the position being unchanged since the end of the preceding year. This number is now comparatively small and is the result of reductions which have taken place year by year from the total of 4,290 unconnected houses which existed in 1897. The distribution of those still remaining unconnected is shown in the sub-joined table:—

Sanitary District No. 1	contains	21	unconnected	houses.
„	„	2	„	12
„	„	3	„	58
„	„	4	„	63
„	„	5	„	53
„	„	6	„	70

The extent and character of the means of excrement disposal throughout the Rhondda Urban District at the

end of 1920 are set out in the appended table, which is a summary compiled from the returns and reports furnished periodically by the sanitary inspectors.

No. of Privies with fixed receptacles (middens, cesspits) ... ..	52
No. of Privies with moveable receptacles (pails)	81
No. of Water Closets (fresh water, cistern-flushed)	24,519
No. of Water Closets (waste water) ... ..	—
No. of Water Closets (hand flushed) ... ..	3,380

Improvements steadily proceeded with from year to year serve to transfer some houses from the less to the more satisfactory groups. Thus in the course of the year under review there was such a transference of 97 houses from the group possessing hand-flushed to that with cistern-flushed conveniences.

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## SANITARY INSPECTION OF DISTRICT.

The number of inspections and re-inspections made during the year amounted to 40,878. These were made up as follows:—

Inspections under the Housing, Town Planning, &c. Acts ... ..	3,225
Cases of Infectious Disease investigated ... ..	1,579
Re-visits to:—	
Infected Houses, including disinfections ...	8,187
Unabated Nuisances and Unremedied Defects ...	24,553
Slaughter Houses ... ..	990
Lodging Houses ... ..	484
Bakehouses ... ..	498
Dairies ... ..	204
Factories and Workshops ... ..	541
New Buildings (drains of) ... ..	273
Special complaints received ... ..	344

Of the 4,059 notices served under the several Acts relating to the abatement of nuisances or for the contravention of bye-laws during the year, 2,875 were preliminary or intimation notices, while the remaining 1,184 were statutory notices, 132 of which remained un-complied with at the close of the year. The notices referred to in this paragraph are in addition to those mentioned in the appendix to the section below upon Housing Conditions.

As one of the results of these inspections it was considered necessary to institute legal proceedings in 37 instances under the Public Health Acts or the Council's Bye-laws (see page 72).

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## PREMISES AND OCCUPATIONS CONTROLLED BY BYE-LAWS OR REGULATIONS.

There are 397 premises in the district which are controlled by Bye-laws and Regulations. The number and character of such premises are given in table 52 of this report (cf. Appendix).

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## HOUSES LET IN LODGINGS.

Strictly speaking, there are no houses let in lodgings throughout the Urban area.

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## OFFENSIVE TRADES.

No offensive trades have been established within the Rhondda Urban District with the written consent of the Council under Section 112 of the Public Health Act, 1875.

## COMMON LODGING-HOUSES.

The number of registered common lodging-houses in the district remained the same as in the previous year. There are ten of these establishments in the district, one at Pentre, six at Ystrad, one at Penygraig and two at Dinas, the total providing accommodation for 387 persons.

Frequent visits of inspection are paid to all the lodging-houses by Chief Inspector J. Towy Thomas and by Inspectors D. B. Davies and Gwilym Griffiths, in whose districts all the lodging-houses are situated. Speaking generally, they were found to be conducted satisfactorily. All houses are registered for a period of twelve months, in accordance with the provisions of the Rhondda Urban District Council Act, 1905.

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## UNDERGROUND SLEEPING-ROOMS.

Subsequent to the passing of the Housing, Town Planning etc., Act, 1909, the Council submitted Regulations to the Local Government Board, in pursuance of Section 17 (7) of the Act, which were approved and received the Board's consent on the 24th of November, 1913. The outbreak of war and the resulting housing conditions made their application to the considerable number of under-tenements affected by the Regulations practically impossible. One of these tenements, however, in respect of which a closing order was made, became vacant in the course of the year and was re-incorporated with the overlying tenement, the whole of the premises being thus converted into one dwelling-house the alteration involving the discontinuance of the use of the basement floor for sleeping purposes.

## REPORTS DURING THE YEAR.

In addition to the ordinary statistical matter the following subjects were dealt with in the reports placed before the Council during the year.

- Acute Polioencephalitis and Poliomyelitis.
- Approach to the Ynyshir Welfare Centre.
- Cerebro-Spinal Fever (2).
- Cinemas as a source of infection.
- Closing Orders in operation for three or more months (3).
- Condemned Houses not vacated by tenants.
- Condition of the district's cinemas.
- Condition of lanes in portions of the district.
- Death-rate for 1920.
- Disused Housing Accommodation in the district.
- Edward Street, Maerdy; ground movement.
- Encephalitis Lethargica (3)
- Fair Oak, Trehafod, sanitary condition.
- Home Helps.
- Hospital Repairs and Painting (3).
- Houses Unfit for human habitation (4).
- Houses without a proper water supply (4).
- Housing (Additional Powers) Act, 1919.
- Increase of Rent and Mortgage Interest (Restrictions) Act, 1920.
- Infantile Mortality-rate for 1920.
- Milk Supply, late and irregular delivery.
- Ministry of Health (Temporary Relaxation of Building Bye-laws) Regulations, 1920.
- Motor disinfecting van.
- Nuisance arising from Smoke and Noxious Vapours.
- Oakland Terrace, Ferndale; ground movement.
- Payments by Instalments in respect of repairs to houses carried out by the Council.
- Prevalence of Scarlet Fever (3).
- River Pollution.

Scarlet Fever; sources of infection.

Slaughterhouse, Application for licence.

Supervision of children or sailors, soldiers and airmen.

Supply of milk below cost price (2).

Theatres, Music Halls, Cinemas, &c. (2).

Use of dwelling-houses for other than dwelling purposes.

Wages of hospital workmen.

Water Supply of Clydach Vale.

Water Supply of Trealaw.

Ystrad Road, Pentre, Specification for repair of Nos. 55 to 61 and No. 63.

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## ADOPTIVE ACTS.

The Infectious Disease (Notification) Act, 1889; The Infectious Disease (Prevention) Act, 1890; and the Public Health Acts (Amendment) Act, 1890, Part III., were adopted by the Rhondda Council from January 1st, 1894, and the Notification of Births Act, 1907, from April 28th, 1909.

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## UNSOUND FOOD.

During the year, the following were condemned as unfit for the food of man, and their use for such purpose prevented:—

Beef	...	...	...	...	5197 lbs.
Bovine Organs	...	...	...	...	531 lbs.
Mutton...	...	...	...	...	215 lbs.
Lamb	...	...	...	...	46 lbs.
Bacon	...	...	...	...	950 lbs.

Sausage	...	...	...	...	42 lbs.
Poultry	...	...	...	...	64 lbs.
Corned Beef	...	...	...	...	743 lbs.
Corned Mutton	...	...	...	...	6 lbs.
Potted Beef	...	...	...	...	6 lbs.
Potted Meats	...	...	...	...	6 lbs.
Pork and Beans	...	...	...	...	1 tin.
Rabbits	...	...	...	...	68
Tongue...	...	...	...	...	9 tins.
Fish	...	...	...	...	2358 lbs.
Crab	...	...	...	...	2 tins.
Herrings	...	...	...	...	3 tins.
Lobster...	...	...	...	...	6 tins.
Prawns...	...	...	...	...	3 tins.
Salmon...	...	...	...	...	72 tins.
Sardines	...	...	...	...	4 tins.
Butter	...	...	...	...	31 lbs.
Cheese	...	...	...	...	63 lbs.
Cocoa	...	...	...	...	1 tin.
Cocoa and Milk	...	...	...	...	1 tin.
Coffee and Milk	...	...	...	...	3 tins.
Condensed Milk	...	...	...	...	575 tins.
Currants	...	...	...	...	215 lbs.
Eggs	...	...	...	...	2017
Jam	...	...	...	...	3 lbs.
Potatoes	...	...	...	...	2240 lbs.
Rennet	...	...	...	...	1 bottle.
Syrup	...	...	...	...	1 tin.
Tomatoes	...	...	...	...	659 tins.
Apricots	...	...	...	...	14 tins.
Grapes	...	...	...	...	1 tin.
Fruit	...	...	...	...	32 tins.
Peaches	...	...	...	...	20 tins.
Pears	...	...	...	...	52 tins.
Pine Apple	...	...	...	...	25 tins.
Strawberries	...	...	...	...	1 tin.

## Summary of Police Court Proceedings during 1920.

No.	COURT.	OFFENCE.	RESULT.
1	Porth	Employing a child under 16 years of age in street trading after 9 p.m.	Dismissed
2	Porth	Employing a Shop Assistant on weekly half-holiday ...	Payment of costs, 5/-
3	Porth	Carrying on the trade of House Furnishers in a place not being a shop, after closing time ...	Dismissed
4	Ystrad	Shop open after closing time ...	Fined £1
5	Porth	Failing to exhibit notice re Shop Assistants' weekly half-holiday ...	Fined 15/-
6	Porth	Failing to exhibit notice as to hours of employment of a young person	Fined 15/-
7	Porth	Failing to exhibit notice re Shop Assistants' weekly half-holiday ...	Fined £1
8	Ystrad	Shop open after closing time ...	Fined £1
9	Ystrad	Failing to exhibit notice re Shop Assistants' weekly half-holiday ...	Payment of costs 6/-
10	Ystrad	Selling Salt after closing time in a place not being a shop ...	Bound over for 12 months in the sum of £5 not to repeat the offence
11	Ystrad	Selling Salt after closing time in a place not being a shop ...	Fined 15/-
12	Porth	Failing to abate nuisances ...	Payment of costs 3/6
13	Porth	Failing to abate nuisances	Abated
14	Ystrad	Failing to abate nuisances ...	Abated; payment of costs 7/-
15	Ystrad	Shop open on weekly half-holiday	Fined £1
16	Ystrad	Failing to exhibit notice re Shop Assistants' weekly half-holiday ...	Fined 10/-
17	Ystr ad	Failing to abate nuisances ...	Ordered to abate in 14 days, penalty of 10/- per day in default
18	Ystrad	Employing a child under 16 years of age in street trading on Sunday	Fined 10/-
19	Ystrad	Employing a child under 16 years of age in street trading on Sunday	Fined 10/-
20	Porth	Failing to abate nuisances ...	Abated; payment of costs 3/6
21	Ystrad	Shop open after closing time ...	Fined 15/-
22	Ystrad	Shop open after closing time ...	Fined 15/-
23	Ystrad	Exhibiting goods outside shop after closing time ...	Payment of costs 5/-
24	Ystrad	Failing to exhibit notice re Shop Assistants' weekly half-holiday ...	Fined 10/-
25	Porth	Failing to exhibit notice re Shop Assistants' weekly half-holiday ...	Payment of costs 5/-
26	Porth	Failing to exhibit notice re Shop Assistants' weekly half-holiday ...	Fined 10/-

Summary of Police Court Proceedings—*continued.*

No.	COURT.	OFFENCE.	RESULT.
27	Porth	Failing to exhibit notice re Shop Assistants' weekly half holiday ...	Fined 10/-
28	Ystrad	Depositing house refuse in river ..	Fined 10/-
29	Ystrad	Depositing house refuse in river ...	Fined 30/-
30	Porth	Depositing papers and shavings on ground abutting carriage way ...	Fined 2/6
31	Porth	Depositing house refuse on ground abutting carriage-way ...	Fined 5/-
32	Porth	Depositing house refuse on ground abutting carriage way ...	Fined 5/-
33	Porth	Depositing fish offal on river bank	Fined 10/-
34	Porth	Depositing house refuse in lane ...	Fined 5/-
35	Porth	Depositing house refuse in lane ...	Fined 5/-
36	Porth	Depositing house refuse on river bank ...	Fined 10/-
37	Porth	Selling provisions after 7 p.m. ...	Fined £1
38	Porth	Depositing refuse on ground abutting carriage-way ...	Fined 5/-
39	Ystrad	Depositing house refuse in lane ...	Fined 10/-
40	Ystrad	Depositing house refuse in river .	Fined 5/-
41	Ystrad	Depositing house refuse in river ...	Fined 10/-
42	Ystrad	Depositing house refuse in stream	Fined 15/-
43	Ystrad	Depositing refuse in stream ...	Fined 15/-
44	Ystrad	Selling provisions after closing time	Fined 15/-
45	Ystrad	Selling provisions after closing time	Fined 10/-
46	Porth	Shop open after closing time ...	Fined 10/-
47	Ystrad	Selling provisions after closing time	Fined £1
48	Porth	Selling provisions after closing time	Fined £2
49	Ystrad	Employing a child under 16 years of age in street trading on Sunday	Fined 15/-
50	Porth	Shop open after closing time ...	Payment of costs, 5/-
51	Porth	Shop open after closing time ...	Fined 10/-
52	Porth	Shop open after closing time ...	Fined £1
53	Porth	Shop open after closing time ...	Fined 10/-
54	Ystrad	Selling provisions after closing time	Fined 15/-
55	Ystrad	Carrying on the trade of house furnisher after closing time ...	Fined £1
56	Ystrad	Shop open after closing time ...	Fined 30/-
57	Ystrad	Shop open after closing time ...	Fined 10/-
58	Porth	Shop open after closing time ...	Fined 5/-
59	Porth	Carrying on the trade of a china dealer in a place not being a shop after closing time ...	Fined 30/-
60	Porth	Carrying on the trade of a china dealer in a place not being a shop after closing time ...	Fined 30/-
61	Porth	Depositing house refuse on ground abutting carriage way ...	Fined 5/-
62	Porth	Depositing house refuse on ground abutting carriage way ...	Fined 5/-

Summary of Police Court Proceedings—*continued.*

No.	COURT.	OFFENCE.	RESULT.
63	Porth	Depositing house refuse on ground abutting carriage-way ...	Fined 5/-
64	Porth	Depositing house refuse on ground abutting carriage-way ...	Fined 5/-
65	Porth	Depositing house refuse on ground abutting carriage-way ..	Fined 10/-
66	Ystrad	Depositing house refuse in lane ...	Fined 5/-
67	Ystrad	Selling Provisions after closing time	Fined £1
68	Ystrad	Failing to exhibit notice re mixed business ... ..	Fined £1
69	Ystrad	Shop open after closing time ...	Fined 10/-
70	Ystrad	Failing to exhibit notice re Shop Assistants' weekly half-holiday ...	Fined 15/-
71	Ystrad	Shop open after closing time ...	Fined 15/-
72	Ystrad	Wilful exposure in the street of four cases of Scarlet Fever ...	Fined £1 15/-
73	Porth	Failing to abate nuisances ...	Abated; payment of Costs
74	Ystrad	Selling Groceries after closing time	Fined £1
75	Ystrad	Selling Groceries after closing time	Fined 15/-
76	Porth	Selling Groceries after closing time	Fined £1
77	Porth	Failing to exhibit notice re mixed business ... ..	Fined 10/-
78	Porth	Shop open after closing time ...	Fined £1
79	Porth	Shop open after closing time ..	Fined £1
80	Porth	Shop open after closing time ...	Fined £1
81	Porth	Shop open after closing time ..	Fined £1
82	Ystrad	Selling Groceries after closing time	Fined 10/-
83	Ystrad	Shop open after closing time ...	Fined £2
84	Ystrad	Depositing house refuse into water course ...	Fined 7/6
85	Ystrad	Depositing house refuse in lane ..	Fined 7/6
86	Ystrad	Depositing house refuse on ground abutting carriage-way ...	Fined 7/6
87	Ystrad	Shop open after closing time ...	Fined £1
88	Ystrad	Shop open after closing time ..	Fined 10/-
89	Porth	Failing to exhibit notice re Shop Assistants' weekly half-holiday ...	Dismissed
90	Porth	Failing to exhibit a notice as to hours of employment of a young person ... ..	Dismissed
91	Ystrad	Selling Groceries after closing time	Fined 10/-
92	Ystrad	Failing to exhibit notice re mixed business ... ..	Payment of costs 5/-
93	Ystrad	Selling Provisions after closing time	Fined 10/-
94	Ystrad	Failing to exhibit notice re mixed business ...	Payment of Costs
95	Porth	Depositing refuse on ground abutting carriage way ..	Fined 2/6

Summary of Police Court Proceedings—*continued.*

No.	COURT.	OFFENCE.	RESULT.
96	Porth	Selling Groceries after closing time	Payment of costs 5/-
97	Ystrad	Employing Shop Assistant on weekly half-holiday ...	Payment of costs
98	Ystrad	Failing to exhibit notice re Shop Assistants' weekly half-holiday ...	Fined 10/-
99	Ystrad	Failing to exhibit notice as to hours of employment of young person	Fined 5/-
100	Porth	Depositing Colliery refuse in river	Payment of costs 5/-
101	Ystrad	Shop open after closing time ...	Dismissed
102	Ystrad	Carrying on the trade of Watch-maker and Jeweller in a place not being a shop after 8 p.m. ...	Fined £1
103	Ystrad	Selling provisions after closing time	Fined £1
104	Ystrad	Selling provisions after closing time	Fined 5/-
105	Ystrad	Shop open after closing time ...	Dismissed
106	Ystrad	Employing Shop Assistant on Weekly half-holiday ...	Fined 5/-
107	Ystrad	Failing to exhibit notice re mixed business ...	Fined £1
108	Porth	Depositing house refuse on ground abutting carriage way ...	Discharged with a caution
109	Ystrad	Failing to exhibit notice re mixed business ...	Fined 10/-
110	Porth	Selling Groceries after closing time	Payment of costs 5/-
111	Porth	Depositing house refuse on ground abutting carriage way ...	Dismissed
112	Ystrad	Depositing house refuse in lane ...	Payment of costs 5/-
113	Ystrad	Depositing house refuse on carriage way ...	Payment of costs 5/-

An analysis of the foregoing statement of Police Court proceedings during the year shows that 72 actions were instituted for offences under the Shops Acts, 4 for offences under the Employment of Children Act, 1903, and 37 under the Public Health Acts or Bye-laws made thereunder, viz.:—30 for depositing refuse in rivers or streams, on river banks, in lanes or on carriage-ways or ground abutting carriage-ways, 6 for failure to abate nuisances (involving 8 premises), and 1 for the wilful exposure of four cases suffering from infectious disease (scarlet fever).

## DISINFECTION.

The "Equifex" Steam Disinfector, installed at the Isolation Hospital at Ystrad, is used for disinfection purposes for the whole of the area. When required, aerial disinfection is usually carried out by means of formaldehyde gas or sulphur dioxide, or a combination of both, supplemented, in exceptional cases, by a spray of some suitable liquid disinfectant.

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## WATER SUPPLY.

In the main, there has been no substantial alteration in the schemes of water supply throughout the district in 1920. The two chief sources of supply are that of the Council from Llynfawr Reservoir which supplies the upper three-fourths of Rhondda Fawr Valley and that of the Pontypridd and Rhondda Joint Water Board, with its two reservoirs at the head of the Rhondda Fach Valley, which supplies that valley as well as the lower fourth of the larger valley and the main valley from Porth to Hafod.

Each of these two supplies is supplemented within its area of distribution by a number of other and independent supplies. Thus within the Council's area Caroline Street, Blaenrhondda, portions of Cwmparc, Ystrad, Llwynypia and Clydach Vale, with an aggregate of over 2,000 houses, are supplied from sources which are independent of the Council. Within the Water Board's area there are similar but smaller aggregations of houses furnished with water from private sources at Blaenllechau, Pontygwaith, Ynyshir, Hafod, Cymmer and Trebanog. In both areas these groups are being gradually reduced in number or size as opportunity offers or as the existing supplies fail in quantity or quality to

such an extent as to render interference imperative. In two important instances within the Council's area initial or preliminary steps have been taken towards the improvement of the water supply of certain localities but these have not advanced sufficiently far to permit the statement that such supplies were in fact improved in the course of the year under review. The installation of mechanical pressure filters to be set up at Fernhill for the improvement of the supply to Fernhill, Caroline Street, and Blaenrhondda was proceeded with but slowly owing to much delay experienced in obtaining the appliances but it is expected that the plant will be in operation before the end of 1921.

Again the water supply of the upper end of Clydach Vale will very materially be affected in the near future by the result of Section 13 of the Rhondda Urban District Council Act, 1920. This clause repeals Section 26 of the Council's Act of 1899, which conferred a certain status upon the Cambrian Collieries Limited, the upper and larger portion of Clydach Vale having for many years been dependent for its water supply upon the Colliery Company. In anticipation of the Act of 1920, the Council on the one side and the Company on the other held many conferences for the purpose, ultimately attained, of arriving at a mutually satisfactory agreement before the consideration of the repealing clause by Parliament so that no opposition was offered during the consideration of the Section. It now remains for the economic conditions to become sufficiently favourable to enable the Council to expend the large amount of money required to carry out the approved scheme submitted by Mr. Octavius Thomas, the Council's Water Engineer, When provided, the new supply in accordance with the scheme will serve to remove a constant source of anxiety to the Council, the supply hitherto provided by the Colliery Company being unsatisfactory owing to exceptional liability to pollution at the source, an insufficiency

or want of storage, the absence of adequate means of purification and irregular and uncertain distribution to the consumers.

The analyses and examinations of water derived from the Council's supply, which have periodically been carried out at the Glamorgan County Laboratory, have given satisfactory results throughout the year, the water ranging from 2.4 to 3.4 parts per 100,000 in total hardness, the chlorine content not exceeding 0.8 parts per 100,000 and bacillus coli organisms being absent in 10 c.c. or smaller amounts. No lead or other poisonous metal was discovered in the water on analysis on any occasion throughout the year.

It is apparent that owing to the almost entire suspension of building throughout the district new consumers can only be drawn from those hitherto dependent upon private sources for their supplies. During the year 25 new services were laid of which 24 were formerly supplied from sources other than the Council's. The consumption per head of the population was 19.67 gallons per day of which 1.63 gallons were supplied for trade purposes.

It was not necessary to place any section of the Council's consumers on short supply during the year except for very short periods owing to burst mains or other unavoidable and unforeseen occurrences.

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## ADMINISTRATION.

The constitution of the staff of the Health Department underwent some alterations in the course of the year. The changes consisted of the appointment as Assistant Medical Officer of Miss Caroline J. MacLennan

instead of Mr. William A. Murphy, who resigned on his appointment as Medical Officer of Health for the Ogmores and Garw Urban District; the appointment as assistant sanitary inspectors of Messrs. William J. Evans and Idris T. Watkins to succeed Messrs. Daniel W. Jones and David J. Owen, the former's lamented death after very efficient service and the latter's resignation to take up a post under the Welsh Housing Department having created the vacancies; and the selection of Misses Gwen Jones, Kate Evans and Ada J. Woosnam as health visitors to succeed Misses Elizabeth Terry, Sophie Thomas and Madeleine John, the last-mentioned having resigned to become a member of the Staff of the Welsh Housing Department after eleven years of pioneer and very efficient service under the Council.

There was no increase in the number of the staff of the department but the changes recorded naturally resulted in a certain amount of dislocation as well as reduction in the work not only while the new members were getting accustomed to their new duties but also owing to the long intervals sometimes intervening, for various reasons, between the resignation of one officer and the appointment of his or her successor.

While the post-war conditions are, in some directions, proving more difficult than during the war period itself owing especially to the need and the desire to recover the ground lost during the war as soon as possible with on the whole a more unsettled and less efficient staff with which to co-operate, it is a matter for satisfaction that none of the changes has been directly due to the sacrifice of life in the war. Under the circumstances mentioned special recognition of the value of the co-operation and assistance of those not directly involved in the changes is due.

## FOOD SUPPLIES.

The Sale of Food and Drugs Acts are administered throughout the Rhondda by the Glamorgan County Council, the District Council not being a local authority for this purpose. There remains for the District Council the administration in this behalf of the Dairies, Cowsheds, and Milkshops Orders; the powers under Section 117 of the Public Health Act, 1875, and Section 28 of the Public Health Acts Amendment Act, 1890; and the Regulations relating to the control and supervision of slaughterhouses and bakehouses. Nine of the Council's inspectors possess the special meat certificate granted by the Royal Sanitary Institute, special opportunities having been afforded many of them to attend the course on meat inspection given by the Glamorgan County Council some years ago.

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### MILK.

The persons now engaged in the production, sale, or distribution of milk within the district consist of the following classes in the numbers indicated:—

Cowkeepers ... ..	12
Cowkeepers and Purveyors of Milk ...	32
Purveyors of Milk and Milkshop keepers	129

As compared with the corresponding figures for the previous year, the first group shows a decrease of eight, whereas the second and third groups have increased by two and fifteen respectively. In opposition to these statistics there was an increase in the amount of milk produced within the district of 41 gallons per diem, or 15.8 per cent., whereas the amount imported has decreased to the extent of 20 gallons per diem, or 0.6 per cent., as compared with the previous year.

It is estimated that all the 228 cows within the district yielded a daily average of 299 gallons in the course of the year, while the additional quantity of 3,143 gallons is daily imported from outside the area. The total quantity of cow's milk thus consumed in the district amounted to 1,269,772 gallons and is equivalent to 0.149 pint per diem for every individual, or a decrease of .004 pint on the previous year, the amount per person for the five immediately preceding years (1915 to 1919) being, in fractions of a pint, 0.14, 0.13, 0.20, 0.183 and 0.153, respectively.

The 173 premises concerned with the production and distribution of milk in the district were periodically visited during the year by the district inspectors under whose supervision they are placed.

The majority of the 46 cowsheds, owned by 44 cow-keepers, now in occupation throughout the district are situated on farms which are scattered over the hills skirting the two valleys. Many of them are of primitive construction and cannot be considered well adapted for the production of clean milk. Much attention has been paid to the remedying of defects and in securing improvements as regards air space, flooring, walls, roofs and drainage. Speaking generally all the premises are in as good a sanitary condition as their structures and surroundings permit.

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### MILK (MOTHERS AND CHILDREN) ORDER. 1919.

On November 12th, 1919, the Council adopted a recommendation of the Health Committee that authority be given to supply milk for expectant and nursing mothers and for children under five years of age at less

than cost price or free to necessitous cases. In virtue of this authority milk was supplied to 49 families during the remainder of the year at an average cost of £5 8s. per week, the proportion of mothers (usually nursing) to children being about 15 per cent., the remainder being fairly equally divided between babies under one and children between one and five years of age.

Only 7 per cent. received the milk at half cost the remaining 93 per cent. obtaining a gratuitous supply. The milk distributed was in the dried form and none was given except after inquiry and report by a health visitor concerning the circumstances of the applicants and only in suitable cases as determined by the Medical Officer in attendance at the Welfare Centres.

The system worked laboriously but satisfactorily as it was difficult for any one to impose upon those responsible for its administration and there were no vexatious restrictions upon its advantages being conferred upon really needy cases. The amount of dried milk sold at cost price per week through the medium of the Centres under the control of the Medical Officer in charge was about 270 lbs., equivalent in value to £30 sterling.

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## MEAT.

The existence of 28 private slaughterhouses at which the whole of the slaughtering within the district is carried on and to which 990 visits of inspection were paid during the year, renders efficient meat inspection impossible. Although the possession of a special qualification in meat inspection by many of the inspectors is of considerable advantage in checking the sale of unsound meat and other foods at the shops throughout the district, it is not practicable to inspect all the meat before it leaves the slaughterhouses as the slaughtering

is done at approximately the same time and on the same days in all of them. Under the circumstances the Department has to depend upon the restraining influence which irregularly paid visits of inspection exercise upon trade in unwholesome or diseased meat. The large quantity of dead meat introduced into the district cannot be inspected until it reaches the shops for the purpose of being sold to the consumer. The slaughterhouses are small in size and are generally well kept but structurally and in reference to their surroundings some of them call for abandonment. The powers possessed by the Council under their Act of 1910 to acquire by agreement any slaughterhouse within the district and to agree with the owner, lessee and occupier of any slaughterhouse for the abolition of slaughtering therein on such terms and conditions as may be arranged between the parties concerned cannot be applied under present economic conditions but until this step will be taken and supplemented by the erection of a suitable municipal slaughterhouse the control of the quality of the meat slaughtered in the district cannot be thorough and satisfactory.

Altogether a total of 1,616 lbs of meat and 130 lbs of offal were destroyed as showing the presence of tuberculosis, the meat being surrendered for destruction by the owners.

The status of the slaughterhouses in the district is set out in the following table:—

			In 1914.	In Jan. 1920.	In Dec. 1920.
Registered	...	...	8	3	3
Licensed	...	...	29	25	25
			—	—	—
			37	28	28

## OTHER FOODS.

There are 147 bakehouses within the district; they are small and the number of persons employed are few. These received 498 visits of inspection during the year. There are no underground bakehouses as defined in the **Factory and Workshop Act, 1901.**

No case of food poisoning was recorded in the district during the year. The action taken upon the consideration by the Health Committee of the Memorandum received from the Ministry of Health concerning outbreaks of food poisoning will be dealt with more appropriately in the report for 1921.

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## HOUSING.

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### I.—GENERAL HOUSING CONDITIONS.

1.—At the close of the year under review there were 28,321 houses in the district. It is estimated that of these 26,836 were of a type suitable for the accommodation of the working classes. Only one new house—in Ward 4—was erected and passed for occupation in the course of the year. Out of a total of 252 plans of various kinds approved by the Council in 1920 only 11 were of dwelling-houses.

Moreover it was considered necessary to issue closing orders in respect of 17 houses, and one closing order in respect of a cellar-dwelling tenement was determined, the overlying and underlying tenements having been combined to form one house, the original arrangement being thus restored.

Of the 17 closing orders made during the year under review, 13 were in respect of houses situated in Edward Street, Maerdy. The portion of this locality of which the upper end of Edward Street forms part became seriously disturbed by ground movement, generally believed to be due to the effect of colliery operations. The disturbance was so serious as to require the closure of 13 of the houses, some situated on each side of the street. The drainage arrangements of the western side of the street were so disturbed that the back areas of many houses were partially flooded with sewage and in one or two instances the condition had to be temporarily relieved by the formation of an open gutter through the houses into the street and in most of the other instances the occupiers were compelled to carry away the excess of sewage by means of buckets and other receptacles. In six instances the movement caused the collapse of the garden retaining walls, which were about 6ft. high at this point, with the result that the sanitary conveniences became inaccessible. Both the Council and the local Colliery Company carried out certain temporary ameliorative works such as drainage. The Council also, on the urgent representation of the Health Committee and in the entire absence of adequate housing accommodation in Maerdy or elsewhere within the urban area, decided to erect some temporary buildings out of material obtainable in the form of surplus war stores. Seven huts or bungalows were built at one end of Maerdy Recreation Ground and were occupied before the end of the year by the dispossessed tenants from the worst of the condemned houses in Edward Street. They are built of corrugated iron lined with matchboarding, brick columns being provided for the fireplaces and stacks. The accommodation consists of a commodious kitchen containing a small cooking range, 2 bedrooms, a scullery, pantry and sanitary conveniences. They are properly drained and sewerred and obtain their water supply from the mains of

the Joint Water Board. They are not artificially lighted. Their erection was a measure adopted under the stress of urgent circumstances and it was hoped that they would be recognized by the Ministry of Health as an approvable contribution to the Council's housing schemes. Recent information however indicates that no financial assistance will be received from the Ministry, especially in view of the ruthless curtailment of expenditure which the Ministry have felt called upon to advocate and to practise since these huts were erected. They cost approximately £400 each and are rented at 7s. 3d. each per week, the rates being payable by the Council. The occupants generally consider themselves comfortably housed, the chief grievance arising from the small size of the bedrooms and the inadequate protection against extremes of weather conditions (heat, cold and wet) which they afford.

If the seven huts at Maerdy be included, eight new dwelling-houses were passed for occupation during the year but as 17 were condemned as unfit, there was a nett decrease of 9 in the total number of houses available in the district.

The appended table sets out the number of houses passed for occupation from year to year since 1898:—

In 1898 there were 317 new houses passed for occupation.

„ 1899	„	157	„	„	„
„ 1900	„	148	„	„	„
„ 1901	„	187	„	„	„
„ 1902	„	334	„	„	„
„ 1903	„	483	„	„	„
„ 1904	„	594	„	„	„
„ 1905	„	317	„	„	„
„ 1906	„	879	„	„	„
„ 1907	„	827	„	„	„
„ 1908	„	829	„	„	„

In 1909	there were	1,025	new houses	passed for	occupation.
„ 1910	„	926	„	„	„
„ 1911	„	769	„	„	„
„ 1912	„	439	„	„	„
„ 1913	„	358	„	„	„
„ 1914	„	308	„	„	„
„ 1915	„	146	„	„	„
„ 1916	„	129	„	„	„
„ 1917	„	26	„	„	„
„ 1918	„	10	„	„	„
„ 1919	„	1	„	„	„
„ 1920	„	1	„	„	„

(plus seven huts at Mardy.)

The figures shown in the table require no comment except that, unfavourable though they are, they under-rate rather than exaggerate the progressive seriousness of the shortage of houses which recently has been taking place, for the number of houses actually available for the accommodation of the Rhondda community has been diminishing since 1918 owing to the excess of houses condemned as unfit for occupation over both the new houses passed for occupation and the condemned houses which have been rendered fit and re-occupied.

2.—(a) The population as estimated by the Registrar-General was 184,999 at mid-summer. The average annual increase of population for the five years before the war amounted to 3,495. Should the industrial prosperity of the district continue it is anticipated that the working class population will within the next three years increase by about 1,000, due to developments in the coal mining industry and the consequent immigration of that number into the district.

For some years the growth of the population exceeded the supply of new houses, and it is estimated that during the term of years mentioned (next three years) not

fewer than 3,400 additional houses will be required to meet the needs of the inhabitants of the district, due allowance being made for existing overcrowding, the "natural increase" of the population, the probable excess of immigration over emigration due to industrial development and the number of houses and tenements requiring closure owing to their unfitness for human habitation.

(b) The total number of houses which may be stated to have been provisionally approved for the Rhondda at the end of the year by the Ministry of Health under the Housing, Town Planning, &c., Act, 1919, was 284, of which 88 at Penygraig in the larger valley and 164 at Maerdy, at the head of the smaller valley, come under Section 1 and the remaining 32, situated in three localities in the larger valley, come under Section 12 (3) of the Act. Owing to inability to raise the required amount of money by Local Bonds or other means, contracts have been entered into only in respect of the last group of 32 and of 44 at Penygraig, the cost averaging approximately £1,000 a house. Eighteen of the 44 at Penygraig had been commenced at the end of the year, three contractors being independently engaged at the work. No effective steps have yet been taken towards the erection of the remaining 44 at Penygraig or of the 164 at Maerdy. The houses at Maerdy will be placed in two groups of 112 and 52 respectively, the larger group being apportioned to a site in Maerdy itself and the other group to a site adjacent to Maerdy cemetery situated between Maerdy and Ferndale. The latter is recognized as the better site and it is intended to build upon it first and lay-out plans for 52 houses have been submitted by Mr. Eli Taylor, the Council's Engineer and Surveyor, to the Ministry's Housing Commissioner at Cardiff for approval. It is not expected that all the 76 houses for which contracts have been let will be finished in the course of 1921.

Having regard to the length of time which the Council's housing schemes under Section 1 of the Housing, Town Planning, &c., Act, 1919, would take to materialize, a survey of the whole district was made by the Health Department for the purpose of ascertaining whether any unused premises were unnecessarily empty and, if so, whether their acquisition and, if needed, their adaptation by the Council under Section 12 of the Act would serve materially to add to the accommodation available in the district.

The premises which came under observation numbered 61 but it was concluded, on consideration of the circumstances attaching to each case, that it would not be worth while to entertain their acquisition by the Council in the case of 30 of them, among the reasons justifying such conclusion being their recent or pending occupation, their inaccessibility without serious interference with other parties and the great cost of adaptation required in relation to the accommodation which would be provided. It was estimated that the accommodation placed at the disposal of the Council if the remaining 31 premises were acquired would serve for the lodgment of 362 persons. Detailed investigations and estimates were made by Mr. E. Hazledine Barber, the Council's Surveyor, regarding some of these premises and the Housing Commissioner was consulted but the negotiations entered into with the owners did not lead to the acquisition by agreement of any of the premises before the end of the year under review.

## II.—OVERCROWDING.

The prevalence of overcrowding which existed even before the war has since become much more pronounced. Some instances undoubtedly occur where houses are wilfully overcrowded, either by the sub-letting of a

portion of a house or by the accommodation of an excessive number of lodgers and where the conditions do not extenuate the practice, but examples due to sheer force of circumstances owing to the great dearth of suitable accommodation are far more numerous. Houses intended originally for the accommodation of single families have thus become occupied in a very large number of cases by two or even more families per house. The systematic inspections that are being daily made for various reasons show conclusively that the proportion of houses thus utilized is greatly on the increase. The overcrowding thus occasioned can only be relieved by the erection of a sufficient number of new houses as already stated. Under these conditions no effective action towards the abatement of the overcrowding can be taken. During the year, 22 notices were served to abate overcrowding but in only three instances were the notices complied with, the institution of legal proceedings in order to enforce the abatement being considered unjustifiable in any of the remainder.

### III.—THE FITNESS OF HOUSES.

The housing accommodation in the district, generally speaking, cannot be classified as old, there being a preponderance of comparatively new houses which are fairly well built, usually of Pennant sandstone obtained locally. There is shown however a great lack of variety in the plan and elevation of the houses which generally are arranged in long terraces or streets relieved only by changes in gradient and aspect as the streets follow the irregular contour of the ground.

A small minority of the houses are furnished with baths, the type of house normal to the district consisting of parlour, kitchen, pantry, scullery, sanitary conveniences and coal house on the ground floor and three bed-

rooms on the first floor, the scullery and offices being usually arranged in the form of a one-storey projection.

The defects found in the inspected houses commonly consisted of defective walls, roofs, doors, deficient or defective yard paving, dilapidated floors, insufficient light and ventilation of bedrooms, dilapidated structure of W.C. and deficient or defective flushing appliances, defective eave shoots and down spouts, dirty condition of floors, walls and ceilings.

A great many of these defects could be attributed on the one hand to the deliberate neglect of their properties on the part of the worst type of owner or, on the other hand, to lack of skilled labour and the almost prohibitive price of materials on the part of the more conscientious owners.

In view of these factors militating against the restoration to a habitable condition and the maintenance in a proper state of repair of the district's houses generally, the Council, in pursuance of a policy previously decided upon, showed considerable activity in applying their powers under the Housing Acts, especially under Section 28 of the Housing, Town Planning, &c. Act, 1919. Thus out of a total number of 3,208 houses systematically inspected, 3,123 were considered as not in all respects fit for human habitation and were the subject of notices served upon the owners with the result that 294 were repaired without the necessity of further action by the Council. After the lapse of a suitable interval and after due notice to the owners, the Council's staff, under the direction and supervision of the Surveyor, entered 76 of the houses unattended to by the owners and carried out the work required to be done. In very many of these instances, the properties were very old and neglected, very dilapidated and in need of some structural alteration

or improvement. Consequently, under the conditions then obtaining, the outlay per house was necessarily and unavoidably heavy but the action taken obviated in many instances the adoption of the only alternative in the form of closure and the houses were thus preserved for the use of the community, each and every house thus saved being equivalent to a reduction to a like extent in the number of new houses required for the proper accommodation of the population.

Notice in respect of only one house was served under the Public Health Acts, the Council's activities having mainly been directed to the application of their powers under the Housing Acts, but 53 houses, regarding which notices had been served during the previous year, were attended to in the course of 1920.

The water supply, closet accommodation and refuse disposal in the district are dealt with in detail in previous sections of this report.

No representations were made in the course of the year under Part I. or Part II. of the Housing Act of 1890 as regards unhealthy areas and no complaints concerning such cases were received.

There are no registered houses let in lodgings throughout the urban district. In a locality such as the Rhondda the application of the Bye-laws relating to tents, vans and sheds is seldom called for except in the comparatively infrequent occasions when the district is visited by travelling shows.

## APPENDICES—STATISTICS FOR 1920.

## HOUSING CONDITIONS.

## 1. GENERAL.

1.	Estimated Population	...	...	...	184,999
2.	General Death-rate	...	...	...	12.1
3.	Death-rate from tuberculosis	...	...	...	.95
4.	Infantile Mortality	...	...	...	104
5.	No. of dwelling-houses of all classes	...	...	...	28,321
6.	No. of working-class dwelling-houses	...	...	...	26,836
7.	No. of new working-class dwelling-houses erected	...	...	...	*1

\*Also 7 huts at Maerdy for the accommodation of tenants displaced at Edward Street.

## 2. UNFIT DWELLING-HOUSES.

## I.—Inspection.

1.	Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	...	...	...	3,208
2.	No. of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910				17
3.	No. of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	...	...	...	17
4.	No. of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	...	...	...	3,123

II.—Remedy of Defects without service of formal Notices.

No. of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers ... Nil.

III.—Action under Statutory Powers.

A. Proceedings under Section 28 of the Housing, Town Planning, &c., Act, 1919.

1. No. of dwelling-houses in respect of which notices were served requiring repairs ... 3,122

2. No. of dwelling-houses which were rendered fit

(a) By Owners ... .. 294

(b) By Local Authority in default of Owners ... .. 76

3. No. of dwelling-houses in respect of which Closing Orders became operative in pursuance of declaration by owners of intention to close ... .. Nil.

B. Proceedings under Public Health Acts.

1. No. of dwelling-houses in respect of which notices were served requiring defects to be remedied ... .. 1

2. No. of dwelling-houses in which defects were remedied

(a) By owners ... .. 43

(b) By Local Authority in default of Owners ... .. 10

C.	Proceedings under Sections 17 and 18 of the Housing, Town Planning &c. Act, 1909.	
1.	No. of representations made with a view to the making of Closing Orders ... ..	17
2.	No. of dwelling-houses in respect of which Closing Orders were made... ..	17
3.	No. of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit	1
4.	No. of dwelling-houses in respect of which Demolition Orders were made ... ..	1
5.	No. of dwelling-houses demolished in pursuance of Demolition Orders ... ..	Nil.

### 3. UNHEALTHY AREAS.

Areas represented to the Local Authority with a view to Improvement Schemes under (a) Part I., or (b) Part II., of the Act of 1890:—

1.	Name of area... ..	Nil.
2.	Acreage ... ..	Nil.
3.	No. of working-class houses in area ...	Nil.
4.	No. of working-class persons to be displaced	Nil.

### 4. NUMBER OF HOUSES NOT COMPLYING WITH THE BUILDING BYE-LAWS

Erected with consent of local Authority under Section 25 of the Housing, Town Planning, &c., Act, 1919... ..

7

Huts at Maerdy  
(see Text).

### 5. STAFF ENGAGED ON HOUSING WORK WITH BRIEFLY THE DUTIES OF EACH OFFICER.

The time of four housing inspectors is devoted to duties under the Housing Acts and the Housing Regula-

tions, when they are not withdrawn for other purposes, and they are assisted by the six district Inspectors especially in connection with the execution of house repairs whether carried out by the owners or by the Council.

A considerable portion of the time of two clerks is also given to housing work.

The staff of men employed by the Surveyor in carrying out repairs under Section 28 of the Housing Acts of 1919 consisted at the end of the year of 1 supervisor, 10 stonemasons, 6 carpenters, 1 painter and 10 labourers.

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## RATS AND MICE (DESTRUCTION) ACT, 1919.

In March, 1920, the Glamorgan County Council delegated all its powers and duties under the Rats and Mice (Destruction) Act, 1919, to the Rhondda Council under the powers in that behalf contained in Section 2 (1) of that Act.

The administration of the Act was duly considered by the Health Committee of the Council. The evidence placed before them did not then justify a recommendation to appoint a special officer for carrying out the duties imposed by the Act, and it was decided to depend, for the time being, upon the information which the sanitary inspectors will be able to furnish regarding any exceptional prevalence of rats in any portions of the district. In no instance in the course of the year was the information received such as to indicate the necessity of taking action under Section 1 of the Act. The portions of the district whence reports of occasional or periodical prevalence are sometimes received are usually the surface workings of collieries, the authorities at which are well aware of the importance of organised attacks upon the pests when they become exceptionally troublesome.

## RAG FLOCK ACT, 1911.

Although arrangements have been made for the examination of samples of Rag Flock at the Cardiff and County Public Health Laboratory, an occasion for their application did not arise in the course of the year. Very little rag flock as such is used in the district, the industries or trades in which this material forms an important or essential article being carried on but to a slight extent in the district.

## SHOPS ACTS, 1912 AND 1913.

Number of Shops in district in 1919	...	...	2,537
New Shops established in 1920	...	...	399
Shops removed from Register in 1920	...	...	291
Net Increase of Shops in 1920	...	...	108
Number of Shops in district in 1920	...	...	2,645
Number of Shops subject to Local Closing Orders	...	...	1,223
Number of Shops in which Assistants are employed	...	...	1,074
Number of Shops exempted from Weekly Half-Holiday Order	...	...	1,352
Number of Shops in which Assistants are employed that are exempted from Weekly Half-Holiday Order	...	...	350
Number of Assistants in exempted Shops...	...	...	657
Legal Proceedings taken under Shops Acts during 1919	...	...	72

As may be seen by reference to the section "Police Court Proceedings," 72 persons were proceeded against, during the year, for offences against the provisions of the

Shops Acts or the Closing Orders made thereunder. Principal offences were the sale of provisions and failure to close premises after prohibited hours and the non-exhibition of statutory notices.

There was a net increase of 108 shops in the district during the year. On reference to the accompanying table it will be seen that this difference is the result, not of the mere establishment of 108 new shops throughout the district during the year the already existing ones remaining the same, but of the balance between 291 shops which ceased to exist and 399 newly established ones. It will therefore be appreciated that the changes so frequently taking place require constant surveillance on the part of the two inspectors. The number of prosecutions is evidence of the closer supervision now rendered possible by the return to duty, after the war, of Inspector T. Osborne, the whole of the urban district having during his absence received the attention of only his colleague whose services had been retained.

There was during the year an increase of the male assistants employed from 1,087 to 1,139 but a decrease of females from 1,512 to 1,478 the net increase being only eighteen.

Towards the end of the year the Shops (Early Closing) Act, 1920, was issued and had the effect of continuing until the end of 1921 the General Early Closing Orders for Shops which had been made under No. 10B. of the Defence of the Realm Regulations. The enactment also provides that the Order shall cease to be an Order and shall be administered in the area of any local authority as if it were a Closing Order made and confirmed under the Shops Act, 1912. Hence the duty of enforcing the Order, which has hitherto rested with the Police Authorities, has been transferred to the local authorities under

# Report of the Shops Inspectors for the Year 1920.

TRADE.	WEEKLY HALF-HOLIDAY.												Number subject to Local Closing Orders	Legal Action Taken.						
	Shops entered on Register						Shops removed from Register.								Total Number of Shops.	Number of Shops in which Assistants are employed.	Number of Assistants employed.			
	Shops removed from Register.			Shops entered on Register			Males.		Females.		Males.						Females.			
	Under 18	Over 18	Under 18	Over 18	Under 18	Over 18	Under 18	Over 18	Under 18	Over 18	Under 18	Over 18					Under 18	Over 18		
Monday	Thursday	Saturday	Exempt.	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday					
Bazaars and Fancy Dealers...	39	17	9	1	17	9	1	20	9	17	1	17	1	142	80	3	143	13		
Boot and Shoe Dealers ..	17	143	52	5	143	52	17	18	38	142	1	142	1	169	121	3	169	13		
Butchers and Meat Purveyors ..	4	33	22	6	33	22	14	19	16	33	33	33	33	169	56	1	169	13		
Chemists, Herbalists and Drug Stores ..	33	169	68	23	169	68	1	21	87	169	169	169	169	7	26	58	169	9		
Confectioners and Bread Dealers ..	1	16	4	1	16	4	1	26	7	16	16	16	16	2	5	5	16	5		
Dairy Products and Milk Shops ..	30	229	122	25	229	122	13	48	256	229	229	229	229	14	26	421	229	8		
Drapers, Hosiery and Milliners ..	43	136	45	35	136	45	1	4	35	136	136	136	136	3	14	26	136	3		
Fried Fish and Chip Potato Bars ..	6	2	30	2	2	30	4	38	4	2	2	2	2	50	60	6	2	1		
Furniture, Musical Instruments, and Sewing Machine Dealers ..	41	34	71	34	256	71	3	2	92	34	34	34	34	23	35	53	34	9		
Green grocers, Fruiters, and Florists ..	17	19	206	19	285	206	123	397	64	254	19	285	282	3	785	53	285	8		
Grocers and Provision Dealers ..	6	7	61	7	109	61	53	25	11	2	2	109	109	3	91	109	109	8		
Hairdressers ..	6	6	10	6	49	10	1	7	7	49	49	49	49	15	15	49	49	2		
Hardware, Chinaware, Tinware, Paper, Paint and Oil Vendors ..	5	50	27	4	50	27	12	25	4	10	10	50	48	2	49	2	50	1		
Ironmongers, Plumbers, Gas, Water and Sanitary Fittings Dealers ..	4	9	24	9	84	24	1	1	17	4	4	84	84	3	4	23	84	1		
Newsagents, Tobacconists, Stationers & Book-sellers ..	1	9	4	1	9	4	2	3	2	9	9	9	9	19	7	25	9	5		
Photographers and Picture Framers ..	27	85	47	11	85	47	6	32	8	26	26	85	85	5	22	25	85	5		
Refreshment Houses and Temperance Bars ..	2	20	7	4	20	7	1	16	9	10	10	20	20	1	4	6	20	3		
Restaurants, Cooked Meat Shops, Coffee Rooms, and Oyster Bars ..	11	131	48	10	131	48	3	4	137	11	11	131	131	39	59	53	131	1		
Retailers of Intoxicating Liquors ..	89	406	14	57	406	14	3	4	9	89	89	406	406	2	1	12	406	1		
Sweet Shops ..	5	100	46	5	100	46	23	58	4	22	22	100	98	2	1	100	100	3		
Tailors, Clothiers, and Outfitters ..	2	37	14	2	37	14	1	6	5	37	37	37	37	1	17	7	37	5		
Watchmakers and Jewellers ..	10	15	16	15	50	16	10	9	3	10	10	50	44	6	26	26	50	5		
Miscellaneous ..	399	2845	1074	291	2845	1074	328	811	1082	399	399	2845	1109	118	179	2040	2845	72		
<b>Totals</b> ..	399	2845	1074	291	2845	1074	328	811	1082	399	399	2845	1109	118	179	2040	2845	72		

the Shops Acts. Consequently the Council's two Shops Inspectors will undertake the duties imposed by the Act to the same extent as they have hitherto carried out the Council's Closing Orders

The closing hours fixed by the order are 8 p.m. on every day except Saturday, and 9 p.m. on Saturdays, but paragraph 5 of the Order provides that the Order "shall not affect any obligation to comply with the provisions of the Shops Acts, 1912 and 1913, or any Order made thereunder . . . . ." Consequently, where a shop is already required by any Order under the Shops Act to close on any day at an earlier hour than 8 p.m. (9 p.m. on Saturday) it will still be required to observe the earlier hour.

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## FACTORY AND WORKSHOP ACT.

The number of factories and workshops distributed throughout the district amounts to 1,148, the total of the former being 47 and of the latter 1,101, or 19 fewer than in the previous year. During the year 541 visits were made by the district inspectors to these premises. As a result notices were served in respect of six defects under the Public Health Clauses of the Factory and Workshop Act. Nine defects were remedied in the course of the year, some of which were in compliance with notices served in the previous year, at the end of which seven defects remained unremedied. Thus there remained four known defects unattended to at the end of the year.

All plans of new workshops come as a matter of routine before the departments of the Surveyor and Medical Officer of Health before being submitted to the

appropriate Committee for consideration and the Council's Bye-laws as well as the sanitary provisions of the Factory and Workshop Act, 1901, are methodically applied.

There are few or no outworkers engaged throughout the district.

The following tables set out the number and classification of the workshops in the district and the work done under the provisions of the Act.

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## Workshops and Workplaces in the Rhondda in Wards

	1	2	3	4	5	6	7	8	9	10	Total
Bakers ...	12	24	17	11	14	9	11	14	14	18	144
Barbers ...	11	10	12	10	13	13	9	11	15	10	114
Blacksmiths ...	2	1	4	2	2	3	2	1	2	1	20
Bootmakers ...	12	13	20	18	15	19	11	14	24	13	159
Bottling Stores ...	—	—	—	—	—	2	—	—	—	1	3
Carpenters ...	10	10	9	5	5	7	5	5	11	10	77
Coachmakers ...	1	—	1	—	—	2	1	—	2	—	7
Cycle Repairers ...	—	3	1	1	1	2	1	3	3	1	16
Dressmakers ...	9	12	16	15	8	7	5	15	21	17	125
Dressmakers and Milliners (Comb.)	—	—	3	1	—	—	2	2	1	3	12
Fried Fish Shops ...	16	14	12	10	13	14	10	13	16	13	131
Glaziers ...	1	2	2	2	—	2	1	1	—	1	12
Jewellers ...	3	3	3	3	1	6	1	6	3	4	33
Laundries ...	—	1	1	—	—	1	—	—	—	1	4
Milliners ...	10	10	12	6	3	6	5	7	11	12	82
Monumental Masons...	—	4	—	—	—	3	1	—	2	1	11
Picture Framers ...	1	1	3	1	—	2	1	—	2	1	12
Plumbers ...	1	1	3	2	3	1	1	3	2	2	19
Printers ...	—	1	1	—	—	—	—	2	—	1	5
Quarries ...	4	3	4	8	3	3	6	3	4	4	42
Saddlers ...	1	—	1	—	—	1	1	2	—	1	7
Sweet Makers ...	1	—	2	1	—	—	—	—	—	—	4
Tailors ...	4	6	14	5	3	6	3	4	5	6	56
Tinmen ...	—	—	1	1	1	1	—	1	1	—	6
Totals ...	99	119	142	102	85	110	77	107	139	121	1101

## Inspection of Factories and Workshops.

PREMISES.	Number of		
	Inspections.	Written Notices.	Prosecutions.
(1)	(2)	(3)	(4)
Factories— (Including Factory Laundries).	56	2	—
Workshops. (Including Workshop Laundries).	485	4	—

## Defects found in Factories and Workshops.

PARTICULARS.  (1)	Number of Defects.				No. of Prosecutions.  (5)
	Outstanding end of 1919.	Found 1920. (2).	Remedied (3)	Referred to H. M. Inspector. (4)	
<b>NUISANCES UNDER THE PUBLIC HEALTH ACTS—</b>					
Want of Cleanliness. ... ..	—	3	2	—	—
Want of Ventilation ... ..	—	—	—	—	—
Overcrowding ... ..	—	—	—	—	—
Want of Drainage of Floors ...	—	—	—	—	—
Other Nuisances ... ..	—	2	2	—	—
Sanitary Accommodation. {	Insufficient ... ..	—	—	—	—
	Unsuitable or defective ..	3	1	2	—
	Not separate for sexes	4	—	3	—
<b>OFFENCES UNDER THE FACTORY AND WORKSHOP ACT—</b>					
Illegal occupation of Underground Bakehouse (s.101) ... ..	—	—	—	—	—
Breach of special sanitary requirements for Bakehouses (ss.97 to 100) ... ..	—	—	—	—	—
<b>OTHER OFFENCES—</b>					
(Excluding offences relating to outwork) ... ..	—	—	—	—	—
<b>Total</b> ... ..	<b>7</b>	<b>6</b>	<b>9</b>	<b>—</b>	<b>—</b>

## Factories and Workshops. Other Matters.

CLASS.	(1)	(2) Number
<b>Matters notified to H.M. Inspector of Factories:</b>		
Failure to affix Abstract of the Factory and Workshop Acts (S. 133, 1901)	.. .. .	—
Action taken in matters referred by H M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Act (S. 5. 1901)	Notified by H M. Inspector	.. 4
	Reports (of Action taken) sent to H.M. Inspector	.. .. .
Other	.. .. .	—
Underground Bakehouses (S. 101):		
In use at the end of the year	.. .. .	—



APPENDIX.

APPENDIX

**Table 1.**

Population of the Rhondda Valley since 1801.

Year.	Houses.			Persons.			Persons per House.
	In-habited.	Unin-habited.	Build-ing.	Males	Females.	Total.	
a1801				265	277	542	
1811				283	293	576	
1821				309	338	647	
1831				277	265	542	
1841				386	362	748	
1851				493	458	951	
1861	561	107	5	1,669	1,366	3,035	5·4
1871	2,710	32	62	9,559	7,355	16,914	6·2
b1871						23,950	
1881	9,193	340	158	30,877	24,755	55,632	6·0
1891	13,551	146	374	50,174	38,177	88,351	6·5
1901	19,210	368	112	62,315	51,420	113,735	5·92
1911	26,250	457	444	83,209	69,572	152,781	5·82
1920						184,999	

## NOTES.

(a) The census returns for 1801 include Rhigos, which is not within the present area of the Rhondda District.

(b) Portions of the Llanwonno and Llantrisant Districts were added to the Rhondda District on October 1st, 1879.

The Registrar-General estimated the population in the enlarged area in 1871 at 23,950.

**Table 7.**

Number of Births, Birth-rate, number of Deaths of Children under one year of age, Infantile Mortality-rate, number of Deaths, and Death-rate in each year since 1891.

YEAR.	Total Number of Births	General Birth-rate per 1,000.	Number of Deaths of children under one year of age.	Infantile Mortality-rate per 1,000 births.	Total Number of Deaths.	General Death-rate per 1,000.
1891	3,935	44·3	862	219	2,255	25·4
1892	3,916	42·9	757	193	1,804	19·8
1893	4,149	44·3	932	225	2,132	22·8
1894	3,715	38·7	757	204	1,706	17·7
1895	4,245	43·1	997	235	2,246	22·8
1896	4,328	42·9	855	198	2,105	20·8
1897	4,109	39·7	838	204	2,049	20·1
1898	4,120	38·8	793	192	1,979	18·8
1899	4,089	37·5	1,016	248	2,419	22·4
1900	4,469	40·0	839	188	2,181	19·9
1901	4,586	40·0	1,020	222	2,431	21·2
1902	4,937	41·8	883	179	2,190	18·6
1903	4,897	40·3	778	159	1,998	16·4
1904	4,860	38·8	925	190	2,345	18·7
1905	4,664	36·2	927	199	2,402	18·6
1906	4,751	35·8	821	173	2,074	15·6
1907	4,831	35·3	782	162	2,133	15·6
1908	5,454	38·7	1,002	184	2,516	17·9
1909	5,577	38·4	724	130	2,231	15·4
1910	5,628	37·7	770	137	2,181	14·6
1911	5,491	35·7	902	164	2,352	15·3
1912	5,236	33·1	666	127	2,182	13·8
1913	5,505	34·0	766	139	2,360	14·6
1914	5,558	34·2	762	137	2,410	14·8
1915	4,983	30·0	567	114	2,218	14·2
1916	4,481	26·8	471	105	1,940	12·6
1917	4,145	24·1	425	103	1,977	12·8
1918	4,346	26·3	448	103	2,340	15·9
1919	4,263	23·0	474	111	2,111	11·9
1920	5,046	27·3	526	104	2,237	12·1

**Table 8.**

Showing the Number of Houses, Estimated Population, Number of Deaths, and Death-rate per 1,000 for each Ward.

Wards.	Number of occupied houses.	Estimated (civil) population to middle of 1920.	Number of deaths from all causes.	Death-rate per 1,000.
1 ...	2,552	16,903	215	12·7
2 ...	2,957	19,639	238	12·1
3 ...	2,160	13,702	134	9·8
4 ...	2,193	14,205	191	13·4
5 ...	2,739	18,047	212	11·7
6 ...	2,587	17,288	213	12·3
7 ...	2,458	14,448	185	12·8
8 ...	3,432	19,860	236	11·9
9 ...	4,053	27,975	354	12·7
10 ...	3,311	22,932	259	11·3
<b>Rhondda...</b>	<b>28,412</b>	<b>184,999</b>	<b>2,237</b>	<b>12·1</b>

**Table 12.**

Showing the number of Deaths in the Rhondda from the principal Zymotic Diseases since 1900.

Year.	Small-Pox.	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Fevers.			Diarrhoea.	Total Zymotic Deaths.	Zymotic Death-rate.	Average Zymotic Death-rate of Ten Years.
						Typhus	Enteric.	Simple Continued				
1900	-	121	35	58	125	-	24	-	118	481	4.3	3.2
1901	-	3	43	33	135	-	53	-	327	595	5.2	
1902	1	109	27	40	81	-	21	-	109	389	3.3	
1903	-	8	38	52	42	-	44	-	109	293	2.4	
1904	-	102	20	53	32	-	42	-	211	460	3.7	
1905	-	84	11	55	16	-	15	1	172	354	2.7	
1906	-	24	9	27	25	-	20	-	206	311	2.4	
1907	-	68	9	26	20	-	22	-	147	292	2.1	
1908	-	102	7	54	32	-	21	-	319	535	3.8	
1909	-	47	15	27	35	-	4	-	130	258	1.8	
1910	-	25	24	41	15	-	12	-	115	232	1.6	1.6
1911	-	144	19	18	21	-	18	-	313	533	3.5	
1912	-	127	19	80	19	-	16	-	39	300	1.9	
1913	-	57	22	15	53	-	12	1	174	334	2.1	
1914	-	84	10	44	36	-	5	-	103	282	1.7	
1915	-	58	12	47	29	-	9	-	58	213	1.4	
1916	-	41	8	14	17	-	5	-	55	140	.9	
1917	-	52	5	26	23	1	6	-	16	129	.8	
1918	-	89	5	37	11	-	5	-	27	174	1.2	
1919	-	25	4	38	19	-	5	-	26	117	.7	
1920	-	110	29	24	24	-	2	-	25	214	1.2	

**Table 13.**—Comparing the Death-rates from Zymotic Diseases during the years 1900-1920, in the Rhondda with those of similar Diseases in England and Wales (per 1,000 living).

Year.	Small-pox.		Measles.		Scarlet Fever.		Whooping Cough.		Diphtheria		FEVERS.				Diarrhoea.		Total Zymotic Deaths		Zymotic Death-rate	
	Rhondda.	England and Wales.	Rhondda.	England and Wales.	Rhondda.	England and Wales.	Rhondda.	England and Wales.	Rhondda.	England and Wales.	Rhondda.	England and Wales.	Rhondda.	England and Wales.	Rhondda.	England and Wales.	Rhondda.	England and Wales.	Rhondda.	England and Wales.
1900	—	.01	.09	.39	.31	.12	.51	.34	1.12	.29	.21	.17	—	1.05	.69	481	4.3	2.0	—	—
1901	—	.01	.02	.27	.37	.13	.28	.30	1.18	.27	.46	.17	—	2.85	.91	597	5.2	2.0	—	—
1902	.08	.08	.89	.38	.23	.15	.34	.29	.68	.23	.18	.13	—	.92	.38	389	3.3	1.64	—	—
1903	.02	.02	.06	.27	.31	.12	.42	.27	.34	.18	.35	.10	—	.90	.50	293	2.4	1.46	—	—
1904	—	.01	.81	.36	.16	.11	.42	.34	.26	.17	.34	.09	—	1.68	.86	460	3.7	1.94	—	—
1905	—	—	.65	.32	.09	.11	.43	.25	.13	.16	.12	.09	.008	1.34	.59	354	2.7	1.52	—	—
1906	—	—	.18	.27	.07	.10	.20	.23	.18	.17	.15	.09	—	1.55	.87	311	2.4	1.73	—	—
1907	—	—	.50	.36	.07	.09	.19	.29	.14	.16	.16	.07	—	1.08	.29	292	2.1	1.26	—	—
1908	—	—	.73	.22	.05	.08	.39	.27	.23	.15	.15	.07	—	2.27	.50	535	3.8	1.29	—	—
1909	—	—	.33	.35	.10	.09	.19	.20	.24	.14	.03	.06	—	.85	.28	258	1.8	1.12	—	—
1910	—	—	.17	.23	.16	.06	.27	.24	.10	.12	.08	.05	—	.77	.29	232	1.6	.99	—	—
1911	—	—	.94	.36	.12	.05	.12	.21	.14	.13	.12	.07	—	2.03	1.06	533	3.5	1.88	—	—
1912	—	—	.80	.35	.12	.05	.51	.23	.12	.11	.10	.04	—	.25	—	300	1.9	—	—	—
1913	—	—	.35	.28	.14	.06	.09	.14	.33	.12	.08	.04	—	1.07	—	334	2.1	—	—	—
1914	—	—	.52	.24	.06	.08	.27	.21	.20	.15	.03	.05	—	.62	—	282	1.7	—	—	—
1915	—	—	.37	.43	.08	.06	.30	.21	.19	.15	.06	.04	—	.37	—	213	1.4	—	—	—
1916	—	—	.27	.15	.05	.04	.09	.16	.11	.14	.03	.03	—	.36	—	140	0.9	—	—	—
1917	—	—	.34	.30	.03	.02	.17	.13	.15	.13	.04	.03	—	.10	—	129	0.8	—	—	—
1918	—	—	.60	.28	.03	.03	.25	.29	.07	.14	.03	.03	—	.18	—	174	1.2	—	—	—
1919	—	—	.14	.10	.02	.03	.21	.07	.11	.13	.03	.01	—	.15	—	117	.7	—	—	—
1920	—	—	.59	.19	.16	.04	.13	.11	.13	.15	.01	.01	—	.14	—	214	1.2	—	—	—

**Table 13.**

Showing the number of cases, and incidence of the Notifiable Diseases in the Rhondda since compulsory notification was adopted in 1894.

Year.	Cases Notified.	Estimated Population.	Incidence per 1,000 of Population.
1894	625	95,904	6.6
1895	933	98,356	9.5
1896	1,241	100,870	12.3
1897	1,031	103,445	9.9
1898	1,652	106,094	15.6
1899	2,700	108,807	24.8
1900	3,214	111,587	28.8
1901	3,039	114,587	26.5
1902	1,879	118,020	15.9
1903	1,597	121,557	13.1
1904	1,240	125,199	9.9
1905	534	128,951	4.1
1906	779	132,814	5.9
1907	773	136,794	5.7
1908	862	140,894	6.1
1909	1,091	145,116	7.5
1910	1,530	149,464	10.2
1911	1,261	153,775	8.2
1912	1,652	157,951	10.5
1913	1,820	162,137	11.2
1914	1,646	162,592	10.1
1915	1,274	156,260	8.2
1916	3,572	153,373	23.3
1917	3,376	154,388	21.9
1918	4,015	147,296	27.2
1919	2,254	177,911	12.7
<b>1920</b>	<b>2,442</b>	<b>184,999</b>	<b>13.2</b>

Scarlet Fever, Typhoid Fever, Diphtheria, Erysipelas, and Puerpera Fever, became notifiable on 1st January, 1894.

Pulmonary Tuberculosis became notifiable on 1st January, 1912.

All other forms of Tuberculosis became notifiable on 1st February, 1913.

Cerebro-spinal Fever and Acute Poliomyelitis became notifiable on 1st September, 1912.

Ophthalmia Neonatorum became notifiable on 1st April, 1914.

Measles and German Measles were notifiable from 1st January, 1916, to 31st. December, 1919.

Acute Encephalitis Lethargica and Acute Polio Encephalitis became notifiable on 1st January, 1919.

Acute Primary Pneumonia, Acute Influenzal Pneumonia, Malaria, Dysentery, and Trench Fever became notifiable on 1st March, 1919.

**Table 49.**

Summary of District Inspectors' Work, 1920.

DISTRICT.	1	2	3	4	5	6	Total
Accumulation of Refuse	21	1	10	1	4	17	54
"    "    Manure..	—	2	2	1	4	5	14
Blocked Drain ..	143	159	160	271	199	45	977
Blocked W.C. ..	24	41	47	21	48	53	234
Defective Drain ..	29	70	24	21	69	42	255
Lip Trap to Gully Trap	—	5	—	5	3	—	13
Unventilated Drain ...	—	—	—	—	—	—	—
Defective Ventilating Pipe	6	12	2	—	2	3	25
Waste Pipe Direct ...	—	—	—	2	—	—	2
No Water in W.C. ...	4	2	2	—	41	20	69
Dilapidated or Filthy W.C.	10	81	27	19	29	32	198
No W.C. ...	—	—	—	3	—	—	3
Dilapidated Back Area	11	25	10	13	13	40	112
Defective or no Rain- water Shoots	27	65	35	43	108	20	298
Dirty Houses ..	8	—	4	—	2	3	17
Overcrowding ..	4	2	—	1	11	4	22
Animals as a Nuisance	12	1	—	—	5	7	25
Damp and Dilapidated Houses	28	91	22	95	163	28	427
Insufficient Water Supply	24	1	—	11	8	8	52
Other Nuisances	91	123	12	21	34	—	281

**Table 50.**

Summary of District Inspectors' work during 1920, as reported to M.O.H. each week.

DISTRICT.	Total.	1	2	3	4	5	6
Cases of Infectious Disease investigated ... ..	1579	384	273	256	177	280	209
Revisits to:—							
Infected Houses ... ..	6850	1663	1276	643	495	1762	1011
Unabated Nuisances and Unremedied Defects ... ..	24553	5495	3520	3460	5473	3075	3530
Slaughter Houses ... ..	990	285	177	84	205	135	104
Lodging Houses ... ..	484	—	310	—	174	—	—
Bakehouses ... ..	498	10	73	127	117	44	127
Dairies ... ..	204	7	59	22	32	42	42
Factories and Workshops ... ..	541	20	146	39	65	101	170
Disinfections ... ..	1337	311	244	191	175	274	142
New Buildings (drains of) ... ..	273	29	67	118	10	46	3
Special Complaints received ... ..	344	46	53	151	76	—	18
Letters written to abate Nuisances:—							
By Inspector ... ..	2271	176	432	423	378	536	306
Referred to M.O.H. ... ..	604	83	176	97	64	171	13
Referred to Council .. ..	1184	167	325	89	122	419	62
New Buildings certified ... ..	8	—	1	—	—	—	7
Drain connections:—							
No. of Connections made ... ..	3	1	—	—	—	1	1
No. of Houses connected .. ..	11	4	—	—	—	—	7
No. of Houses connected to date ..	28044	5499	4371	4579	4232	5094	4269
No. of Houses unconnected to date	277	21	12	58	63	53	20
Scavenging—Fines inflicted:—							
Without Brush ... ..	—	—	—	—	—	—	—
Without Bell ... ..	—	—	—	—	—	—	—
Without Cover to Cart .. ..	—	—	—	—	—	—	—
Improper use of Cover ... ..	—	—	—	—	—	—	—
Improper use of Cart ... ..	—	—	—	—	—	—	—
Failing to send out Cart ... ..	45/-	15/-	25/-	—	5/-	—	—
Neglecting Back Lanes... ..	—	—	—	—	—	—	—
Neglecting to use Brush ... ..	—	—	—	—	—	—	—
Neglecting to Clear Ashbin ... ..	10/-	10/-	—	—	—	—	—
Scavenging after 1 p.m. ... ..	12/6	—	12/6	—	—	—	—
Depositing on unauthorized ground	30/-	22/6	5/-	—	2/6	—	—

**Table 52.**

Premises requiring Periodical Inspection.

District.	1	2	3	4	5	6	Whole District.
Bakehouses ... ..	36	28	22	18	21	22	147
Cowsheds ... ..	10	10	3	9	6	8	46
Dairies and Milkshops ...	37	20	24	27	30	25	163
Lodging Houses ... ..	—	7	—	3	—	—	10
Slaughter Houses ... ..	7	6	8	3	2	2	28
Offensive Trades ... ..	—	1	1	1	—	—	3

## Rhondda Urban District.

Table I.

Vital Statistics of Whole District during 1920 and previous years.

Year.	Population estimated to Middle of each year.	BIRTHS.			Total Deaths registered in the District		Transferable Deaths.		Net Deaths belonging to the District.			
		Uncorrected Number.	Net.		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.					Number	Rate per 1,000 net births.	Number.	Rate.
1	2	3	4	5	6	7	8	9	10	11	12	13
1915	156,260	4,960	4,983	*30·0	2,148	13·7	43	113	567	114	2,218	14·2
1916	153,373	4,481	...	*26·8	1,845	12·0	†35	130	471	105	1,940	12·6
1917	154,388	4,145	...	*24·1	1,851	12·0	†25	151	425	103	1,977	12·8
1918	147,296	4,346	...	*26·3	2,224	15·1	†39	155	448	103	2,340	15·9
1919	177,911	4,263	...	*23·0	2,024	11·4	†25	112	474	111	2,111	11·9
1920	184,999	5,046	...	*27·3	2,129	11·5	27	135	526	104	2,237	12·1

NOTES :—This table is arranged to show the gross births and deaths in the district and the births and deaths properly belonging to it with the corresponding rates. The corrected number of births is not available for the years 1916, 1917, 1918, 1919 and 1920.

Rates in Columns 5, 7, and 13 are calculated per 1,000 of estimated population.

\*The birth-rate (Column 5) is in accordance with the advice of the Registrar-General, calculated upon a population

in 1916 of 166,873

in 1917 of 172,099

in 1918 of 165,041

in 1919 of 185,329

in 1920 of 184,999

The deaths included in Column 6 are the whole of those registered during the year as having actually occurred within the district. The deaths included in Column 12 are the number in Column 6, corrected by the subtraction of the number in Column 8 and the addition of the number in Column 9. Deaths in Column 10 are similarly corrected by the subtraction of deaths under one included in the number given in Column 8 and by the addition of the deaths under one included in the number given in Column 9.

† The numbers in Column 8 marked thus (†) include soldiers who died in the district, viz :—

2 in 1916

3 in 1917

8 in 1918

5 in 1919

“Transferable Deaths” are deaths of persons who, having a fixed or usual residence in England or Wales, die in a district other than that in which they resided.

Area of District in acres  
(exclusive of area covered  
by water). } 23,885.





Table III.—continued.

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
18. Other Diseases of the Respiratory Organs	21	...	...	2	5	3	1	2	6	2	1	1	1	...	3	2	4	2	5	2	2
19. Diarrhoea and Enteritis (under 2 years)	61	55	...	6	...	...	...	...	...	...	7	11	...	6	5	8	6	1	6	11	...
20. Appendicitis and Typhlitis ...	13	...	...	...	...	4	3	4	2	1	...	...	...	1	3	4	1	2	4	...	9
21. Cirrhosis of Liver	7	...	...	...	...	...	...	2	4	...	1	...	...	...	...	3	...	1	...	...	...
21a. Alcoholism	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
22. Nephritis and Bright's Disease	45	...	...	...	2	2	2	15	18	6	7	2	...	3	7	4	6	5	6	5	1
23. Puerperal Fever ...	8	...	...	...	...	...	1	7	...	...	1	...	...	3	...	...	1	...	...	3	...
24. Other Accidents and Disease of Pregnancy and Parturition ...	21	...	...	...	...	...	5	16	...	...	1	3	1	1	2	2	1	1	5	4	4
25. Congenital Debility and Malformation, including Premature Birth	167	166	...	1	...	...	...	...	...	...	11	11	9	16	12	15	20	28	21	24	4
26. Violent Deaths, excluding Suicide	123	2	...	3	10	11	13	36	41	7	17	13	3	6	11	10	9	18	23	13	19
27. Suicide	6	...	...	...	...	...	...	3	3	...	...	1	...	...	1	1	...	...	2	1	...
28. Other Defined Diseases	538	138	...	25	22	13	14	58	99	169	59	46	36	44	52	30	42	58	94	77	28
29. Diseases ill-defined or unknown	8	1	...	...	...	...	...	...	6	1	1	2	...	1	...	...	...	...	1	3	...
<b>Rhonda</b>	2237	526	...	155	147	123	127	316	478	367	215	238	134	191	212	213	185	236	354	259	136
<b>Sub-entries included in above figures.</b>																					
11 (a) Tabes Mesenterica	3	2	...	1	...	...	...	...	...	...	...	...	...	1	...	1	...	1	...	...	...
(b) General Tuberculosis	1	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	1	...	...	...
14 Cerebro-spinal Fever	3	1	...	...	...	...	1	...	1	...	...	...	...	...	...	...	1	2	...	...	...
17 (a) Lobar Pneumonia	37	...	...	2	1	2	3	14	13	2	1	5	5	3	2	4	1	4	7	5	1
(b) Lobular Pneumonia	130	62	...	37	16	6	1	1	4	3	10	18	8	15	4	15	15	10	25	10	...
19 (a) Diarrhoea (under 2 years)...	22	22	...	...	...	...	...	...	...	...	3	...	...	...	4	4	3	...	5	3	...
(b) Enteritis (under 2 years)...	39	33	...	6	...	...	...	...	...	...	4	...	...	6	1	4	3	1	1	8	...
25 (a) Congenital Malformations	22	22	...	...	...	...	...	...	...	...	1	4	...	3	5	...	1	4	4	3	...
(b) Premature Birth	87	87	...	...	...	...	...	...	...	...	6	3	8	8	5	14	8	12	7	16	2
(c) Atrophy, Debility, and Marasmus	58	57	...	1	...	...	...	...	...	...	4	4	1	5	2	1	11	15	10	5	2
26 (a) Burns (including Scalds)	18	1	...	2	6	3	...	3	1	2	3	1	1	2	1	...	2	2	1	5	5

Table III.—continued.

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
28	b) Accidental Suffocation	2	1	..	.. 1	..	..	..	1	..	..	1	..	.. 1	.. 1	..	..	..	..	1	..
	Acute Poliomyelitis	2	1	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..
	Acute Polio Encephalitis	1	..	..	.. 1	..	.. 1	..	1	..	..	..	.. 2	..	..	..	..	..	.. 1	..	..
	Acute Encephalitis Lethargica	3	..	..	..	.. 1	..	..	1	..	.. 1	..	..	.. 1	..	..	.. 2	..	..	..	..
	Chicken Pox	1	.. 4	..	..	..	..	.. 1	..	..	.. 1	..	..	.. 1	..	..	..	..	..	..	.. 1
	Venereal Diseases	5	..	..	..	..	..	..	..	..	..	..	..	..	..	.. 1	..	..	..	..	..
	Otitis Media	2	.. 8	.. 1	.. 1	..	.. 1	.. 2	.. 5	.. 1	.. 4	.. 2	.. 1	.. 1	.. 5	..	.. 1	.. 2	.. 1	.. 5	.. 2
	Other Septic Diseases	23	4	2	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Rickets	4	1	2	1	..	..	..	.. 3	..	.. 2	.. 2	..	..	.. 2	..	..	.. 3	..	..	..
	Diabetes	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Pernicious Anæmia	16	..	..	..	..	.. 1	.. 7	.. 7	.. 1	.. 3	.. 4	..	..	..	..	.. 2	.. 1	.. 5	..	..
	General Paralysis of the Insane	7	..	..	..	..	..	.. 3	.. 4	.. 1	.. 1	..	.. 1	..	.. 1	..	..	..	.. 2	..	..
	Epilepsy	7	1	..	..	..	.. 1	..	.. 3	.. 1	.. 1	.. 2	.. 3	..	.. 2	..	..	..	.. 1	.. 5	..
	Convulsions	78	63	9	5	1	..	.. 2	..	..	11	2	..	.. 2	.. 6	.. 8	.. 7	.. 16	..	..	..
	Cerebral Tumour	3	..	..	..	1	..	.. 2	..	..	..	..	..	.. 2	..	..	..	..	..	..	..
	Locomotor Ataxy	2	..	..	..	..	..	.. 2	..	..	..	..	..	..	..	..	..	..	..	..	..
	Other Diseases of the Nervous System	17	1	..	.. 2	..	.. 2	.. 3	.. 6	.. 3	..	.. 3	.. 2	.. 1	.. 3	..	..	..	.. 4	.. 3	..
	Hemiplegia	7	1	..	..	..	..	.. 1	.. 1	.. 5	..	.. 1	..	.. 1	.. 1	..	..	..	.. 1	.. 2	.. 5
	Aneurysm	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Arterial Sclerosis	10	..	..	..	..	..	..	.. 4	.. 6	.. 1	.. 1	.. 4	.. 1	..	.. 2	..	..	..	..	..
	Angina Pectoris	2	..	..	..	..	..	..	.. 2	..	..	..	..	..	..	..	..	..	..	..	..
	Cerebral Hemorrhage	77	..	..	..	..	..	.. 8	.. 29	.. 40	.. 6	.. 7	.. 7	.. 2	.. 8	.. 3	..	.. 6	.. 21	.. 9	.. 2
	Embolism and Thrombosis	13	.. 4	..	..	..	..	.. 1	.. 9	.. 3	.. 1	.. 4	.. 1	.. 2	..	..	..	..	.. 1	.. 4	.. 1
	Stomatitis	4	..	..	..	..	..	.. 3	..	..	..	..	..	.. 1	..	..	..	..	..	..	..
	Gastric Ulcer	5	..	..	..	..	..	.. 2	.. 1	..	..	..	..	..	..	..	..	..	..	..	..
	Intestinal Obstruction	7	..	..	.. 1	..	..	.. 2	..	.. 2	..	..	..	..	..	..	..	..	..	..	..
	Strangulated Hernia	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Intussusception	8	.. 8	..	..	..	..	..	..	..	..	..	..	..	.. 2	..	..	..	.. 3	.. 1	.. 3

Table III.—continued.

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
Acute Peritonitis	...	...	...	...	1	...	...	...	...	...	.. 2	...	1	..	...	...	.. 2	.. 1	1	...
Atelectasis	2	.. 9	1	...	...	...	...	...	...	...	.. 2	...	2	..	...	.. 1	.. 1	1	2	...
Injury at Birth	3	3	..	...	...	...	...	...	.. 2	..	..	...	1	...	..	.. 1	.. 1	..	...	...
Diarrhoea (over 2 years)	3	...	...	1	...	...	...	...	.. 2	..	.. 2	.. 2	1	...	..	.. 1	.. 1	5	.. 2	...
Enteritis (over 2 years)	16	...	...	6	3	1	2	1	3	.. 3	.. 2	3	3	1	.. 1	.. 1	.. 1	4	.. 2	...
Gastritis	33	15	3	1	2	...	4	6	2	3	.. 5	2	3	5	1	1	1	4	13	...
Old Age	93	..	...	...	..	..	...	2	91	14	...	4	9	9	8	6	12	13	13	7

**Table M. 13 (L.G.B.)**

## Causes of Death in Rhordda Urban District for 1920.

Causes of Death.		Males.	Females.
ALL CAUSES (Civilians only)	...	1235	1020
1 Enteric Fever	..	3	—
2 Small-pox	...	—	—
3 Measles	...	57	59
4 Scarlet Fever	...	14	16
5 Whooping cough	..	10	15
6 Diphtheria and croup	...	10	13
7 Influenza	..	50	28
8 Erysipelas	...	2	—
9 Pulmonary tuberculosis	...	72	58
10 Tuberculous meningitis	...	10	15
11 Other tuberculous diseases	..	11	7
12 Cancer, malignant disease	...	54	71
13 Rheumatic fever	...	10	15
14 Meningitis	..	6	4
15 Organic heart disease	...	69	76
16 Bronchitis	..	154	106
17 Pneumonia (all forms)	...	138	87
18 Other respiratory diseases	..	16	10
19 Diarrhœa, &c. (under 2 years)	..	32	33
20 Appendicitis and typhlitis	..	4	9
21 Cirrhosis of liver	..	6	1
21A Alcoholism	...	—	—
22 Nephritis and Bright's disease	...	23	21
23 Puerperal fever	...	—	9
24 Parturition, apart from puerperal fever	..	—	17
25 Congenital debility, &c.	..	102	65
26 Violence, apart from suicide	..	89	23
27 Suicide	..	3	3
28 Other defined diseases	..	287	255
29 Causes ill-defined or unknown	...	3	4
Special Causes (included in above)—			
Cerebro-spinal fever	..	1	1
Poliomyelitis	...	2	1
Encephalitis Lethargica	..	1	3
Deaths of infants under 1 year of age	...	305	228
Deaths of Illegitimate Infants do.	...	18	16
TOTAL BIRTHS	...	2668	2474
Legitimate	...	2564	2392
Illegitimate	...	104	82
POPULATION	..		184,999

GENERAL REGISTER OFFICE,

SOMERSET HOUSE, LONDON, W.C.2.

March, 1921





THE ANNUAL

REPORT

OF THE

SCHOOL MEDICAL OFFICER

TO THE

Rhondda Education Authority

FOR THE YEAR 1920.

THE ANNALS

# REPORT

OF THE

SCHOOL MEDICAL OFFICERS

OF THE

Board of Education

1911

# Rhondda Urban District Council

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## Members of the Rhondda Education Committee.

COUNCILLOR JAMES JAMES (Chairman).

LADY FLORENCE NICHOLAS, Co-opted Member (3 months).

Mrs. EDITH WILLIAMS, Co-opted Member (3 months).

COUNCILLOR DAN DAVIES, J.P.

„ REES MORGAN REES.

„ GWILYM LLOYD.

„ JOHN MINTON.

„ WILLIAM PHILLIP THOMAS, J.P.

„ ALFRED GLADSTONE TRIBE.

„ WILLIAM LEWIS.

„ WILLIAM D. MORGAN.

„ ISAAC T. REES

„ ELIZA WILLIAMS (9 months).

„ WILLIAM EVANS THOMAS, M.D., J.P.

„ THOMAS THOMAS (3 months).

„ THOMAS OWEN.

„ EVAN JOSHUA RODERICK

„ WILLIAM SAMUEL LANE.

„ MARK HARCUMBE.

„ OWEN JAMES BUCKLEY

„ THOMAS R. DAVIES.

„ LEWIS HOPKIN (3 months).

„ THOMAS HENRY SMITH (9 months).

„ GOMER JONES.

„ EDGAR MORGAN.

COUNCILLOR	THOMAS GRIFFITHS, J.P.
„	BENJAMIN DAVIES.
„	ARTHUR JAMES COOK.
„	JOHN TALWRN JONES.
„	EDWARD THOMAS WOOD (3 months).
„	LLEWELLYN JONES (9 months).
„	THOMAS REES.
„	JOHN KANE
„	ROWLAND HUGHES.
„	HENRY EDWARD MALTBY.
„	JOHN WILLIAMS
„	DANIEL EVANS, J.P.
„	THOMAS BRYN THOMAS (3 months).
„	JOHN BOWEN (3 months).
„	ABEL JACOB, J.P.

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Clerk to the Committee: Sir WALTER NICHOLAS.  
 Director of Education: T. W. BERRY.  
 Deputy Director of Education: R. R. WILLIAMS.  
 Architect: JACOB REES.  
 School Medical Officer: J. D. JENKINS.  
 Assistant School Medical Officers:

J. P. H. DAVIES.  
 HELENA G. JONES.  
 D. R. GILDER.  
 CAROLINE J. MACLENNAN  
 (for portion of year).  
 WILLIAM A. MURPHY  
 (for portion of year).

Ophthalmic Surgeon: J. W. G. MYLER.  
 School Dental Surgeon: WILLIAM R. DAVIES  
 (for portion of year).  
 JAMES S. BARR  
 (for portion of year).

Medical Inspection Clerk: ANNIE M. EVANS.

School Nurses :

Mrs. LAURA JONES.

Miss ELIZABETH HUGHES.

„ KEZIAH EDWARDS.

„ GERTRUDE WATTS.

„ SOPHY WILLIAMS.

„ GWENDOLEN WILLIAMS.

„ EDITH MAY WATKINS.

„ BEATRICE MAUD LEWIS.

„ NELLIE DOULTON JENKINS.

For Portion of Year :—

Miss SOPHIA THOMAS.

„ GWEN JONES.

„ ADA J. WOOSNAM.

„ KATE EVANS.

# Rhondda Urban District Council

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*To the Chairman and Members of the Education Committee.*

LADY NICHOLAS, LADIES AND GENTLEMEN,

I beg to submit to you my thirteenth annual report as your School Medical Officer for the year ended December 31st, 1920.

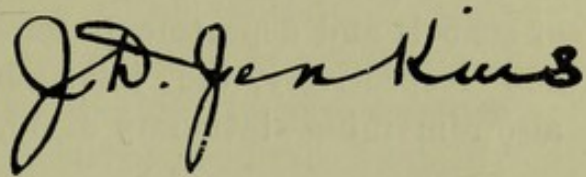
In the course of the year efforts were successfully made towards the re-establishment of features of the school medical service which were introduced prior to or during the early stages of the war but which were suspended owing to limitations imposed by the stress of its later stages. Thus the services of a whole-time dentist were available throughout the greater part of the year and the medical staff was increased to correspond to some extent with the additions made to our responsibilities by the Board of Education. Unfortunately the progress made was seriously interfered with by the destruction by fire of the Ystrad Clinic and Welfare Centre which occurred in March, and the temporary measures which were adopted at Ynyshir and Ystrad to meet our most urgent needs are unavoidably inadequate and are intended only to serve until more permanent measures can be taken. It is satisfactory to be able to state, however, that notwithstanding the disability referred to, some progress was made during the year under review, the total amount of work performed in connection with the school medical service being a considerable increase as compared with recent years. It is however hoped that the general and local conditions will

vii.

improve sufficiently in the near future to allow a determined consideration of the serious problems still awaiting attention to be made by the Local Education Authority.

I am,

Yours faithfully,

A handwritten signature in black ink, appearing to read "J.D. Jenkins". The signature is written in a cursive style with a large, looping initial "J".

The Council Offices,  
Rhondda.

School Medical Officer.

# Rhondda Urban District Council

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## GENERAL INFORMATION.

The total population of the Rhondda in 1920 was estimated at 184,999 persons, of whom 35,027 were entered in the registers of the elementary schools. The number of schools and departments remained unaltered at 43 and 103 respectively, the total number of places provided also remaining stationary at 36,923.

## ADMINISTRATION.

The duties of School Medical Officer are carried out by the Medical Officer of Health for the district, the administrative machinery of the Health Department being equally available in the interests of the public health and school medical service.

For various reasons the staff of the department was inadequate throughout the year, and there were breaks in the continuity of the services rendered in certain directions. Dr. J. P. H. Davies resumed his duties as Assistant School Medical Officer on June 20th, after a long leave of absence, Dr. D. R. Gilder was available throughout the whole year, Dr. William A. Murphy served from Feb. 1st to July 31st and was followed by Dr. Caroline J. MacLennan on August 31st. Mr. William R. Davies acted as whole-time dentist from January 5th to June 20th and was succeeded by Mr. James Starke Barr from July 6th to the end of the year.

The School Medical Service was much disorganised by the fire which completely gutted the Council's school clinic at Trafalgar Street, Ystrad, on the night of the 17th-18th of March. The occurrence necessitated the immediate suspension of the examination of referred cases

and of the dental and ophthalmic work carried out in connection with the service and resulted in the loss, not only of the special equipment but also of the bulk of the records of the work carried on at the institution. The clinic and its contents were insured.

As one consequence of the fire, as much attention as possible was concentrated upon hastening the adaptation and equipment of the Ynyshir Clinic with the result that the dental work and the examination of referred and special cases from among the school children were resumed in April and May respectively, but owing to the inability of the instrument makers to supply the necessary trial lenses and other essential appliances it was not possible to resume the examination of cases of defective vision until January, 1921.

### **HYGIENIC CONDITION OF THE SCHOOLS.**

With some exceptions, such as the schools at Ynyswen and Hafod, the school buildings are in a satisfactory condition, of recent design and substantially built. They are well distributed throughout the area, there being no considerable aggregation of houses without a more or less accessible school being available to the school population, the least favoured district in this respect being Trebanog.

**LIGHTING.**—Gas is used for lighting the schools when natural light is insufficient. Owing to the aspect of the classroom windows and to the extent to which the schools are overshadowed by adjoining hills it is found necessary in some instances to resort to artificial light during the afternoon sessions in winter. In other instances the entry of light is unduly impeded by the unclean condition of the windows.

**WARMING.**—The great majority of the schools are heated by means of open fire-places or by stoves, the latter

being usually installed in the larger rooms. It is not infrequently observed by the medical inspectors that, in cold weather, the heat is very unequally distributed owing to the one-sided position of the source of heat. In a few of the newer schools, the warming is satisfactorily effected by means of hot water pipes and radiators connected with a central boiler.

VENTILATION.—The schools are ventilated by natural agencies by means of ventilators placed in windows, roofs and walls. The practice of systematically opening all means of ventilation during school intervals is as yet far from universal. This simple and easily-carried-out expedient materially helps to restore and maintain the alertness of the children after a period of close application to their work in a progressively deteriorating atmosphere.

CLEANLINESS AND GENERAL SANITATION.—There is considerable variation in the standard of cleanliness maintained at the different schools, the structure and condition of the school, the degree of surveillance exercised by the headteacher and the conscientiousness of the cleaner being the most important factors in this connection. The windows in some of the schools are very inaccessible to the (women) cleaners with the result that they are allowed to become much less penetrable to light.

The closets are usually arranged in the trough system but require more frequent and systematic flushing to give satisfaction. One or two of the newest schools are provided with pedestal closets and their introduction is a welcome innovation if only as an educative influence in the proper use of appliances which are now to be found in the vast majority of the homes in the district.

Cloak rooms and lavatories are generally provided but the facilities for drying clothes are usually inadequate.

**SCOPE OF MEDICAL INSPECTION CARRIED OUT  
DURING THE YEAR 1920.**

During the year under review, the following groups of school children were medically inspected in the course of the year:—

(a) Entrants, or those admitted since or absent from the previous routine examination;

(b) Intermediate group, or those between 8 and 9 years of age;

(c) Leavers, or those who had reached the age of 12 years and had not previously been examined since attaining that age;

(d) Specials, consisting of (i.) all those children of other ages who in the opinion of the medical inspectors, teachers, parents or others required medical attention at the time of the inspection and (ii.) the tuberculosis contacts or those who were known or believed to have come into more or less close contact with one or more cases of tuberculosis, either at their homes or elsewhere, and who were not embraced by the code and special groups.

The total number of examinations of children carried out during the year was 15,070, consisting of 7,364 boys and 7,706 girls, and inclusive of 175 children who were also examined at the clinics.

**Table I.**

Number of Children Inspected from 1st January, 1920, to 31st December, 1920.

**A.—Routine Medical Inspections.**

Age	Entrants.						Inter- mediate Group.	Leavers.					Grand Total.
	3	4	5	6	Other Ages.	Total.		8	12	13	14	Other Ages.	
Boys	115	530	905	794	408	2752	1107	901	468	74	151	2701	5453
Girls	79	468	902	721	426	2596	1150	988	509	74	38	2759	5355
Totals	194	998	1807	1515	834	5348	2257	1889	977	148	189	5460	10808

**B.—Special Inspections.**

	Intermediate Group (other than 8 years).	Special Cases.	Re-examinations (i.e. number of children re-examined).
Boys ..	264	1647	3545
Girls ...	188	2163	4221
Totals...	452	3810	7766

C.—Total Number of Individual Children Inspected—14,895.

**GENERAL REVIEW OF THE FACTS DISCLOSED BY  
THE MEDICAL INSPECTION.**

The medical inspection of school children having been carried on during 1920 under more normal conditions than had been possible during recent years, comparisons between various periods rendered possible by statistical returns are becoming more trustworthy than during the

war period, the constitution of the groups of the children selected for examination being less disturbed and more constant than during conditions calling for the inclusion for examination of relatively larger numbers of cases of the special type. The following table (No. 1) shows the number, nature and percentage proportions of the defects discovered on the inspection of 14,895 children during the year.

Table 1.

Disease or Defect.	No. of Children suffering from each disease or defect.	Proportion per cent. of the number suffering to the number examined.
Skin : Contagious (excluding Ringworm) ...	279	1.90
Skin : Non-contagious ...	83	0.66
Ringworm of head ...	72	0.49
Ringworm of body ...	17	0.12
Heart disease ...	139	0.94
Anæmia ...	425	2.98
Lung disease (non-tuberculous) ...	348	2.36
Nervous affections ...	43	0.29
Mentally defective ...	66	0.45
Enlarged tonsils ...	692	4.70
Mouth Breathers ...	855	5.81
Adenoids ...	551	3.74
Enlarged glands (non-tuberculous) ...	1649	11.20
Defective speech ...	145	0.99
External eye disease... ..	372	2.53
Squint ...	286	1.94
Defective vision ...	2161	14.68
Ear disease ...	278	1.89
Deafness ...	195	1.32
Carious teeth (4 or more) ...	2285	15.52
Rickets ...	8	0.05
Hernia ...	21	0.14
Deformities and Tumours ...	157	1.07
Enlarged Thyroid Gland ...	—	—
Infectious Disease ...	14	0.10
Tuberculosis of Lungs ...	19	0.13
"    "    Glands ...	24	0.16
"    "    Bone ...	10	0.07
"    "    other parts ...	8	0.05
"    "    all parts ...	61	0.41
Subnormal Nutrition ...	1305	8.87
General Neglect ...	142	0.10
Pediculosis ...	63	0.43
Other diseases ...	133	0.90

**Table II.** Return of Defects found in the course of Medical Inspection in 1920.

Disease or Defect.	Code Groups.		Specials.		
	No. referred for treatment.	No. requiring to be kept under observation.	No referred for treatment.	No. requiring to be kept under observation.	
Malnutrition ...	1161	—	143	1	
Uncleanliness—Head ...	782	—	236	—	
Body ...	494	—	23	—	
Skin. {	Ringworm—Head ...	53	—	19	—
	Body ...	11	—	6	—
	Scabies ...	58	—	16	—
	Impetigo ...	147	—	63	—
	Other diseases (non-Tubercular) ...	68	—	24	—
	Eye. {	Blepharitis ...	170	—	77
Conjunctivitis ...	16	—	14	—	
Keratitis ...	—	—	—	—	
Corneal Ulcer ...	—	—	—	—	
Corneal Opacities ...	48	—	11	—	
Defective Vision ...	1468	—	693	—	
Squint ...	209	—	77	—	
Other Conditions ...	25	—	11	—	
Ear. {	Defective Hearing ...	103	—	92	—
	Otitis Media ...	—	—	—	—
	Other Ear Diseases ...	170	—	108	—
Nose and Throat. {	Enlarged Tonsils ...	497	—	155	—
	Adenoids ...	362	—	149	—
	Enlarged Tonsils and Adenoids ...	23	—	17	—
Other Conditions ...	—	—	—	—	
Enlarged Cervical Glands (Non-Tubercular) ...	1555	—	94	—	
Defective Speech ...	97	—	48	—	
Teeth.—Dental diseases ...	1814	—	471	—	
Heart and Circulation. {	Heart disease—Organic ...	43	8	25	5
	Functional ...	35	1	21	1
	Anæmia ...	286	2	137	—
Lungs. {	Bronchitis ...	316	—	32	—
	Other Non-Tubercular Diseases ...	—	—	—	—
	Pulmonary: Definite ...	6	3	6	4
Suspected ...	35	4	37	8	
Tuberculosis. {	Non-Pulmonary: Glands ...	12	—	12	—
	Spine ...	—	—	—	—
	Hip ...	—	—	3	—
	Other Bones & Joints ...	4	—	6	2
	Skin ...	—	—	—	—
	Other Forms ...	2	—	1	—
Nervous System. {	Epilepsy ...	7	—	3	—
	Chorea ...	12	1	8	2
	Other conditions ...	3	—	7	—
Deformities {	Rickets ...	5	—	3	—
	Spinal Curvature ...	24	—	5	—
	Other Forms ...	83	—	66	—
	Other defects and diseases ...	229	—	109	—

Number of Individual Children having Defects which required Treatment or to be kept under observation—7578.

While table I gives the number of children found suffering from certain defects or ailments and the percentage proportions, table II. shows the number of defects discovered among the 14,895 children examined, together with the number in the code and special groups referred for treatment or ear-marked for further observation.

### UNCLEANLINESS.

The standard of personal cleanliness amongst the school children appears to be steadily improving. The percentage of cases of bad pediculosis of the head has fallen from 1.96 per cent in 1919 to 0.43 per cent in 1920. The periodical cleanliness surveys of the children, although not carried out as systematically or as frequently as one would wish owing to the insufficiency of school nurses available for the purpose, have nevertheless served to bring to light more cases of lesser degree of uncleanness of the head than in recent years the percentage proportion in 1920 being 6.87 per cent as compared with 5.47 in the previous year. These surveys, even to the limited and spasmodic extent mentioned, have been instrumental in stimulating parental interest and in focussing the attention of the children themselves upon the importance of maintaining personal cleanliness.

### NUTRITION, CLOTHING AND FOOTGEAR.

The percentage of cases of defective nutrition found during the year was 8.87 as compared with 6.41 during the previous year. In estimating malnutrition other factors besides the body weight and its ratio to the height have of course to be taken into consideration and the personal element—varying with the *personnel* of the staff—in estimating these less easily determinable circumstances or influences and their results probably accounts for the apparent increase.

The impression left in the mind of those daily in contact with the children attending our elementary schools is that they were less well-nourished in 1920 than in the previous year. The most common causes of mal-nutrition were referred to in last year's report and continue to be operative. Whenever practicable the parents of the children showing evidence of this condition are interviewed by the Medical Inspectors at the school or clinic and the causes operating in each case are as far as possible determined and advised upon. Cases due to poverty are comparatively infrequent. Those among them suspected to be in a pre-tubercular state are also kept under observation and re-examined from time to time. As regards the clothing and footgear our more experienced Medical Inspector holds the opinion that there has been an appreciable improvement shown since the previous year. Instances of excessive clothing are sometimes seen.

The following table gives the percentage proportion of children showing defective nutrition and possessed of inadequate or insufficient clothing or footgear at the time of their examination.

	1917.	1918.	1919.	1920.
Sub-Normal Nutrition ... ..	3.58	4.80	6.41	8.87
Inadequate or Unsuitable Clothing	2.2	3.01	4.18	3.97
Defective Footgear ... ..	1.6	4.23	3.51	3.23

### ENLARGED TONSILS AND ADENOIDS.

Our records for the year under review as compared with those of the previous year suggest that there has been a proportionate decline in the incidence of enlarged tonsils in our school children. Owing however to the fact that

a relatively larger number of "specials" were included among the children examined in recent years the reduction referred to is probably attributable to that circumstance. The percentage proportions were 7.9 and 4.7 for 1919 and 1920 respectively. In the case of adenoids the proportions have remained about the same.

The facilities in the district for dealing with these defects have not materially altered and are insufficient adequately to meet the requirements. The conditions in these respects are not likely to improve in the near future without the active intervention of the local Education Authority, there being no prospect of an early increase in the means available for dealing with these defects. While some medical practitioners afford opportunities to their patients to receive operative treatment, the majority refer these defects to the influence of time or to agencies such as hospitals which, when appealed to, prove to be already overburdened with more serious and urgent cases.

### DEFECTIVE VISION.

The proportion of children found suffering from defective vision in 1920 did not materially differ from that pertaining to the previous year, the percentage being 14.68 and 13.86 respectively.

As previously pointed out, the area of available glass provided at a school may be satisfactory without the lighting being adequate, the much-reduced penetrableness of the glass due to want of cleanliness being found to be a condition existing at some of the schools.

Another factor occasionally found operating in the production or aggravation of defective eyesight is the unnatural posture which has to be maintained by pupils obliged to use unsuitable school furniture. As an instance is given by one of the Medical Inspectors the case of a

school where, owing to lack of accommodation, some of the older boys and girls were constrained to use desks designed for much smaller children.

### MINOR AILMENTS.

It is inevitable that in a large urban district like the Rhondda a considerable number of children are discovered in the course of routine medical inspection to be suffering from the less serious but often crippling defects grouped together under the term "minor ailments." During 1920 the number in this group amounted to 2,736 among the children examined. While the majority of these quickly respond to appropriate treatment, others such as certain eye diseases, ear discharges and ringworm require perseverance and some skill in the application of the remedies which may be prescribed and the Medical Inspectors are at one in the opinion that the persistence of these defects would be much less marked and the consequent loss of school attendance and permanent damage to the sufferers would be materially diminished if means in the form of additional staff and appliances were provided by the Council for this purpose.

### CONDITION OF THE CHILDREN'S TEETH.

Our records for the year show a reduction in the number of children suffering from caries in four or more teeth, the proportions thus affected in the years 1918, 1919 and 1920 being 34.62, 24.98 and 15.52 per cent. respectively. These figures seem to justify the conclusion that there has been a real and progressive improvement in the condition of the children's teeth in recent years. A survey embracing a much longer period however serves to show that such a conclusion could not be well-founded but it will be a matter of interest and importance to ascertain whether the reduction recently observed will be maintained during the next few years. During the period from 1909 to 1913 (five years) the average proportion of

children suffering from a serious amount of dental decay as above defined was 29 per cent. whereas during the subsequent period of six years from 1914 to 1919 the proportion was 32 per cent. These figures are based upon the observations of a succession of assistant school medical officers whose accuracy and powers of observation and concentration showed considerable variation. When the dentist, with his special knowledge and experience, with the assistance of dental probe and mirror and aiming at a greater degree of accuracy, carried out the examinations no fewer than 94 per cent. of those examined were considered to require treatment for carious condition of the teeth.

The outstanding and material fact to be noted is that the vast majority of our school children are at present suffering from a defect which is now or is liable at any moment to become painful, disturbing and a cause of absence from school and which exposes the sufferer to risks that, though more remote, are when they materialise more grave in their ultimate effects.

#### **TUBERCULOSIS IN SCHOOL CHILDREN.**

The number of children found suffering from one or more forms of tuberculosis throughout the year was 61, equivalent to 0.41 per cent. of those examined. Of these no fewer than 42 were discovered among the tuberculosis contacts. The systematic examination of these contacts over a number of years has helped to discover many scores of cases at a much earlier stage than if left until the disease became much more advanced and obvious. The many advantages of early diagnosis were thus gained. The children definitely diagnosed as tuberculous were referred to their medical attendants through whom the facilities for observation and treatment possessed by the National Welsh Memorial Association then became available. On the other hand 184 children in a condition only suspected to be tuberculous or pre-tubercular were kept

under observation by the School Medical Service staff and periodically examined for evidence of active tuberculosis.

The following table provides information in tabular form as to the categories and the classes from which the contacts were drawn.

**Table showing the result of the examination of Tuberculosis Contacts.**

Result of Examination.	Sex.	Totals	Among the En- trauts.	Among the Inter- medi- ates.	Among the Leavers.	Among the Remaining Children selected.
Positive	Boys ...	21	3	2	2	14
	Girls ...	21	8	1	2	10
Doubtful	Boys ...	27	9	2	4	12
	Girls ..	33	9	2	5	17
Negative	Boys ...	182	24	20	34	104
	Girls ...	179	47	18	30	84
	Boys ...	230	36	24	40	130
	Girls ...	233	64	21	37	111
	Totals...	463	100	45	77	241

It is noteworthy that among these contacts 9 per cent. were pronounced to be definitely tuberculous and this proportion is in marked contrast with the 0.41 found at the routine medical examinations during the same period.

**EXCEPTIONAL CHILDREN.**

It has been possible during the year under review to obtain information in detail regarding a large number of exceptional children in the district. Thus special measures were taken to obtain a list of the mentally deficient in the area and their medical examination was proceeding at the end of the year. A similar survey of children suffering from physical defects was made. A summary of the information thus obtained is provided in the following table (Table III.):—

**Table III.**—Numerical Return of all Exceptional Children in the Area in 1920.

		Boys.	Girls.	Total.
Blind (including partially blind)	Attending Public Elementary Schools	1	1	2
	Attending Certified Schools for the Blind	4	3	7
	Not at School	—	1	1
Deaf and Dumb (including partially deaf)	Attending Public Elementary Schools	3	4	7
	Attending Certified Schools for the Deaf	7	5	12
	Not at School	—	1	1
Mentally Deficient	Attending Public Elementary Schools	37	29	66
	Attending Certified Schools for Mentally Def. Children	—	—	—
	Notified to the Local Con'rol Authority by Local	—	—	—
	Education Authority during the Year	10	8	18
	Not at School	—	—	—
Imbeciles	At School	2	1	3
	Not at School	—	2	2
Idiots.	At School	2	2	4
	Not at School	—	—	—
Epileptics.	Attending Public Elementary Schools	4	6	10
	Attending Certified Schools for Epileptics	—	—	—
	In Institutions other than Certified Schools	—	—	—
	Not at School	—	—	—

	Boys.	Girls.	Total.
Attending Public Elementary Schools	9	10	19
Attending Certified Schools for Physically Defective Children	—	—	—
In Institutions other than Certified Schools...	—	—	—
Not at School	—	—	—
Attending Public Elementary Schools	3	6	9
Attending Certified Schools for Physically Defective Children	—	—	—
In Institutions other than Certified Schools...	—	—	—
Not at School	—	—	—
Attending Public Elementary Schools	50	28	78
Attending Certified Schools for Physically Defective Children	—	—	—
In Institutions other than Certified Schools...	—	—	—
Not at School	—	—	—
Attending Public Elementary Schools	None specially ear-	None specially ear-	None specially ear-
Attending Open Air Schools	marked, there being	marked, there being	marked, there being
Attending Certified Schools for Physically Defective Children, other than Open-Air Schools	no open-air school	no open-air school	no open-air school
Not at School	available.	available.	available.
Retarded 2 years	104	88	192
Retarded 3 years	51	31	82
Imbeciles	2	—	2
Idiots	—	—	—

Pulmonary Tuberculosis.	...
Crippling due to Tuberculosis.	...
Physically Defective.	...
Crippling due to causes other than Tuberculosis, i.e., Paralysis, Rickets, Traumatism.	...
Other Physical Defectives, e.g., Delicate and other Children suitable for admission to Open-Air Schools; Children suffering from severe Heart Disease.	...
Dull or Backward.	...
No. of Children notified to the Local Control Authority.	...

The district at present possesses no institution or special facilities for dealing with these exceptional children. When conditions permit, the provision of means designed to meet the various needs of the defective children within the area will form one of our most clamant problems.

### THE METHOD AND RESULTS OF FOLLOWING UP DEFECTIVE CHILDREN.

The following up of the children found defective in the course of the medical examinations is undertaken by twelve school nurses, ten of whom are engaged in health visiting also to the extent of about two-thirds of their time, while the remaining two give their services in the main to the dental sub-department.

Each nurse is given periodically a list of the defective children living in her district and visits the homes of such children at regular intervals to advise or urge the parents to have the appropriate treatment carried out or, where the treatment is undertaken by the Council, to arrange in accordance with the adopted method for the children's attendance at the centres at the appropriate time on the specified days. In any event the results of their visits are recorded on cards designed for the purpose. In cases of defective vision, in which glasses are prescribed, not fewer than three attendances are required in each instance, opportunities being thus given the ophthalmic surgeon to check the correctness and position of the lenses and the suitability, as regards fit and quality, of the frames supplied.

In the course of 1920, the school nurses attended the medical inspections carried out at the schools during 314 sessions and at other times they visited the schools on 814 occasions. They also paid 10,783 visits to the homes in

connection with the following up of defective children and spent 22 sessions in attendance at the clinic.

The results obtained show considerable improvement when compared with recent years. Dental defects received attention to the extent of 64 per cent. and minor ailments up to 55 per cent. In regard to nose and throat cases, 22 per cent. were treated by operation and 33 per cent. by other remedial measures. In the case of visual defects however only 20 per cent. of those discovered were attended to owing to the necessity to suspend the examinations carried out on behalf of the Council on account of the fire at the Ystrad Clinic. In view of the pending completion of the adaptation of the Ynyshir Clinic for the purpose of temporarily filling the gap caused by the fire arrangements were being made at the end of the year for Dr. Myler, the eye surgeon, to devote much more time to the examination of school children on behalf of the Council after the resumption of the work.

Of the 11,260 children examined throughout the year, 5,193 were referred for treatment and of these 2,548, or 49 per cent., were ascertained at the re-examination carried out by the assistant school medical officers to have received treatment.

The following tables (Table IV. A. B. C. & D., Table V. and Table VI.) provide statistical information in the form required by the Board of Education. Observations thereupon appear in the subject matter of the report.

**Table IV. A.**—Treatment of Minor Ailments during 1920.

Disease or Defect.	Number of Children			
	Referred for Treatment during 1920.	Treated		
		Under Local Education Authority's Scheme.	Other wise.	Total.
Skin—				
Ringworm—Head ..	72	—	35	35
Ringworm—Body ..	17	—	7	7
Scabies ..	74	—	34	34
Impetigo ..	210	—	142	142
Minor Injuries ..	—	—	—	—
Other Skin Diseases ..	92	—	135	135
Ear Disease ..	278	—	144	144
Eye Disease (External and other)	372	—	215	215
Miscellaneous ..	1616	—	803	803

**Table IV. B.**—Treatment of Visual Defect during 1920.

Referred for Treatment ... ..	No. of Children.
	2447
Submitted { Under Local Education Authority's Scheme	
{ Clinic or Hospital ... ..	249
to { By Private Practitioner or Hospital ... ..	162
{ Otherwise ... ..	71
Refraction. { Total ... ..	482
For whom glasses were prescribed ... ..	451
For whom glasses were provided ... ..	339
Recommended for treatment other than by glasses ... ..	1
Received other forms of treatment ... ..	—
For whom no treatment was considered necessary ... ..	31

**Table IV. C.**—Treatment of Defects of Nose and Throat during 1920.

			No. of Children.
Referred for Treatment during 1920	...	...	1203
Received Operative Treatment	{	Under Local Authority's Scheme	—
		By Private Practitioner or Hospital	411
		Total ... ..	411
Received other Forms of Treatment	...	...	598

**Table IV. D.**—Treatment of Dental Defects during 1920.

1. No. of Children dealt with.	6-8 years.	Specials.	Totals.
(a) Inspected by Dentist	1810	422	2232
(b) Referred for Treatment	1665	422	2087
(c) Actually Treated	984	347	1331
(d) Re-treated	—	—	—
<b>2. Particulars of Time given and of Operations undertaken.</b>			
(1) No. of half-days devoted to Inspection...	...	...	31
(2) No. of half-days devoted to Treatment	...	...	315
(3) Total No. of attendances made by the children at the Clinic	...	...	1645
(4) No. of permanent teeth	{	Extracted	192
(5) teeth	{	Filled	77
(6) No. of temporary teeth	{	Extracted	3086
(7) teeth	{	Filled	909
(8) Total No. of Fillings...	...	...	986
(9) No. of Administrations of General Anæsthetics included in (4) and (6)	...	...	48
(10) No. of other operations	{	Permanent Teeth	—
(11) operations	{	Temporary Teeth	394

**Table V.**—Summary of Treatment of Defects as shown in Table IV. (A.B.C.D. and F., but excluding E.), during 1920.

Disease or Defect.	Referred for Treatment during 1920.	Number of Children.		
		Treated.		
		Under Local Education Authority's Scheme.	Other wise.	Total.
Minor Ailments ...	2731	—	1515	1515
Visual Defects ...	2447	249	233	482
Defects of Nose and Throat ...	1203	—	1009	1009
Dental Defects ...	4372	1331	1655	2986
Other Defects ...	1956	—	703	703
<b>Total ...</b>	<b>12,709</b>	<b>1,580</b>	<b>5,115</b>	<b>6,695</b>

**Table VI.**—Summary relating to Children Medically Inspected at the Routine Inspections during the Year 1920.

(1) The Total number of Children medically inspected at the routine inspections ... ..	11260
(1) The number of Children in (1) suffering from—	
Malnutrition ... ..	1161
Skin Disease ... ..	337
Defective Vision (including Squint) ... ..	1677
Eye Disease ... ..	259
Defective Hearing ... ..	103
Ear Disease ... ..	170
Nose and Throat Disease ... ..	882
Enlarged Cervical Glands (non-tubercular) ... ..	1555
Defective Speech ... ..	97
Dental Disease ... ..	1814
Heart Disease—	
Organic ... ..	51
Functional ... ..	36
Anæmia ... ..	286
Lung Disease (non-tubercular) ... ..	316
Tuberculosis—	
Pulmonary } definite ... ..	9
} suspected ... ..	39
Non-Pulmonary ... ..	18
Disease of the Nervous System ... ..	43
Deformities ... ..	112
Other defects and diseases ... ..	229
(3) The number of Children in (1) suffering from defects (other than uncleanliness or defective clothing or foot-gear) who require to be kept under observation (but not referred for treatment) ... ..	19
(4) The number of Children in (1) who were referred for treatment (excluding uncleanliness, defective clothing, &c.) ... ..	5193
(5) The number of Children in (4) who received treatment for one or more defects (excluding uncleanliness, defective clothing, &c.) ... ..	2548

## TREATMENT CARRIED OUT BY THE LOCAL EDUCATION AUTHORITY.

While there was on the whole some increase in the amount of work carried out by the Council, a serious interruption was caused by the fire which occurred at the Ystrad Clinic in the course of the year. The direct assistance of the Council in this direction has hitherto been limited to the treatment of the children's teeth and to the examination of eyes showing visual defects and both these activities were seriously interfered with by the fire. As a consequence only 249 cases of defective vision were dealt with during the year (cf. Table IV. B. above).

### DENTAL TREATMENT.

Although the services of one whole-time dentist were nominally available throughout almost the whole year, there were many interruptions in the service actually rendered owing partly to the fire at the Ystrad Clinic, partly to a change in dentist about the middle of the year and partly to the disablement of each of the dentists in succession owing to indisposition from time to time.

The examinations were carried out at the schools and the treatment at the Ystrad Clinic until its destruction and afterwards, after an interval, at the Ynyshir Clinic, a nurse being in attendance in each instance. A considerable section of another nurse's time is given to the steps antecedent to treatment such as visits to the children's homes and their assembly at the Clinic at the appropriate time. A large number of parents still fail to appreciate the importance of giving attention to the condition of their children's teeth, much indifference and failure to accept the facilities for treatment available being factors which the dentist and nurses spend much time and energy in combatting. There is evidence however that the advantages of prevention as well as treatment are

gradually becoming recognised, it being found that at schools and in areas previously visited less indifference and antagonism are encountered in subsequent visits.

One session a week is set aside for cases requiring the administration of a general anæsthetic, one of the assistant school medical officers being made available for administering the anæsthetic on these occasions.

The work done in the dentist's department is shown in detail in the following tables, inspections at the schools and treatment being dealt with in separate tables.

## Summary of Dental Work carried out during the Year 1920. 1.—INSPECTION.

School.	No. of School Sessions.	Groups.	BOYS.		GIRLS.	
			Exam-ined.	Referred for Treat-ment.	Exam-ined.	Referred for Treat-ment.
Treorchy	5	{ 6-8 years { Special (other ages)	142	141	145	144
Penyreglyn	3	{ 6-8 years { Special (other ages)	17	17	8	8
Ynyshir	10	{ 6-8 years { Special (other ages)	104	92	92	85
Aberllechau	1	{ 6-8 years { Special (other ages)	—	—	—	—
Duffryn	1	{ 6-8 years { Special (other ages)	96	88	224	195
Pontygwaith	3	{ 6-8 years { Special (other ages)	3	3	74	74
Tylorstown	4	{ 6-8 years { Special (other ages)	67	64	52	49
Porth	4	{ 6-8 years { Special (other ages)	15	15	18	18
Other Schools	—	{ 6-8 years { Special (other ages)	92	88	101	96
		Specials (all ages)	1	1	3	3
			92	83	79	68
			16	16	16	16
			115	107	143	127
			23	23	11	11
			115	101	114	100
			—	—	—	—
			120	120	134	134
Totals.	31		1018	959	1214	1128
						714

## 2.—TREATMENT.

School.		Extractions.		Fillings.		Dressings.		General Anæsthetic.	
		Temporary	Permanent.	Temporary	Permanent.	Temporary	Permanent.	Nitrous Oxide	Other.
Treorchy ...	Boys	360	17	120	17	60	—	—	—
	Girls	342	8	114	8	57	—	—	—
Penyreglyn...	Boys	150	—	50	—	25	—	—	—
	Girls	144	—	48	—	24	—	—	—
Ynyshir ...	Boys	77	—	33	—	27	—	—	—
	Girls	236	17	92	10	67	—	—	—
Aberllechau ...	Boys	186	1	57	3	14	—	—	—
	Girls	106	1	54	4	33	—	—	—
Duffryn ..	Boys	208	11	55	4	2	—	—	—
	Girls	180	—	46	2	2	—	—	—
Pontygwaith	Boys	195	7	46	1	21	—	2	—
	Girls	128	10	22	3	5	—	6	—
Tylorstown ...	Boys	205	24	58	2	11	—	—	5
	Girls	173	4	64	6	10	—	—	6
Porth ...	Boys	13	7	—	—	5	—	—	—
	Girls	3	1	—	—	—	—	—	—
Other Schools	Boys	216	34	22	8	6	—	4	5
	Girls	164	50	28	9	25	—	5	15
Totals.		3086	192	909	77	394	—	17	31

It is to be understood that each of the clinics was available for only a portion of the year, the Ystrad Centre only until the occurrence in March of the fire which completely destroyed it and the Ynyshir Centre only for the latter half of the year. Both the centres were also utilised in the interests of Maternity and Child Welfare as long as they were available.

### The Ystrad and Ynyshir Clinics.

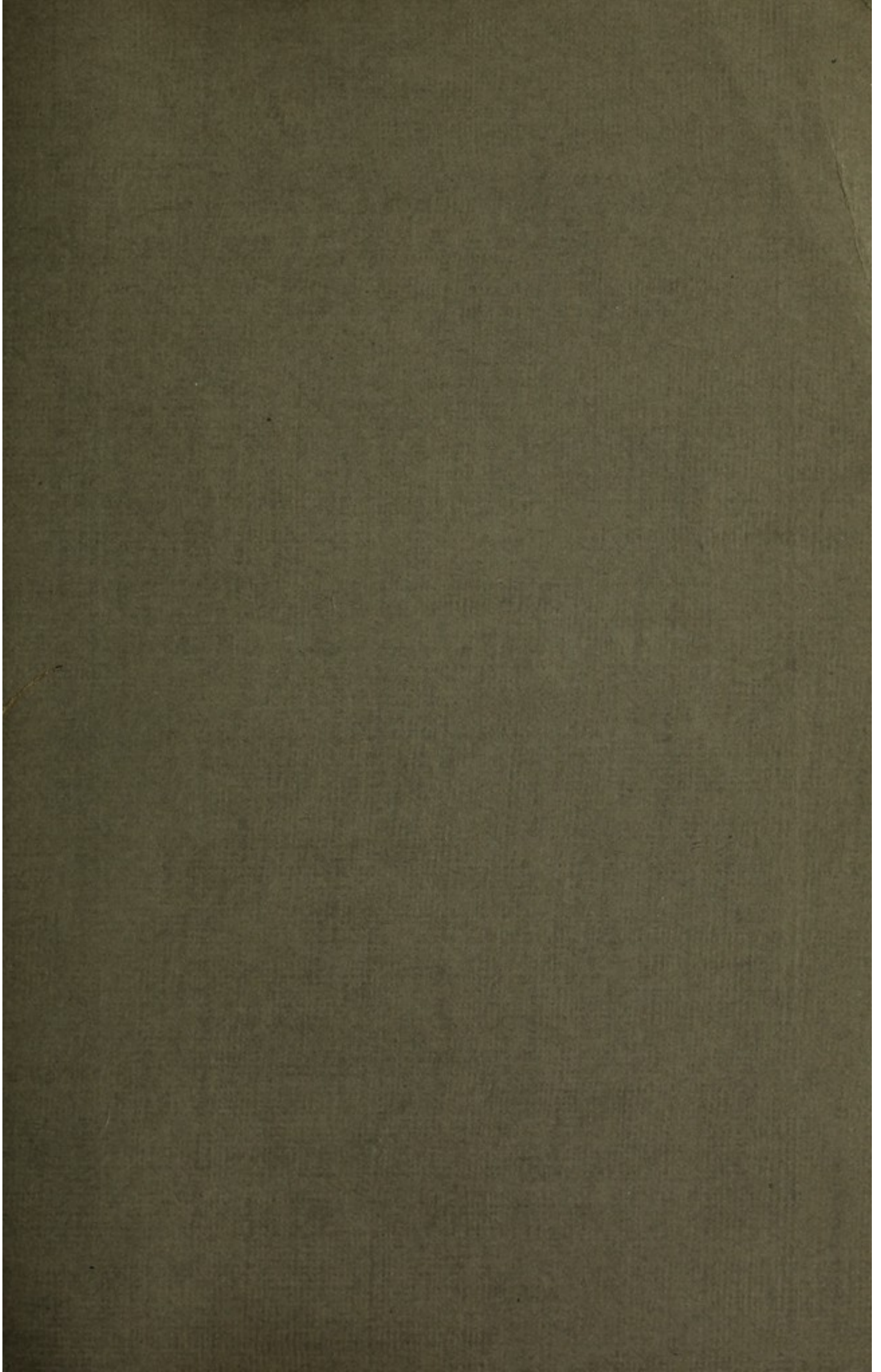
Summary of work carried out at these Centres in 1920 in the interests of the School Medical Service.

	YSTRAD.			YNYSHIR.		
	Times used.	No. Examined.	No. referred for further Examination.	Times used.	No. Examined	No. referred for farther Examination.
Defective Vision	22	249	236	—	—	—
Special Examinations	11	102	7	32	249	82
Pupil Teacher Candidates	—	—	—	10	59	14
TOTALS...	33	351	243	42	308	96

The Year and Yearly Changes

Statement of the ... of the ...

Year	...	...	...	...	...
1897	...	...	...	...	...
1898	...	...	...	...	...
1899	...	...	...	...	...
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1910	...	...	...	...	...
1911	...	...	...	...	...
1912	...	...	...	...	...
1913	...	...	...	...	...
1914	...	...	...	...	...
1915	...	...	...	...	...
1916	...	...	...	...	...
1917	...	...	...	...	...
1918	...	...	...	...	...
1919	...	...	...	...	...
1920	...	...	...	...	...
1921	...	...	...	...	...
1922	...	...	...	...	...
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1926	...	...	...	...	...
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1928	...	...	...	...	...
1929	...	...	...	...	...
1930	...	...	...	...	...
1931	...	...	...	...	...
1932	...	...	...	...	...
1933	...	...	...	...	...
1934	...	...	...	...	...
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1937	...	...	...	...	...
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1943	...	...	...	...	...
1944	...	...	...	...	...
1945	...	...	...	...	...
1946	...	...	...	...	...
1947	...	...	...	...	...
1948	...	...	...	...	...
1949	...	...	...	...	...
1950	...	...	...	...	...



Rhondda Urban District Council.

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REPORT

OF

The Medical Officer of Health

AND SCHOOL MEDICAL OFFICER

FOR

THE YEAR 1920.

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