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Contributors

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DORE AND BREDWARDINE RURAL DISTRICT COUNCIL

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1970



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Introduction

To the Chairman and Members of the Council.

Mr. Chairman and Members,

I beg to present the Annual Report of the Medical Officer of Health for

the year 1970.

In the Report will be found comment on vital statistics and environmental health of the District. In the Introduction it is proposed to discuss a subject which was touched on in passing in the Introduction to last year's Report and which follows on naturally from that Introduction.

Population Explosion

In 1650 the population of the world was 500 million, in 1850 1,000 million, in 1930 2,000 million, that is to say the first doubling took 200 years, the second 80. It has not yet reached 4,000 million, but due to greatly reduced mortality at all ages and particularly in infancy, in the underdeveloped world since the war, the present doubling time is about 35 years. If present trends continue, the decrease in the doubling time will continue to accelerate. 40% of the people of the underdeveloped world are under 15 years of age, and as these reproduce themselves in the next twenty years there will be the most spectacular growth in population yet experienced, with half as many again prospective parents at the end of the twenty years as at the beginning.

The population explosion is the result of medical technology, of death control exported by the developed world to the underdeveloped world. For example, in Ceylon the death rate at all ages fell from 22 in 1945 to 8 in 1968, as the result of control of malaria by DDT, and in the period 1940-50 death rates fell by 23% in Jamaica, 43% in Formosa, and 46% in Puerto Rico, and 24% in a sample of eighteen underdeveloped countries, as a result of control of cholera, malaria, smallpox, yellow fever, and other infectious diseases. So long as the birth rate exceeds the death rate the population will continue to grow, and these spectacular reductions in death rate have

not been accompanied by similar reductions in birth rate.

Doubling times in the underdeveloped world range from 20 to 35 years. Exemples of these are 31 years in Indonesia, 28 in Nigeria, 24 in Kenya and Turkey, 22 in Brazil, 20 in Costa Rica and the Philippines, and 19 in El Salvador. And every time a population doubles, food, power, transport, teachers, administrators, must be doubled too, just to keep standards at their previous level. But the people of the underdeveloped world have heard about the way of life in the developed world, and have seen it in magazines and films, and even on the television. They are not going to be happy with their present standards. Well, they are not going to be happy about the underdeveloped world would be the never to be developed world.

By contrast, in the developed world, doubling times range from 50 to 200 years. Examples of these are 175 years in Austria, 140 in Britain, 117 in Italy, 88 in Denmark, Norway, Poland and Spain, and 63 in Japan, Russia, and the United States. This is not to say that these countries do not have their problems. Most of them are overpopulated, by the criteron that they do not produce enough food to feed their populations. (At present they can buy food but when the food is no longer there they will not be able to do so). They also have a serious problem of population distribution with increasing overcrowding of the cities leading to increase in traffic congestion, slums, crime, unrest, and related problems.

The most urgent problem however is the problem of food. For the first time the food requirements of the increased world population exceeded world food production about 1958. Large transfers of food began to be made from the developed world to the underdeveloped world. With the increasing scarcity of food, economic laws of supply and demand began to operate in the underdeveloped world, with the bringing into production of marginal lands and reduced yields per acre. However, the resultant increase in food production kept pace with the increase in demand until 1965, when agricultural disasters, surely at least in part due to the methods adopted to increase/

to increase production, wiped out this increase, and since that date there has been less to eat per head. Only ten countries in 1966 produced more than they ate, Argentina, Australia, Burma, Canada, France, New Zealand, Rumania, South Africa, Thailand, and the United States. All the rest, including the giants of China, India, and Russia, had to import food.

In the thirteen years from 1967 to 1980 the population of India is expected to rise by 200 millions. The mothers are already there, they are just not old enough to bear children. If India can't feed her population now, and there is not enough food in the world now, where is the food for

that 200 million coming from?

In other parts of the world the situation is as serious, perhaps nowhere more than in the Catholic countries of Latin America. For example in Colombia the doubling time is 22 years. Before the arrival of death control a woman could expect to have two or three children survive to reproductive age if she went through ten pregnancies. Now medical technology keeps seven or eight of the ten alive, and where is the food coming from to feed them? In Costa Rica in 1966 half the population was under 15 years of age, and the doubling time was 20 years. In 1986 the population will be twice as great as in 1966. Where is the food coming from?

It is very hard to see any solution to the problem other than massive famines, which may occur within the next ten years. There will be more use of marginal land with consequent deterioration in yield per acre, and there will be the temptation to increase production by unsound methods which will lead to the permanent destruction of the land, or at least to damage which will take decades or even centuries to restore. There is nothing new about this. In the cradles of civilisation in the Middle East, deserts now occupy in many places what were once rich and productive farmlands. In Britain, the ploughing up of marginal land during the war had to be discontinued to prevent massive soil erosion. In the United States today, the agricultural value of the best farmland is declining at the rate of 1% per year, due to the methods adopted to obtain maximum production. We need not look to the sea to provide the extra food needed. The combination of overfishing and pollution makes it likely that the supply of fish will decline rather than increase. Western Europe is going to be very grateful for the surplus of agricultural production in New Zealand, Australia, and Canada, which may tide things over until stability is achieved, if in fact stability is going to be achieved. But it will be increasingly difficult for these countries to send their food to us rather than to the starving in the underdeveloped world.

For Britain the implications are clear. We must continue to try to expand our agriculture, producing for maximum output the types of food appropriate to our soil and climate, which we can produce in greatest quantity, and using methods which will retain, or if possible improve, the fertility of the soil. And we must try to set an example in greatly increased advocacy, publicity, and facilities, for contraception, remembering that if the developed world does not achieve a stable population level it has no right to demand of the underdeveloped world that it should do so.

I am,

Your obedient Servant,

JOHN SLEIGH

Medical Officer of Health

Dore and Bredwardine Rural District

The Black Mountain Foothills

To the south of the Wye the foothills of the Black Mountains occupy an area of some 100 square miles and represent the less elevated eastern fringe of the main Black Mountain mass which extends into the adjoining counties of Brecon and Monmouth. Over much of the area the rocks are horizontal or only slightly inclined. The various rocks possess differing degrees of resistance, and erosion produces a markedly tabular relief.

The whole region is slightly tilted to the south east, so that the loftiest hills occur on the northern and western fringes. Marbach Hill, overlooking the Wye, rises to over 1,000 feet, Cusop Hill in the north west exceeds 1,300 feet, while along the Breconshire border the high moorland exceeds 2,000 feet. Elsewhere in these uplands few summits rise above the 1,000 feet level, and the topography is that of a pleasantly rolling plateau, with a general elevation of some 600 to 1,000 feet, deeply trenched by the parallel valleys of the Olchon, Escley Brook, Upper Monnow, Dulas and Dore.

These five valleys dominate the human pattern of the region.
Agriculturally they are more favoured than the bleaker uplands, and their lower structures rival in fertility the richest parts of the lowlands. They affect even more markedly the orientation of the region. Movement from east to west is effectively hampered by their deeply trenched courses, and the main routeways run NNW - SSE in conformity with the grain of the region. As a consequence the economic life of the valleys tends to focus on the town of Abergavenny lying outside the county, though a break in the hills to the east of the Golden Valley (the valley of the Dore) causes this, the most easterly of the five valleys, to be more closely connected with Hereford.

The Lowlands

These are floored mainly by red marls, giving a heavy and close textured loamy soil. They consist of an undulating river-fretted lowland ranging in elevation from 200 to 400 feet and are set within a discontinuous frame of hills. Over much of the region the red marls are masked by extensive spreads of glacial drift, ranging in character from comparatively heavy clay to lighter sands and gravels. These gravels are particularly important to agriculture and water supply.

The Wye Valley

The Wye is almost entirely lowland in its affinities. Its physical conditions consist of a lzily meandering stream, fringing stretches of alluvium liable to flood, and discontinous spreads of terrace gravel. Its economic significance is fourfold. It serves as a routeway, as a source of water supply, as a centre of attraction for holiday makers and fishermen, and it is an important element in the agricultural economy of the District.

The South Eastern Hills

These have a generally subdued relief which is frequently tabular in form. They represent the upturned western edge of the sandstone covering of South Herefordshire.

Section A

Statistics and Social Conditions of the Area

Dore R.D.

General Statistics

	de l'Incept es	Total	Larrel
	Dore RD	Dore RD	E & W
	1969	1970	1970
Area in acres	84,532	84,532	
Registrar General's estimate of home	11772	2000	
population, mid-year	7,750	7,710	48,988,000
Number of inhabited houses (end of year)	TOTAL DOLL	W. Emercoco	JEDW
according to Rate Books	2,453	2,469	
Rateable Value	£159,484	£166,512	
Sum represented by a penny rate	£665	£694	
Live births	Die 21 Alge		
Number	108	91	784,482
Rate per 1000 population	13.9	11.8	16.0
Illegitimate live births per cent of total	THEY WELL	Marin State of the	Marsh.
live births	6.5	8.8	8.2
Stillbirths	A THE PART OF	STATE OF THE PARTY	MINDA II.
Number	2	2	10,341
Rate per 1000 total live and still	THE PERSON NAMED IN	Name and the last	The second secon
births	18.2	21.5	13.0
Total live and still births	110	93	794,823
Infant deaths (deaths under 1 year)	1	1	14,269
Infant mortality rates			
Total infant deaths per 1000 total	0.7		40.0
live births	9.3	11.0	18.2
Legitimate infant deaths per 1000	0.0	42.0	17.0
total legitimate live births	9.9	12.0	17.0
Illegitimate infant deaths per 1000	0.0	0.0	26.0
total illegitimate live births	0.0	0.0	20.0
Neonatal mortality (deaths under 4 weeks per 1000 total live births)	9.3	11.0	12.3
Early neonatal mortality (deaths under	1.5	11.0	12.7
1 week per 1000 total live births)	9.3	0.0	10.6
Perinatal mortality (stillbirths and deaths	1.5	is a monna	10.0
under 1 week combined per 1000			
total live and still births)	27.3	21.5	23.5
Maternal mortality (including abortion)	-12		
Number of deaths	0	1	147
Rate per 1000 total live and still			
births	0.00	10.80	0.18
Deaths	nnoo amaka	total condi-	n vidg
Number	68	86	575,213
Rate per 1000 population	8.8	11.2	11.7
not reache to outnot a se trigger relew to co			

General Statistics

	Sth Hfds 1969	Sth Hfds 1970	E & W
Area in acres	208,264	208,264	
Registrar General's estimate of home	307	200,204	
population, mid year	37,560	37,380	48,988,000
Number of inhabited houses (end of year)	21,72	365	COCH MCCT
according to Rate Books	12,506	12,719	
Rateable Value		£1,058,567	
Sum represented by a penny rate Live births	£4,299	£4,411	
Number	556	483	784,482
Rate per 1000 population	14.8	12.9	16.0
Illegitimate live births per cent of total	1400		1959 8281
live births	8.5	5.6	8.2
Stillbirths		UYul	1961 7840
Number	8	7	10,341
Rate per 1000 total live and still		06	1963
births .	14.2	14.3	13.0
Total live and still births	564	490	794,823
Infant deaths (deaths under 1 year)	9	4	14,269
Infant mortality rates		1111	1361 1111
Total infant deaths per 1000 total			
live births	16.2	8.3	18.2
Legitimate infant deaths per 1000		0,4	
total legitimate live births	15.7	8.8	17.0
Illegitimate infant deaths per 1000			
total illegitimate live births	21.3	0.0	26.0
Neonatal mortality rate (deaths under			
4 weeks per 1000 total live births)	10.8	6.2	12.3
Early neonatal mortality rate (deaths	TOYA -foll		
under 1 week per 1000 total live			
births)	7.2	4.1	10.6
Perinatal mortality rate (stillbirths and	+011	.ovi	
deaths under 1 week combined per			
1000 total live and still births)	21.3	18.4	23.5
Maternal mortality (including abortion)	1297 129.		
Number of deaths	0	10,54 65	147
Rate per 1000 total live and still			1970
births	0.00	2.04	0.18
Deaths : alder yourself alist no chan s	ments may b	moo garwoll	Time Tr
Number	469	442	575,213
Rate per 1000 population	12.5	11.8	11.7
	309 thou 0:		

not enterestion of 1,000. During the period 1950-69 the population of It is entered to 1,750, as a real excess of 1,055 of births over destinated a net entered to 1,872.

the apies of the the term of the population has relief the the trial to disease the to the the disease the trial the disease of depopulation. It is not the birthe which are lauding. Birthe to the motion of the motion and on investment to the motion

could be the incitation of the District to retain its population, and as one

Dore R.D.

Population Changes

E	Popula- tion	Decrease	Increase	Births	Deaths	Natural Increase	Emigra- tion	Immigra- tion
1949	8589							
1950	8691		102	155	80	75		27
1951	8644	47		159	96	63	110	STATE OF
1952	8389	255		150	85	65	320	
1953	8341	48		166	90	76	124	
1954	8340	1 01		137	72	65	66	
1955	8340			126	109	17	17	
1956	8320	20		143	70	73	93	
1957	8300	20		122	90	32	52	
1958	8300			114	93	21	21	
1959	8280	20		133	61	72	92	
1960	8310		30	135	91	44	14	
1961	7840	470		118	94	24	494	
1962	7890		50	145	72	73	23	
1963	7800	90	- 0	137	86	51	141	
1964	7750	50		128	92	36	86	
1965	7740	10		145	80	65	75	
1966	7740			122	89	33	33	
1967	7740			132	60	72	72	
1968	7820		80	127	91	36	The Park	44
1969	7750	70		108	68	40	110	-
1970	7710	40		91	86	5	45	

This table may be summarised as follows:

		ation	Bir	ths	Des	ths	Natu	ral ease	Emig	ration
	Tot- al No.	Aver- age Annual No.	Tot- al No.	Aver- age Annual No.	Tot- al No.	Aver- age Annual No.	Tot- al No.	Aver- age Annual No.	Tot- al No.	Aver- age Annual No.
1950-59 1960-69 1950-69 1970	309 530 839	30.9 53.0 42.0 40	1405 1297 2702	140.5 129.7 135.1 91	846 832 1669	84.6 82.3 83.5 86	559 474 1033	55.9 47.4 51.7	868 1004 1872	86.8 100.4 93.6 45

The following comments may be made on this Summary table:

During the period 1950-59 the population of Dore and Bredwardine Rural District decreased by 309 from 8,589 to 8,280, as a result of an excess of 559 of births over deaths and a net emigration of 868. During the period 1960-69 the population of Dore and Bredwardine Rural District decreased by 530, from 8,280 to 7,750, as a result of an excess of 474 of births over deaths and a net emigration of 1,004. During the period 1950-69 the population of Dore and Bredwardine Rural District decreased by 839 from 8,589 to 7,750, as a result of an excess of 1,033 of births over deaths and a net emigration of 1,872. There has been an excess of births over deaths in every one of the twenty years but in spite of this the population has fallen in twelve out of the twenty, as the result of a net emigration in every year except two. This is a disastrous It is not the births which are lacking. rate of depopulation. more than adequate to maintain the population and an increase in the number of births will only result in an increase in the volume of emigration. fault is the inability of the District to retain its population, and as can be seen from the figures taking the two ten year periods with one another, the volume of emigration is increasing.

Population Changes

Year	Popula- tion	Decrease	Increase	Births	Deaths	Natural Increase	Emigra- tion	Immigra- tion
		44202	91.9	m)	a.Car			
1949	38379							
1950	38281	98		639	472	167	265	
1951	38020	261		678	502	176	437	
1952	37750	270		654	444	210	480	
1953	37817		67	637	461	176	109	
1954	38010		193	575	444	131		62
1955	37950	60		581	482	99	159	
1956	37830	120		601	458	143	263	
1957	37740	90		570	458	112	202	
1958	37760		20	586	456	130	110	
1959	37750	10		564	436	128	138	
1960	37810		60	609	464	145	85	
1961	36300	1510		575	483	92	1602	
1962	36580		280	608	439	169	Desiration Contract	111
1963	36610		30	615	460	155	125	
1964	37010		400	615	438	177		223
1965	37280		270	· 587	416	171		99
1966	37420		140	584	436	148	8	
1967	37640		220	572	394	178		42
1968	37620	20		532	441	91	111	20.00
1969	37560	60		556	469	87	147	
1970	37380	180		483	442	41	221	

This table may be summarised as follows:-

	The second name of	ation	Bir	ths	Dea	ths	Natu	ral	Emigr	ation
	Tot-	Aver- age	Tot-	Aver- age	Tot-	Aver- age	Tot-	Aver- age	Tot-	Aver- age
	No.	Annual No.	No.	Annual No.	No.	Annual No.	No.	Annual No.	No.	Annual No.
1950-59 1960-69 1950-69 1970	629 190 819	62.9 19.0 41.0 180	6085 5853 11938	608.5 585.3 596.9 483	4613 4440 9053	461.3 444.0 452.7 442	1472 1413 2885	147.2 141.3 144.3 41	2101 1603 3704	210.1 160.3 185.2 221

The following comments may be made on this Summary table:

During the period 1950-69 the population of South Herefordshire decreased by 629, from 38,379 to 37,750, as a result of an excess of 1,472 of births over deaths and a net emigration of 2,101. During the period 1960-69 the population of South Herefordshire decreased by 190, from 37,750 to 37,560, as a result of an excess of 1,413 of births over deaths and a net emigration of 1,603. During the period 1950-69 the population of South Herefordshire decreased by 819, from 38,379 to 37,560, as a result of an excess of 2,885 of births over deaths and a net emigration of 3,704. If the figures for Ross, which has a net immigration, probably from outside, are subtracted, the position is even worse. During the period 1950-59 the population of South Herefordshire excluding Ross decreased by 669, from 33,089 to 32,420, as a result of an excess of 1,479 of births over deaths and a net emigration of 2,148. During the period 1960-69 the population of South Herefordshire, excluding Ross, decreased by 1,430 from 32,420 to 30,990, as a result of an excess of 1,184 of births over deaths and a net emigration of 2,614. During the period 1950-69 the population of South Herefordshire excluding Ross decreased by 2,099, from 33,089 to 30,990, as a result of an excess of 2,663 of births over deaths and a net emigration of 4,762.

Dore R.D.

Births, Stillbirths and Infant Deaths

	m
Live	Births

	Male	Female	Total
Legitimate	45	38	83
Illegitimate	5	3	8
Total	50	41	. 91

Stillbirths

	Male	Female	Total
Legitimate Illegitimate	2		2
Total	2		2

Deaths of Infants under one year of age

	Male	Female	Total
Legitimate		The automorphism	1
Illegitimate Total		1	1

Deaths of Infants under four weeks of age

	Male	Female	Total
Legitimate Illegitimate		1	2 1
Total		1	1

Deaths of Infants under one week of age

1/070	Flores La	Total
Male	Female	TOTAL

Legitimate Illegitimate Total

Births, Stillbirths and Infant Deaths

Live Births

	Male	Female	Total
Legitimate	248.	208	456
Illegitimate Total	13 261	14 222	27 483
TOTAL	201	222	405

Stillbirths

	Male	Female	Total
Legitimate Illegitimate	3	3	6
Total	4	3	7

Deaths of Infants under one year of age

	Male	Female	Total
Legitimate Illegitimate	2	2	4.
Total	2	2	4

Deaths of Infants under four weeks of age

	Male	Female	Total
Legitimate Illegitimate	1	2	3
Total	1	2	3

Deaths of Infants under one week of age

	Male	Female	Total
Legitimate Illegitimate	1	1	2
Total	2 1 2	1 5	2

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Deaths

						0110										
Cause of Death	Total	Under	4 Weeks		A g		in	1	Ye	ದ	H	103				
	All	44	and under	7-	Y	15-		-5-	35-	4.5		-55-	9	-69-	75 and	nd
	Ages M F	Meeks M F	N F	M F	MF	M	F M	드	M F	M	Œ	M F	×	P4	N N	over
Malignant neoplasm oesophagus Walignant neoplasm	w											B		-	0	~
intestine Walignant neoplasm	2											-			- T	
Malignant neoplasm breast	WK											c		01		y y
Malignant neoplasm	7											7			-	pxl
Other malignant	4 6								Ent.	2	~	n	-		~	2
Other endocrine etc.,	-															- T
Hypertensive disease	-											700				
Ischaemic heart disease Other forms of heart	629								1 N	2		3 1	2-	4	W IC	45
disease Cerebrovascular disease	9 9										*		N	,	, ,	8 -
Other diseases of	-										-		7-	-	7	+
Influenza	07 4												~		5	
Bronchitis and												~	-		-	2
emphysema Other diseases of	-															
respiratory system Other complications of	-					god							- 1			
pregnancy, etc.	24118															
Congenital anomalies	-	-														
Motor vehicle accidents All other accidents	2 2			-		2										
	77	- 4	1 1	-	1	2	1	1	2 -	4	CV	5 8	12	8	17 22	1.

Deaths

	1	H.																						
	52	nd over		~	*	-	~	2	~		2		C1	C				4	-	63	*			10
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6	15- 2																					-		
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A. Weeks	and under	N F																						
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				80																				
			Enteritis and other	diarrhoeal diseases berculosis of	respiratory system	TB	Other infective and parasitic diseases	lasm	lasm		Tasm	lasm	Malignant neoplasm,	Malignant necylasm,	uterus	- Targetti	42		this	Other endocrine, etc.		JO E	tem	atic
1000	3		and	sis o	tory	tory	ectivitie di	neog	neoi	-	ne or	neog	neol	neo:	000	9	i amar	Sms	me11;	ocrir		8	sys	heum
dead to among	5		ritis	diarrhoeal di	respiratory s	respiratory TB	r int	Halignant neoplasm	Malignant neoplasm	stomach	nalignant neoplasm intestine	Malignant neoplasm lung bronchus	Lignant	gnant	uterus	prostate	Leukaemia Other malismant	neoplasms	Diabetes mellitus	ther endod	Anaemias	Meningitis Other diseases of	nervous system	Chronic rheumatic heart disease
2000	Comp		Ente	Tube	Late	H	Othe	liali	Mali	35.73	in	liali Ju	Mali	Mali	1001	pr	Leuk	ne	Diab	Othe	Anae	Meni	ne	Chro

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2 6.9	3 6	04.40	amental!	~ ~	2	2	-		-	1	12
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Hypertensive disease Ischaemic heart disease Other forms of heart	disease Cerebrovascular disease Other diseases of	circulatory system Influenza Pheumonia Bronchitis and	emphysema Asthma Other diseases of	respiratory system Peptic Ulcer Appendicitis Intestinal obstruction	Cirrhosis of liver Other diseases of	Nephritis and nephrosis Hyperplasia of prostate Other diseases of genito	urinary system Diseases of misculo skeletal system Other complications of	pregnancy etc. Congenital anomalies Other causes of peri- natal mortality	Symptons and ill- defined conditions liotor vehicle accidents	유민원	1 All Causes
Hype. Isch Othe	Cere	Infl Pneu Bron	Asthma Other	Pept Appe Inte	Cirr Othe	Neph Hype Othe	Dise	Cong O the	Symp lioto	Suic	Total

Dore R.D.

Vital Statistics

	Birt	hs	Sti	llbir	ths	Inf	ent De	eaths	-	aterna Deaths	and the same	1	Deaths	3
	Dore RD	E&W	Dor	e RD	E&W	Dore	e RD	E&W	Dor	e RD	E&W	Dore	e RD	E&W
	No. Rate			Rate			Rate			Rate		No.	Rate	Rate
1950	155 17.8	15.9	3		22.6	2	-	29.6	0	0.00	0.86	80		11.6
1951	159 18.4	15.5	3	18.5	23.0	6		29.7	0	0.00	0.75	96		12.5
1952	150 17.9	15.3	0	0.0	22.7	4	26.7	27.6	0	0.00	0.67	85	10.1	11.3
1953	166 19.9	15.5	1	6.0	22.4	3	18.1	26.8	0	0.00	0.71	90	10.8	11.4
1954	137 16.4	15.2	0	0.0	23.5	1	7.3	25.4	0	0.00	0.65	72	8.6	11.3
1955	126 15.1	15.0	4	30.8	23.2	5	39.7	24.9	0	0.00	0.60	109	13.1	11.7
1956	143 17.2	15.7	4	27.2	22.9	2	14.0	23.7	0	0.00	0.52	70	8.4	11.7
1957	122 14.7	16.1	5	39.4	22.5	5	41.0	23.1	0	0.00	0.45	90	10.8	11.5
1958	114 13.7	16.4	3	25.6	21.5	4	35.1	22.5	0	0.00	0.43	93	11.2	11.7
1959	133 16.1	16.5	4	29.2	20.8	5	37.6	22.2	0	0.00	0.38	61		11.6
1960	135 16.2	17.2	3	21.7	19.8	1	7.4	21.8	0	0.00	0.39	91	11.0	11.5
1961	118 15.1	17.6	5	40.7	19.0	2	16.9	21.4	0	0.00	0.34	94	12.0	11.9
1962	145 18.4	18.0	2	13.6	18.1	1	6.9	21.7	0	0.00	0.35	72	9.1	11.9
1963	137 17.6	18.2	4	28.4	17.2	4	29.2	21.1	0	0.00	0.28	86		12.2
1964	128 16.5	18.5	2		16.3	7	54.7	19.9	0	0.00	0.26	92		11.3
1965	145 18.7		0	0.0	15.8	8		19.0	0	0.00	0.25	80		11.5
1966	122 15.8	17.7	1	8.1	15.3	0	-	19.0	0	0.00	0.26	89		11.7
1967	132 17.1		3		14.8	1		18.3	0		0.21	60		11.2
1968	127 16.2		0		14.3	1		18.3	0		0.24	91		11.9
1969	108 13.9	16.3	2	18.2	13.2	1	9.3	18.1	0	0.00	0.19	68	8.8	11.9
1970	91 11.8	16.0	2	21.5	13.0	1	11.0	18.2	1	10.80	0.18	86	11.2	11.7

This table may be summarised as follows:

	Ī	Births	3	Sti	llbir	ths	Infar	nt De	aths	Mate	rnal I	Deaths	De	aths	
	Dore Tot- al No.	Ann	E&W Av Ann Rate	Dore Tot- al No.	Ann	E&W Av Ann Rate	Tot-	R.D. Av Ann Rate	Av Ann	Tot- al	Ann	Av Ann	Dore Tot- al No.	Ann	Av Ann
1950-59 1960-69 1950-69 1970	1297	16.6	17.6		16.8 18.2	22.5 16.4 19.4 13.0	37 26 63	19.5 23.3	25.6 19.9 22.7 18.2	0 0	0.00	0.60 0.28 0.44 0.18		10.1 10.5 10.3 11.2	11.7

The following comments may be made on this Summary table.

During the first part of the period the average birth rate was higher than that for England and Wales, during the second part it was lower, and during the period as a whole it was the same. This is in spite of the low proportion of women of child bearing age, the area comparability factor for births for 1970 being 1.13.

During the first part of the period the average stillbirth rate was lower than that for England and Wales, during the second part it was higher, and during the period as a whole it was lower.

During the first part of the period the average infant mortality rate was higher than that for England and Wales, during the second part it was lower, and during the period as a whole it was higher.

The number of pregnancies occurring is altogether too small to produce a maternal death rate of any significance, but it is creditable that not one maternal death occurred during the period 1950-69.

During both parts of the period, and therefore during the period as a whole, the average death rate was lower than that for England and Wales. The proportion of elderly people is similar to that for England and Wales, the area comparability factor for deaths for 1970 being 1.03, and this death rate is evidence of a healthy population.

Vital Statistics

	Birt	hs		Sti	llbir	ths	Infa	ent De	aths	_	aterna Deaths		De	aths	
	Sth Hf	ds	E&W	Sth	Hfds	E&W	Sth	Hfds	E&W	Sth	Hfds	E&W	Sth	Hfds	E&W
	No. Ra	te	Rate	No.	Rate	Rate	No.	Rate	Rate	No.	Rate	Rate	No.	Rate	Rate
1950	639 16	.7	15.9	18	27.4	22.6	13	20.3	29.6	0	0.00	0.86	472	12.3	11.6
1951	678 17	.8	15.5	17	24.5	23.0	26	38.3	29.7	1	1.44	0.75	502	13.2	12.5
1952	654 17	.3	15.3	18	26.8	22.7	13	19.9	27.6	0	0.00	0.67	444	11.8	11.3
1953	637 16	.8	15.5	10	15.5	22.4	7	11.0	26.8	1	1.55	0.71	461	12.2	11.4
1954	575 15	.1	15.2	15	25.4	23.5	22	38.3	25.4	0	0.00	0.65	444	11.7	11.3
1955	581 15	.3	15.0	18	30.1	23.2	13	22.4	24.9	0	0.00	0.60	482	12.7	11.7
1956	601 15	.9	15.7	19	30.6	22.9	15	25.0	23.7	0	0.00	0.52	458	12.1	11.7
1957	570 15	.1	16.1	17	29.0	22.5	12	21.1	23.1	0	0.00	0.45	458	12.1	11.5
1958	586 15	.5	16.4	13	21.7	21.5	14	23.9	22.5	0	0.00	0.43	456	12.1	11.7
1959	564 14	.9	16.5	13	22.5	20.8	15	26.6	22.2	0	0.00	0.38	436	11.5	11.6
1960	609 16	.1	17.2	16	25.6	19.8	6	9.9	21.8	0	0.00	0.39	464	12.3	11.5
1961	575 15	.8	17.6	15	25.4	19.0	12	20.9	21.4	0	0.00	0.34	483	13.3	11.9
1962	608 16	.6	18.0	9	14.6	18.1	16	26.3	21.7	0	0.00	0.35	439	12.0	11.9
1963	615 16	.8	18.2	12	19.1	17.2	28	45.5	21.1	0	0.00	0.28	460	12.6	12.2
1964	615 16	.6	18.5	9	14.4	16.3	.17	27.6	19.9	0	0.00	0.26	438	11.8	11.3
1965	587 15	.7	18.1	7	11.8	15.8	15	25.6	19.0	0	0.00	0.25	416	11.2	11.5
1966	584 15	.6	17.7	8	13.5	15.3	9	15.4	19.0	0	0.00	0.26	436	11.7	11.7
1967	572 15	.2	17.2	13	22.2	14.8	5	8.7	18.3	0	0.00	0.21	394	10.5	11.2
1968	532 14	.1	16.9	12	22.1	14.3	6	11.3	18.3	0	0.00	0.24	441	11.7	11.9
1969	556 14	.8	16.3	8	14.2	13.2	9	16.2	18.1	0	0.00	0.19	469	12.5	11.9
1970	483 12	.9	16.0	7	14.3	13.0	4	8.3	18.2	1	2.04	0.18	442	11.8	11.7

This table may be summarised as follows:

	Births			Sti	llbir	ths	Infa	nt Dea	aths	Mate	rnal I	Death	B De	aths	
	Sth I		E&W Av	Sth I		E&W Av	Sth I		E&W Av	Sth I		E&W Av	Sth I	-	E&W Av
	al No.	Ann Rate	Ann Rate	al No.	Ann Rate	Ann Rate	No.	Ann Rate	Ann Rate	al No.	Ann Rate	Ann Rate	al No.	Ann Rate	Ann Rate
1950-59	6085	16.0	15.7	158	25.4	22.5	150	24.7	25.6	2	0.30	0.60	4613	12.2	11.6
1960-69	5853	15.7	17.6	109	18.3	16.4	123	20.7	19.9	0	0.00	0.28	4440	12.0	11.7
50-69 1970	11938		16.6	267		19.4	273		22.7 18.2	2		0.44		12.1	11.7

The following comments may be made on this Summary table:

During the first part of the period the average birth rate was higher than that for England and Wales, during the second part it was lower, and during the period as a whole it was lower. This is due to the low proportion of women of child bearing age, the area comparability factor for births for 1970 for all the districts being above unity.

During both parts of the period, and therefore during the period as a whole, the average stillbirth rate was higher than that for England and Wales.

During the first part of the period the average infant mortality rate was lower than that for England and Wales, during the second part it was higher, and during the period as a whole it was the same.

The number of pregnancies occurring is altogether too small to produce a maternal death rate of any significance, but the two deaths which occurred during the period as a whole produced an average rate corresponding to 34.1% of that for England and Wales.

During both parts of the period, and therefore during the period as a whole, the average death rate was higher than that for England and Wales. This is due to the high proportion of elderly people, the area comparability factor for deaths for 1970

Dore R.D.

Causes of Death

	Lun	g Can	cer	Oth	er Car	ncer	Vas	ebro cular ease		Vas	dio cular ease			liac ease	
	Dor	e RD	E&W	Dor	e RD	E&W	Dor	e RD	E&W	Dor	e RD	E&W			ESIII
	No.	Rate	Rate	No.	Rate	Rate	No.	Rate	Rate	No.	Rate	Rate		Rate	
1950	1		0.28	11		1.67	10	1.15	1.48	5	0.58	1.25	22	2.53	2.21
1951	1		0.30	14		1.66	9	1.04	1.56	10	1.16	1.33	13	1.50	2.34
1952	0		0.32	12		1.67	14	1.67	1.58	7	0.83	1.40	17	2.03	2.00
1953	4		0.34	12	1.44	1.65	10	1.20	1.54	9	1.08	1.42		2.40	
1954	3		0.37	9		1.67	11	1.32	1.63	5	0.60	1.53	13.	1.56	1.87
1955	3		0.39	18	2.16	1.67	12	1.44	1.67	7	0.84	1.61	19	2.28	1.88
1956	3	0.36	0.41	11	1.32	1.67	10	1.20	1.67	6	0.72	1.70	15	1.80	1.82
1957	1		0.42	21	The second second	1.67		0.72		8	0.96	1.72	18	2.17	1.70
1958	2		0.44	12	1.45	1.68	18	2.17	1.69	10	1.20	1.86	17		
1959	4		0.46	10	1.21	1.68	9	1.09	1.66	7	0.85	1.87	7	0.85	1.58
1960	1		0.48	19	2.29	1.68	11	1.32	1.67	10	1.20	2.01		1.81	1.55
1961	1	0.13	0.49	18		1.67	12	1.53	1.67	8	1.02	2.07	24	3.06	1.57
1962	4	0.51		11	1.39	1.67	7	0.89	1.68	12	1.52	2.19		1.90	
1963	1	0.13	0.52	16	2.05	1.66	13	1.67	1.71	9	1.15	2.29	16	2.05	1.47
1964	3	0.39	0.54	13	1.68	1.67	13	1.68	1.56	13	1.68	2.24	17	2.19	and the same of th
1965	0	0.00	0.55	16	2.07	1.67	9	1.16	1.64	10-	1.29	2.38	12	1.55	
1966	1	0.13	0.56	17	2.20	1.69	14	1.81	1.64	17	2.20	2.39	13	1.68	
1967	3	0.39	0.58	7	0.90	1.70	11	1.42	1.59	16	2.07	2.67	5	0.65	
1968	1		0.59	24	3.07	1.72	14	1.79	1.65	11	1.41		11	1.41	
1969	3	0.39	0.61	15	1.94	1.74	14	1.81	1.63	18	2.32			0.90	
1970	2	0.26	0.62	22	2.85	1.74	12	1.56	1.62	21	2.72			1.43	

This table may be summarised as follows:

	Lung Cancer			Othe:	r Can	oer	Vascular Disease			Vascu Dise	ılar		Other Cardiac Disease			
12.21	Tot-	Ann	Av Ann		Av Ann	E&W Av Ann Rate	Tot-	Av Ann	Av Ann	Tot-	Av Ann	Av Ann	Dore Tot- al No.	TOTAL PROPERTY.	Av Ann	
1950-59 1960-69 1950-69 1970	18 40	0.25	0.46	130 156 286	1.99		118	1.51	1.64	124 198	1.59	2.40	135	1.82	1.22	

The following comments may be made on this summary table.

Death rates from the four main causes of death, responsible for 64.5% of all deaths in England and Wales in 1970, with death rates from cancer subdivided into those from lung cancer and those from other cancer, are shown.

Death rates from lung cancer were lower than those for England and Wales, due to different smoking habits in rural areas, and did not show the usual dramatic rise due to increased smoking which is seen in lung cancer death rates, but not in other cancer death rates as smoking is not the cause of this.

Death rates from other cancer were higher than those for England and Wales, although the proportion of elderly people is similar.

Death rates from cerebrovascular disease were lower than those for England and Wales, although the proportion of elderly people is similar.

Death rates from cardiovascular disease were lower than those for England and Wales, although the proportion of elderly people is similar.

Death rates from other cardiac disease were higher than those for England and Wales, although the proportion of elderly people is similar.

These two latter rates must however be taken together, as the shift from one to the other is partly due to a change, which has been delayed locally, in the fashion of diagnosis.

Causes of Death

	Lun	g Cano	per	Othe	er Car	ncer		ebro cular			ular ease		-	diac	
	Sth	Hfds	EAW	Sth	Hfds	E&W		Hfds	E&W		Hfds	Rate		Hfds	E&W
		Rate			Rate			Rate		No.	Rate	Rate	No.	Rate	Rate
1950	5	0.13	0.28	70		1.67	73		1.48	39		1.25		2.72	
1951	7		0.30	65		1.66	62		1.56	51		1.33		2.21	
1952	5		0.32	57		1.67	55		1.58	38		1.40		2.65	
1953	9		0.34	65		1.65	56		1.54	53		1.42		2.80	
1954	6		0.37	55		1.67	65		1.63	48		1.53		2.29	
1955	12		0.39	71		1.67	74		1.67	52		1.61		2.00	
1956	9		0.41	65		1.67	68		1.67	35		1.70		2.35	
1957	8		0.42	72		1.67	56		1.64	49		1.72		2.44	
1958	12		0.44	49		1.68	71		1.69	63		1.86		1.88	
1959	10		0.46	67		1.68	65		1.66	49		1.87		1.77	
1960	14		0.48	75		1.68	75		1.67	60		2.01		1.72	
1961	17		0.49	72		1.67	68		1.67	57		2.07		2.15	
1962	17		0.51	56		1.67	62		1.68	62		2.19		1.64	
1963	11		0.52	68		1.66			1.71	61		2.29		1.78	
1964	12		0.54	56		1.67	65		1.56	79		2.24		1.49	
1965	17		0.55	64		1.67	64		1.64	78		2.38		1.31	
1966	14		0.56	66		1.69	74		1.64	82		2.39		1.74	
1967	18		0.58	62		1.70	68		1.59	90		2.67		1.17	
1968	17		0.59	79		1.72	70		1.65	76		2.85		1.12	
1069	19	0.51	0.61	70	1.86	1.74	72	1.92	1.63	112	2.98	2.86		1.28	
1970	22	0.59	0.62	63	1.69	1.74	69	1.85	1.62	86	2.30	2.84	55	1.47	0.75

This table may be summarised as follows:

	Lung Cancer			Other	r Cano	cer	Vascu Dise	ılar	Locality	Vascular Cay				Other Cardiac Disease		
	Tot- Av A		E&W Av Ann Rate	Tot- Av A		Ann al		Av Ann	E&W Av Ann Rate	al Ann		E&W Av Ann Rate	Sth Hfds Tot- Av al Ann No. Rate		E&W Av Ann Rate	
50-59 60-69 50-69 1970	83 156 239	0.32	0.54	668	1.80	1.69	687 1332	1.85	1.64	757 1234	2.03	2.40	571 1447	1.54	1.22	

The following comments may be made on this summary table.

Death rates from the four main causes of death, responsible for 64.5% of all deaths in England and Wales in 1970, with death rates from cancer subdivided into those from lung cancer and those from other cancer, are shown.

Although death rates from lung cancer were lower than those for England and Wales, due to different smoking habits in rural areas, they showed the same dramatic rise due to increased smoking, in contrast to death rates from other cancer which did not rise as smoking is not the cause of this.

Death rates from other cancer were higher than those for England and Wales, due to the high proportion of elderly people.

Death rates from cerebrovascular disease were higher than those for England and Wales, due to the high proportion of elderly people.

Death rates from cardiovascular disease were lower than those for England and Wales, in spite of the high proportion of elderly people.

Death rates from other cardiac disease were higher than those for England and Wales, due to the high proportion of elderly people.

These two latter death rates must however be taken together, as the shift from one to the other is partly due to a change, which has been delayed locally, in the fashion of diagnosis.

Section B

General Provision of Health Services for the Area

National Health Service Act 1946

Part II

Hospital and Specialist Services

Section 3. Hospital and Specialist Services

These services are the responsibility of the Herefordshire Hospital Management Committee, Eign Street, Hereford. Phone Hereford 2012.

Part III

Local Health Authority Services

Section 21. Health Centres

Section 22. Care of Mothers and Young Children

Section 23. Midwifery

Section 24. Health Visiting

Section 25. Home Nursing

Section 26. Vaccination and Immunisation

Section 27. Ambulance Services

Section 28. Prevention of Illness, Care and After Care

Section 29. Domestic Help

Section 51. Mental Health Services

These services are the responsibility of the Herefordshire County Health Department, Bridge Street, Hereford. Phone Hereford 4281.

Part IV

General Medical and Dental, Pharmaccutical, and Supplementary Ophthalmic Services

Section 33. General Medical Services

Section 38. Pharmaceutical Services

Section 40. General Dental Services

Section 41. Supplementary Ophthalmic Services

These services are the responsibility of the Herefordshire Executive Council, St. James Road, Hereford. Phone Hereford 5606.

Laboratory Services

Public Health Laboratory Services

These services are the responsibility of the Public Health
Laboratory, County Hospital, Hereford. Phone Hereford 4696.

Specimens from South Herefordshire were reported on during the
year as follows:

Water	912
Milk	134
Ice Cream	87
Faeces	42
Food	8
	1183

Section C

Infectious and Other Notifiable Diseases

Dore R.D.

Infectious Diseases

	(exc	les lud:	ing
	M	F	
Under 1 year	Ing.	3_	
1- mor	1	-	
2-	-	1	
3-	1	1	
4-	-	2	
5-	3	-	
10-	-	-	
15-	-	-	
25 and over	-	-	
Age unknown	-	-	
Total	Z ₁ .	4	

Infective Jaundice

	M	F
Under 1 year	_	_
1-	-	-
2-	-	-
2- 5-	- 1	-
10-	_ 6	_
15-	-	_
20-	-	1
25-	-	_
35-	_	-
45-	-	_
55-	_	_
65-		
75 and over	217	
Age unknown	_	_
-6		
Total	_	1

Infectious and Other Notifiable Diseases

South Herefordshire

Infectious Diseases

	(ex	sles cluding ella)	Dyse	entery	Scar			Food Pois	oning
	M	F	И	F	M	F		М	F
Under 1 year	2	3	_	_	_	-	Under 5 years	-	_
1-	11	12		1	-	-	5-	2	-
2-	20	15	-	-	1	-	15-	1	1
3-	21	26	-	-	-	_	45-	-	-
4-	22	21	-	-	1	-	65 and over		-
5-	68	68	-	-	1	3	Age unknown	-	-
10-	5	3	-	-	-	-			
15-	1	-	-	-	-	-	Total	3	1
25 and over	1	-	-	-	-	-			
Age unknown	1	1	-	-	-	-			
Total	152	149	-	1	3	3			

	Whoo				ctive dice		culosis ratory
	М	F		M	F	М	F
Under 3 months	-	-	Under 1 year	-	-	_	and Great
3-	-	-	1-	-	-	-	-
6-	1	-	2-	1	1	-	-
9-	-	1	5-	3	5	-	NEW F WORD
1- year	-	1	10-	1	4	-	-
2-	2	2	15-	2	1	-	-
5-	-	1	20-	-	1	-	-
10-	-	-	25-	1	3	-	- 3
15-	-	-	35-	2	1	-	- 31
20-	-	-	45-	1	1	-	-
25-	-	-	55-	-	-	-	-
35-	-	-	65-	-	-	-	- 37
45-	-	-	75 and over	-	-	1	1
55-	-	-	Age unknown	-	-	-	_
65-	-	-				-	
75 and over	-	-	Total	11	17	1	1
Age unknown	-	-					
Total	3	5					

Dore R.D.

Tuberculosis

		lmon	Notific ary Total	Non-	Pulm	onary Total		Pu Male			Non		onary Total	Total
	-	male			male				male			male		
1950 1951 1952 1953 1954 1955	4 3 2 3 5 1	1 3 4 1 3	566364	2 1 2	1	3 1 2	8 7 8 3 6 5 2	1 2 2 3 1	1 2	1 3 2 5 1		1 0 000	1	1 4 2 5 1
1956 1957 1958 1959	3	1 1 2	1 4 3	1	1	1 1 1	5 4	1	1	2				2
1960 1961 1962 1963 1964	2	2	2 2 2		1	1 0 4 10	1 2 2 2		1	1				1
1965 1966 1967 1968 1969 1970	2 2 2	1	2 2 3				2 2 3	1		1				aer Ser

This table may be summarised as follows:

Average Annual Numbers

	Notifications Pulmonary Non-Pulmonary Male Fe- Total Male Fe- Total						Deaths Total Pulmonary Non-Pulmonary						Total	
	Male	Fe- male		Male	Fe- male		88 g.	Male	Fe- male		Male	Fe- male	Total	neger Name
1950-59 1960-69	0.9	0.4	1.3	0.7	0.3	1.0	4.8		0.4	1.4		0.1	0.1	1.5
1950-69 1970	1.6	1.0	2.6			0.6	3.1	0.6	0.3	0.8		0.1	0.1	0.9

The following comments may be made on this Summary table:

All numbers were lower in 1960-69 than in 1950-59 except Male Non-Pulmonary Deaths.

Although there were fewer Female Pulmonary Notifications than Male Pulmonary Notifications in 1950-59 the proportionate fall in Pulmonary Notifications in 1960-69 as compared with 1950-59 was still greater in Females than in Males.

So far as any conclusions may be drawn from such small numbers the following conclusions may be drawn.

Tuberculosis is on the decline.

Pulmonary Tuberculosis, but not Non-Pulmonary Tuberculosis, is essentially and increasingly a disease of Males. It is also essentially a disease of middle-aged Males. Medical opinion is that this is due to the breakdown of a childhood infection caused by smoking.

Tuberculosis

Notifi									Deaths					
		ulmon		Non-	-Pulm	onary	Total				Non-	Pulm	onary	Total
	Male	Fe- male	Total	Male		Total		Male		Total	Male	Fe-	Total	
	-	marre		_	male				male	DANS	-	male	O LOUIS	
1950	23	6	29	7	2	9	38	9	3	12	1		1	13
1951	26	20	46	4		9	55	4	3	7	8	2	2	9
1952	11	17	28	5	5	8	36	8	-	8	1	-	1	9
1953	12	8	20	2	1	1	21	8	3	11				11
1954	13	13	26	3	4	7	33	3	1	4				4
1955	10	8	18	1	2	3	21	1	2			1		3
1956	16	6	22	2	3		27	4	1	5		1	1	6
1957	17	5	22	3		5	25	4 3		3 5 3			- 2	3
1958		9	18	2	2	4	22	3	3	6	1		1	7
1959	9 8 2	3	11			1000	11	3	1	4	ž.			4
1960	2	3	5		3	3	8	-						eder
1961	7	4	11		3	3	14	2	1	3				3
1962	2	4 5 2	7	1		1	8	2	1	3				3
1963	2 5 7	2					7	2		2				2
1964	5		7 5	2	1	3	8	4		4				4
1965	7	3	10		2	2	12	2		2	1	1	2	4
1966	2	2	4		1	1	5							
1967	5	4		1	1	2	11	1	1	2				2
1968	6		6	1		1	7	2		2				2
1969	3	2	9652				5		1	1				1
1970	1	1	2				2		2	2				2

This table may be summarised as follows:

Average Annual Numbers

		lmon	Total	Non-	-Pulm	onary Total			monar	Total			onary Total	
1950-59 1960-69 1950-69 1970	4.4	2.5	6.9	0.5	1.1	1.6	8.5	1.5	0.4		0.1	0.1	0.2	2.1

The following comments may be made on the Summary table:

All numbers were lower in 1960-69 than in 1950-59.

All numbers for Males were higher than the corresponding numbers for Females except Male Non-Pulmonary Notifications in 1960-69 and Male Non-Pulmonary Deaths in 1950-59 and 1960-69.

Although there were fewer Female Pulmonary Notifications than Male Pulmonary Notifications and fewer Female Pulmonary Deaths than Male Pulmonary Deaths in 1950-59 the proportionate fall in Pulmonary Notifications and Pulmonary Deaths in 1960-69 as compared with 1950-59 was still greater in Females than in Males.

So far as any conclusions may be drawn from such small numbers the following conclusions may be drawn.

Tuberculosis is on the decline.

Pulmonary Tuberculosis but not Non-Pulmonary Tuberculosis is essentially and increasingly a disease of Males. It is also essentially a disease of middle-aged Males. Medical opinion is that this is due to the breakdown of a childhood infection caused by smoking.

Section D Sanitary Circumstances of the Area

Water Supply

The water supply of the area has been satisfactory in quality and quantity with the exception of the high level local supply at Clifford, where some shortage has been experienced in times of low flow from the source. This shortage was made good by tankering to the service reservoir.

Where unsatisfactory bacteriological results have been obtained on the samples taken in the district these have been investigated and action taken on the findings. This has usually entailed a visit to the property to check the conditions, a check on the chlorination at the sources, and flushing out of "dead-end" mains followed by re-sampling.

1285 dwelling houses (4100 population) are supplied from public water mains direct to the houses, as follows:

Abbeydore	44	Madley	178
Clifford	112	Newton	4
Cusop	91	Orcop	23
Dorstone	41	Peterchurch	116
Ewyas Harold	150	Rowlstone	13
Kenderchurch	14	St. Devereux	9
Kentchurch	38	Thruxton	6
Kilpeck	.31	Turnastone	2
Kingstone	258	Vowehurch	43
Llanveynoe	1	Walterstone	14
Longtown	88	Wormbridge	9
		Total	1285

The fluoride content of the water supply is less than o.1 part per million.

Sewerage and Sewage Disposal

A preliminary report on a sewerage and sewage disposal scheme for Longtown was presented to the Council by their Consulting Engineers on 31st January 1962. Three alternative schemes for sewerage of Longtown, Upper, Middle, and Lower Ponthendre, and Clodock, Longtown and Upper, Middle, and Lower Ponthendre, and Longtown only, with a different site for the sewage disposal works for each scheme, were put forward in the report. The Council decided on 12th April 1962 to proceed with the scheme for sewerage of Longtown, Upper, Middle, and Lower Ponthendre, and Clodock.

However the owner of the land on which it was proposed to site the sewage disposal works was not prepared to sell to the Council and suggested three other sites on his land which were less useful to him. These sites were investigated by the Consulting Engineers and found to be unsatisfactory and they recommended in their report dated 2nd April, 1963 that the Council should proceed with the scheme for sewerage of Longtown and Upper, Middle, and Lower Ponthendre, with the site for the sewage disposal works on land not belonging to the owner of the four alternative sites for the sewage disposal works for the scheme for sewerage of Longtown, Upper, Middle, and Lower Ponthendre, and Clodock.

Nevertheless the Council on 9th May 1963 reaffirmed their decision to proceed with the scheme for sewerage of Longtown, Upper, Middle and Lower Ponthendre, and Clodock, with the site for the sewage disposal works on land which the owner was not prepared to sell to the Council. The District Valuer was asked to negotiate for the purchase of the site with the owner, but was unsuccessful and the Council on the 9th July 1964 made a Compulsory Purchase Order for the site.

A Public Inquiry into the matter of the purchase of the site was held by an Inspector of the Ministry of Housing and Local Government on 15th December 1965. At the Inquiry the owner of the site again put forward the three other sites which the Consulting Engineers had already dismissed and the Inspector refused to confirm the Compulsory Purchase Order and recommended that the Council negotiate with the owner for the purchase of one or other of two of these sites.

Notwithstanding that the owner had himself put these sites forward, and that the Inspector had recommended that the Council negotiate with him for the purchase of one of them, permission to enter on the land to survey them was refused by the owner and a Formal Notice had to be served on him in order to obtain entry. The survey was finally carried out on 3rd April 1967 and the Consulting Engineers recommended one of these sites in their report dated 20th April 1967. This recommendation was

accepted by the Council on 1st June 1967.

However protracted negotiations with the owner eventually brought to light that he was willing to sell the land only if a property belonging to him, which it would be extremely difficult to sewer was included in the scheme. At this point the Council understandably lost heart, and the matter fell into abeyance until a series of complaints of nuisance led to the Acting Medical Officer of Health submitting a Report to the Council on 16th August 1968, in which he made the same recommendation as that made by the Consulting Engineers in their report dated 2nd April 1963, that the Council should proceed with the scheme for sewerage of Longtown and Upper, Middle, and Lower Ponthendre, with the site for the sewage disposal works on land not belonging to the owner of the four alternative sites for the sewage disposal works for the scheme for sewerage of Longtown, Upper, Middle, and Lower Ponthendre, and Clodock. This recommendation was accepted by the Council on 5th September 1968.

The Consulting Engineers in their report dated 5th December 1968 on the scheme put forward a fourth scheme for sewerage of Longtown and Upper Ponthendre only, with a further site for the sewage disposal works, and an alternative site for the sewage disposal works for the third scheme serving Longtown only. The Council decided on 27th January 1969 to proceed with the scheme for sewerage of Longtown only, and on 27th May 1969 the Clerk was authorised to write to the owners of the land required for the sewage disposal works. On the 30th June 1969 the Clerk reported that the owners of this land had replied that they were not prepared to sell the land, and on the 28th July 1969 the Council decided to have other sites investigated.

The Consulting Engineers put forward a further site for the sewage disposal works, this being the sixth site for the sewage disposal works put forward by the Consulting Engineers and to which the three unsatisfactory sites put forward by the owner of one of these may be added. The owner of the sixth site expressed his willingness to sell it to the Council, planning permission for its use for a sewage disposal works was obtained from the County Planning Authority, and the matter of negotiations for the purchase of the site were put in the District Valuer on 24th October 1969.

There on the 31st December 1970, the matter of eight years, four Consulting Engineers' Reports, four schemes, and nine sites for the sewage

disposal works, rested.

Meanwhile the nuisance in Longtown continues. The village lies on an outcrop of Old Red Sandstone, which is dense and hard, and the land therefore is unsuitable for septic tanks. There are frequent complaints of nuisance from effluents from septic tanks and foul water from sink wastes flowing into the roadside ditches and even along the road, and this is aggravated by the fact that there is a public water supply which increases greatly the volume of effluents and sink westes.

Emigration from the District is at a disastrous rate. During the period 1950-69 births exceeded deaths by 1033 but the population fell from 8589 to 7750. So net emigration was 1872. The Black Mountain foothills are the most beautiful part of Herefordshire with country of the same quality as that in the Brecon Beacons National Park. Provision of essential services could lead to a dramatic change from provision of recreational and retirement facilities based on Longtown.

Rivers and Streams

Sampling of water from rivers and streams is carried out by the Wye River Authority. The Authority also samples from time to time sewage effluent discharging into streams.

Closet Accommodation

31 Improvement Grants were made during the year and in most cases the work included conversion from pail closets or privies to water closets. A few water closets were constructed otherwise than with the aid of Improvement Grants.

It is estimated that 79% of properties now have a water carriage drainage system. Of these 22% are on main sewers and 57% have septic tank drainage.

Public Cleansing

The private contract for refuse collection was renewed again this year. No major extensions were made to the service.

Public Health Inspection of the Area

The Tabular Statement provided by the Public Health Inspector under Article 25(20) of the Public Health Officers Regulations 1959.

Bakehouses	53	Housing Survey	145
Butchers	44	Infectious Disease	
Caravan Sites	17	Licesnsed Premises	5 23
Cars on Common Land	3	Offices, Shops and Railway	
Complaints	74	Premises	40
Council Houses	65	Petroleum Licences	37
Dog Kennels	2	Refuse Collection	8
Drainage into Ditches and		Refuse Disposal	6
Water Courses	99	Rodent Control	162
Drain Tests	50	Sewage Disposal Works	200
Factories with mechanical		Smoke Nuisance	37
power	8	Water Supplies and Sampling	112
Food Hygiene Regulations	197		
		Total	1287

Shops and Offices

There are 19 premises listed under the Offices, Shops and Railway Premises Act 1963.

37 Visits were made to premises registered under the Act. No action under the Act was necessary during the year.

Camping Sites

10 Sites in the area were used for camping purposes during the year.
No licences in respect of sites have been issued by the Local
Authority under Section 269 of the Public Health Act 1936.

The estimated maximum number of campers resident in the area at one time during the summer season was 200.

Smoke Abatement

Informal action was necessary at two places during the year with a view to the abatement of nuisance from smoke in the area.

Public Swimming Baths

There are no public swimming baths in the district but four schools, Clifford, Kingstone, Longtown, and Peterchurch, have learner pools. Mains water is used to fill the pools at the beginning of the season and the water is thereafter recirculated through simple filters and chlorine is added as required. Routine colorimeter tests are made by the operator to ascertain the free chlorine content.

Section E - Housing

New	House	es			
	Numl	per of houses completed dur	ing the	year:	
	(a)	by private enterprise		32	
	(b)	by the Local Authority	ond to	Nil	
	Numi	ber of houses in course of	erection	at the end of the	year
	(a)	by private enterprise		34	
	(b)	by the Local Authority		32	
				r of inspections of	
Hous	ing .	Act 1957 Part IV Abatement	of Over	prowding	
(a)		Number of dwellings overca	owded at	t the end of the yes	r - Ni
(b)		Number of new cases of over the year	rcrowdir	ng reported during	- Ni
(c)		Number of cases of overcro	owding re	elieved during the	- Ni
(a)		Particulars of any cases in have again become overcrow Authority have taken steps overcrowding	ded afte	er the Local	- Ni
*					

Section F Inspection and Supervision of Food

The number of Food Premises in the area, by type of business

Bakers	4
Butchers	3
Grocers	29
Licensed Premises	28
Total	64

The number of Food Premises, by type, registered under Section 16 of the Food and Drugs Act 1955, or under Local Acts, and the number of Dairies registered under the Milk and Dairies (General) Regulations 1959

Ice Cream Purveyors

The number of inspections of registered Food Premises

Bakehouses	53
Butchers	44
Grocers	77
Licensed Premises	23
Total	197

The method of disposal of condemned food

Condemned food is disposed of by burial.

Special examination of a stock or of a consignment of food

29 lbs. of pork and 31 tins of assorted foods were disposed of as unfit for human consumption.

Reference to the Ice Cream (Heat Treatment) Regulations 1959-63

There are no premises which are required to be registered under these Regulations.

Details of food premises subject to the Food Hygiene (General) Regulations 1960 grouped in categories of trade carried on in them and including the following information for each category separately

(a) the number of premises

the number of premises fitted to comply with regulation 16 the number of premises to which regulation 19 applies (b)

(c) the number of premises fitted to comply with regulation 19 (d)

Bakers Butchers 3 29 Grocers Licensed Premises Total

95% of premises are fitted to comply with regulation 16. Regulation 19 applies to 95% of premises and all 95% of premises to which the regulation applies are fitted to comply with it.

A tabular statement for the inclusion of information about the post mortem inspection of animals in the form provided.

Carcages and Offal inspected and condemned in whole or in part There is no slaughterhouse in the district.

Factories Act 1961

Prescribed Particulars on the Administration of the Factories Act 1961

Part I of the Act

 Inspections for purposes of provisions as to health (including inspections made by Public Health Inspectors)

Premises	Number	Number of						
(1)	on Register (2)	Inspections (3)	Written Notices (4)	Occupiers Prosecuted (5)				
(i) Factories in which Sections 1,2, 3,4 and 6 are to be enforced by Local Authorities	-	-	-	-				
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	10 .	8	-	-				
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out- workers' premises)	-	_	-	-				
Total	10	8	-	-				

Cases in which DEFECTS were found.
 No defects were found.



