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Dunmow Rural District

REPORT

OF THE

MEDICAL OFFICER OF HEALTH,

P. JACOB GAFFIKIN, M.C.,

M.D., B.Ch., B.A.O., D.P.H.,

FOR THE YEAR

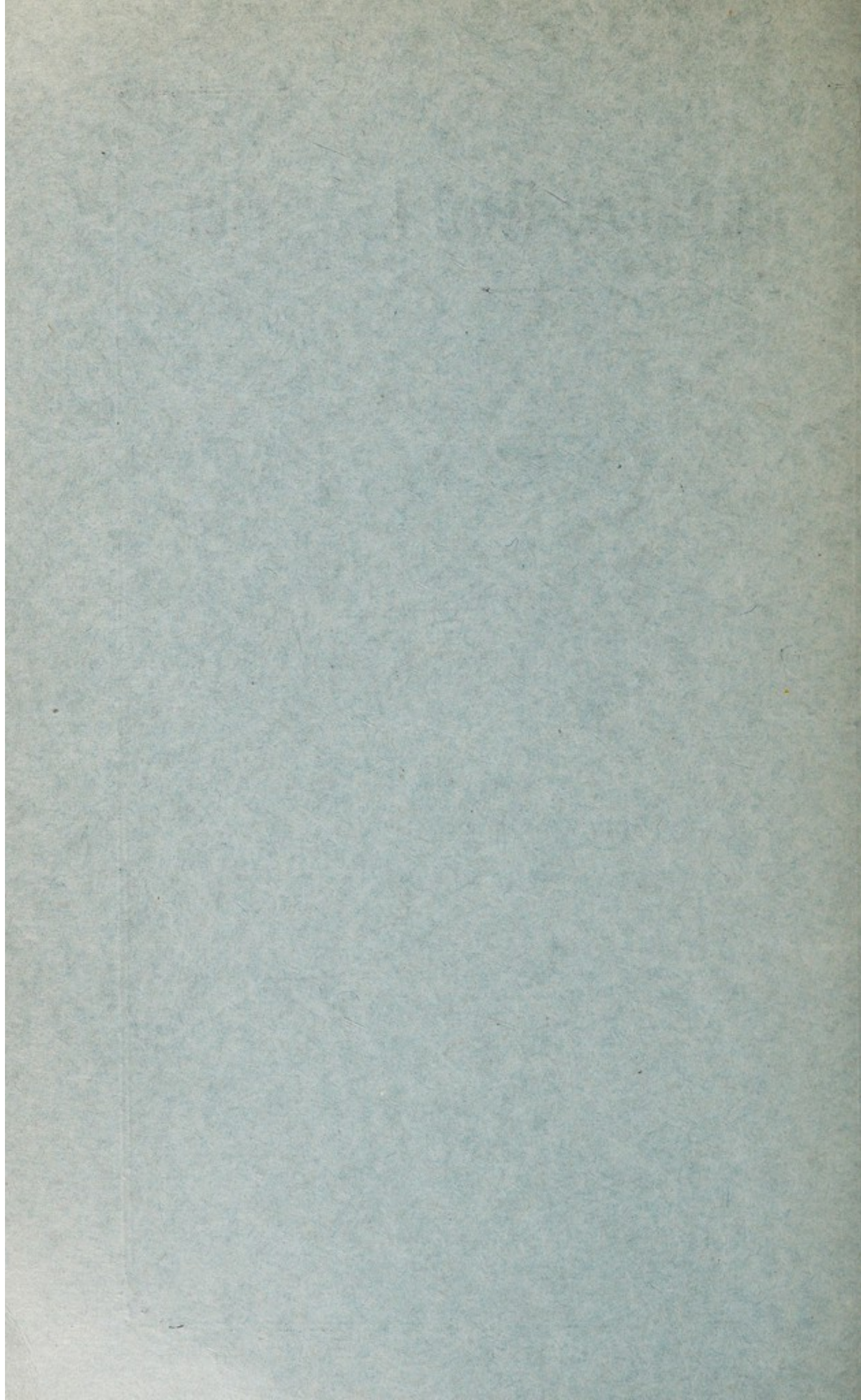
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PUBLIC HEALTH OFFICES,

BRAINTREE.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present to you my **Annual Report** upon the health and sanitary condition of the Dunmow Rural District for the year 1925.

The health of the district has been good during the year, and while the number of cases of notifiable disease is greater than in 1924, there has been nothing of the nature of an epidemic.

The urgent problem of the district is the shortage of houses for the working classes, particularly for the farm workers and I am glad that the Council is taking steps to cope with this need.

The report for 1925 is a "Survey" report as called for by the Ministry of Health every five years and I have included figures for the period under review where these appeared to be required.

I regret the delay in presenting this Report to you, but the preparation of the "Survey" report has entailed much extra labour, and under the Combined Medical Service Scheme which the Council has adopted for the appointment of a Medical Officer of Health, only one-third of my time is allotted to the service of the three Local Authorities, and very little of this time is available for the preparation of the reports.

May I take this opportunity of recording my appreciation of the assistance I have received from your Sanitary Inspector.

I have the honour to remain,

Your obedient Servant,

P. JACOB GAFFIKIN.

DUNMOW RURAL DISTRICT.

Natural and Social Conditions of the District.

The district is a large one, comprising 25 parishes and having a total area of 73,503 acres. The population at the Census of 1921 was returned as 15,372, and the estimate of population at mid-year, 1925, given by the Registrar-General is 15,110.

The physical character of the District is one of broad valleys intersected and drained by the rivers Chelmer, Blackwater and Roding and separated by gently undulating slopes, varying from 127 to 375 feet above Ordnance Datum. The district is about 16 miles in length by about 11 miles in its shortest axis.

Almost the whole of the district is on the London clay and in parts of the district large areas of boulder clay are found. The latter is not water-bearing as a rule but in many places post-glacial deposits of sand and gravel are met with, where water is usually obtainable.

The number of inhabited houses in 1921 was 3,896 and the number of families or separate occupiers was 3,923. The Assessable value of the District is £60,568, and the sum represented by a penny rate is £252.

SOCIAL CONDITIONS. The great majority of the population is engaged in agriculture. Unemployment has not been the serious problem that it has been elsewhere, and some of the rural parishes have experienced an actual shortage of labour. There is very little employment for women. At Thaxted there are some women employed in the factory for the making of confectionery but most of the girls wishing employment enter domestic service, locally, or seek employment outside the district.

Agricultural wages are fixed by the Agricultural Wages Board and at present stand at 30/- per week. Compared with the usual rate of 15/- per week in 1914 this would seem to correspond with the increase in the cost of living, but it contrasts ill with the rate paid to factory workers, when it is remembered that the farm worker is no mere labourer, but a skilled man.

TABLE 1. Vital Statistics of Whole District during 1925 and previous Years.
DUNMOW RURAL DISTRICT.

Year.	Population estimated to middle of each Year.	BIRTHS.			DEATHS.										Natural Increase (excess of Births over Deaths.)	
		Un-corrected number	NETT.		Total Registered in the District. Number.	TRANSFERABLE.		NETT.								
			Number.	Rate.		Rate, England and Wales.	of Non-residents registered in the District.	of Residents not registered in the District.	Under 1 year of Age.							
									At all Ages.							
									No.	Rate.	Standardised Rate for comparison with E. & W.	Rate E. & W.				
													No.	Rate per 1,000 Births.		Rate Eng-land and Wales.
1916	14,304	296	275	17.7	20.9	204	11	12	14	51	91	205	14.3	11.1	14.4	70
1917	15,563	213	211	14.2	17.8	216	16	23	21	100	96	223	16.7	13.0	14.4	—12
1918	14,846	251	239	15.7	17.7	183	11	27	14	58	97	199	14.7	11.4	17.6	40
1919	13,563	196	186	12.8	18.5	156	10	33	11	59	89	179	12.8	9.9	13.7	7
1920	14,523	350	343	23.6	25.4	167	7	36	21	61	80	196	13.5	10.5	12.4	147
1921	15,220	282	276	18.1	22.4	168	7	34	17	61	83	195	12.8	9.9	12.1	81
1922	15,240	275	265	17.3	20.6	160	4	39	12	45	77	195	12.9	10.0	12.9	70
1923	15,270	246	232	15.2	19.7	163	6	43	18	77	69	200	13.1	10.2	11.6	32
1924	15,250	219	215	14.1	18.8	165	5	33	5	23	75*	193	12.6	9.7	12.2	22
1925	15,110	233	215	14.2	18.3*	170	4	35	11	51	75*	201	13.3	10.3	12.2*	14

Area of District in }
Acres (land and } 73,503
inland water.) }

Total population at all ages

15,352 at Census, 1921.

Total families or separate occupiers

3,923 at Census, 1921.

* Provisional.

VITAL STATISTICS. The vital statistics for 1925 and the preceding years are set out in Table 1, so it is not necessary to recapitulate them here.

BIRTHS. The most serious feature in the vital statistics of the five years under review has been the lowering of the number of births in the district. There has been a progressive fall in the birth rate each year with the exception of 1925 and the serious nature of the situation is emphasised by the figures given in the last column of Table 1 where the "Natural increase" or excess of births over deaths is shown.

ILLEGITIMATE BIRTHS. The number of illegitimate births and the percentage of illegitimate to the total births is shown below:—

1925.	No. of Illegitimate Births.	Per Cent. of total Births.
	9	3.18

DEATHS. During 1925 170 deaths were registered in the district to which must be added the deaths of 35 residents registered outside the district and a deduction made in respect of 4 non-residents whose deaths were registered in the Dunmow district, giving a nett total of 201 and a death-rate of 13.3.

Before comparing this death-rate with other areas, it is necessary to correct it, to allow for inequalities in the age distribution of the population, and the standardised death-rate for purposes of comparison is 10.3 against a provisional figure for England and Wales of 12.2.

In table II is given an analysis of the deaths of "Residents" showing the ages at which the deaths occurred in the past 5 years, and it will be noted that of the 984 deaths registered, 607, or 61.7 per cent occurred at ages of 65 and upward.

TABLE II.
Ages at Death during the Year 1925.

DUNMOW RURAL DISTRICT.

Nett Deaths at the subjoined Ages of "Residents" whether occurring within or without the District.

	All Ages.	Under 1 year.	1 and under 2 years	2 and under 5 years	5 and under 15 years	15 and under 25 years	25 and under 45 years	45 and under 65 years	65 and upwards.
1921	195	17	2	3	4	3	12	40	114
1922	195	12	1	0	1	3	10	44	124
1923	200	18	1	0	3	8	16	37	117
1924	193	5	0	3	4	6	7	33	135
1925	201	11	4	0	2	8	15	44	117

In Table III the causes of death for the year 1925 are classified and it is satisfactory to note the absence of deaths from smallpox, scarlet fever, diphtheria, puerperal sepsis and encephalitis lethargica.

CANCER. In the five years under review the number of deaths from malignant disease has been as shown below :—

	Males.	Females.
1921	13	11
1922	9	21
1923	16	20
1924	13	17
1925	14	20
	Total	154

This gives a yearly average of 30.8, which is disquieting when compared with the 1916-19 average of 24.5 or the 1911-15 average of 26.0, and alas, the remedy is still to seek.

TABLE III. Causes of Death, Year 1925.

DUNMOW RURAL DISTRICT.

CAUSE OF DEATH.							MALES.	FEMALES.
1.	Enteric Fever	...	...	...	...	...	—	1
2.	Small Pox	...	...	...	...	...	—	—
3.	Measles	...	...	...	...	...	—	—
4.	Scarlet Fever	...	...	...	...	...	—	—
5.	Whooping Cough	...	...	...	...	...	—	—
6.	Diphtheria	...	...	...	...	...	—	—
7.	Influenza	...	...	...	...	...	1	3
8.	Encephalitis lethargica	...	...	...	...	...	—	—
9.	Meningococcal meningitis	...	...	...	...	...	—	—
10.	Tuberculosis of Respiratory System	...	...	...	...	...	2	6
11.	Other Tuberculous Diseases	...	...	...	...	...	—	1
12.	Cancer, malignant Disease	...	...	...	...	...	14	20
13.	Rheumatic Fever	...	...	...	...	...	—	—
14.	Diabetes	...	...	...	...	...	—	2
15.	Cerebral Hæmorrhage, &c.	...	...	...	...	...	8	15
16.	Heart Disease	...	...	...	...	...	16	19
17.	Arterio-sclerosis	...	...	...	...	...	4	5
18.	Bronchitis	...	...	...	...	...	9	9
19.	Pneumonia (all forms)	...	...	...	...	...	4	2
20.	Other Respiratory Diseases	...	...	...	...	...	4	—
21.	Ulcer of Stomach or Duodenum	...	...	...	...	...	—	—
22.	Diarrhoea, &c. (under 2 years)	...	...	...	...	...	—	1
23.	Appendicitis and Typhlitis	...	...	...	...	...	1	—
24.	Cirrhosis of Liver	...	...	...	...	...	1	—
25.	Acute and Chronic Nephritis...	...	...	...	...	...	1	3
26.	Puerperal Sepsis	...	...	...	...	...	—	—
27.	Other Accidents and Diseases of Pregnancy and Parturition	...	...	...	...	...	—	1
28.	Congenital Debility and Malformation, Premature Birth	...	...	...	...	...	3	1
29.	Suicide	...	...	...	...	...	1	—
30.	Other Deaths from Violence	...	...	...	...	...	5	2
31.	Other defined Diseases	...	...	...	...	...	20	16
32.	Causes ill-defined or unknown	...	...	...	...	...	—	—
TOTALS							94	107

INFANTILE DEATH-RATE. In Tables I and II will be found the number of infants dying in the district before reaching the age of one year, and Table I also gives the death rate among these infants per 1,000 births. The rate for 1925 shows an increase over that for 1924, though it is an improvement on the figure for the previous year, and for a rural area such as ours the infantile mortality rate is far too high.

In Table IV will be found a classification of the causes of death in infants under one year and it will be noted that of the 11 deaths only three were due to congenital causes such as malformation or premature birth.

TABLE IV.
INFANTILE MORTALITY, 1925.

DUNMOW RURAL DISTRICT.

Nett Deaths from stated causes at various ages under 1 year.

CAUSES OF DEATH.				Under 1 week.	1—2 weeks.	2—3 weeks.	3—4 weeks.	4 weeks and under 3 months.	3—6 months.	6—9 months.	9—12 months.	Total Deaths under 1 year.	
Bronchitis	...	...	..	1	—	—	—	—	—	—	1	1
Gastritis	...	...	...	—	—	—	—	1	—	—	—	1
Pneumonia	...	...	...	—	—	—	—	—	—	1	—	1
Diarrhœa	...	...	...	—	—	—	—	1	—	—	—	1
Meningitis (non-tuberculous)	...	...	...	—	—	—	—	—	—	1	—	1
Congenital Debility and Malformation	}			3	—	—	—	1	—	—	—	4	
Premature Birth													...
Other Causes :—													
Congenital Syphilis	...	...	...	—	—	—	—	—	1	—	—	1
Suffocation (accidental)	...	...	...	—	—	—	—	—	1	—	—	1
Totals				...	3	—	—	—	3	2	2	1	11

POOR-LAW RELIEF. As the Rural District and the Poor-Law Union are coincident in area, particulars of the amount expended in poor-law relief are obtainable. The amount expended on poor-law relief and for purposes wholly connected therewith for 1925 was £14560.

The Workhouse and Infirmary have been closed since 1918, and cases are now sent to the Institutions belonging to neighbouring Unions.

HOSPITAL ACCOMMODATION. This is very poor and some form of emergency hospital is required at Great Dunmow. A small

cottage hospital at Hatfield Broad Oak takes a few cases from the western end of the district and the hospital at Saffron Walden takes cases from the northern end, while the eastern parts of the district make some use of the Cottage Hospital at Braintree. Apart from these, the hospital facilities for the district are at Chelmsford (12 miles away), Colchester (25 miles), and London (40 miles).

No particular cause of sickness or invalidity has been noteworthy during the five years under review.

Sanitary Circumstances of the Area.

WATER SUPPLY. The town of Great Dunmow and the village portion of Felsted parish have a constant supply of water under pressure from Waterworks owned by the Rural District Council. The works at Dunmow consist of a bore-hole into the chalk 300 feet deep from which water is pumped by means of an Ashley bore-hole pump worked by town gas engines through a rising main, which is also a delivery main, to a storage reservoir of 50,000 gallons capacity, situate $\frac{3}{4}$ of a mile away, and water is distributed through about 4 miles of water main.

During the year 17 new consumers were added to the supply making a total of 447 supplied direct to the houses.

In consequence of an application to the Ministry of Health by the Rural District Council for a loan of £700, for a new engine at the pumping station and about 960 yards of additional mains, a public enquiry was conducted by J. R. Taylor, Esq., M. Inst. C.E., in July, the loan was subsequently granted and the work has since been carried out. In the parish are 3 other supplies from chalk water, viz. :—Dunmow Brewery, The Isolation Hospital and Dunmow Bacon Factory.

The Felsted Waterworks derives its supply from a spring in the Bagshot sands, water is collected in a pump well of 12,000 gallons capacity from which it is pumped by means of a 3-throw ram pump driven by an oil engine through a rising and supply main to a steel storage tank of 6,000 gallons capacity. The length of main is $1\frac{1}{2}$ miles.

During the year 2 new connections were made to the mains. The number of houses supplied is 76. The supply is directly to the houses.

The water at both works is of good quality.

Hatfield Broad Oak is served by the Herts. and Essex Water Co. The supply is constant. During the year there were 9 new connections to the mains making a total number of 233 houses now supplied.

Progress in the construction of new waterworks at Thaxted has been somewhat delayed, but at the end of the year the bore-hole was

being proceeded with satisfactorily, and it is hoped that the whole of the works will be completed during 1926. As mentioned in my last year's report the supply will be from a bore-hole in the chalk. There will be a reservoir of 50,000 gallons capacity and about 3 miles of cast iron mains.

The remaining parts of the district are supplied by public and private pumps and springs from which most of the water has to be carried in pails.

Seven samples of water from private wells were analysed, 3 of which were satisfactory and 4 were polluted. The latter have been dealt with.

During the year the Council have provided one new public pump at Broxted and have kept all the other public pumps in good working order.

Section 6 of the Public Health (Water) Act, 1878, is enforced in respect of all new houses and 13 Certificates were granted.

RIVERS AND STREAMS. Pollution of the River Chelmer at Thaxted, which has been the cause of complaints for many years will be removed when the new sewerage and sewage disposal works are completed. The work is progressing satisfactorily and I hope that most of the sewers of the town will soon be connected to the new system.

Other rivers and streams in the district are not polluted to such an extent as to be a nuisance, although here and there a small amount of sink water drainage may discharge into streams and ditches.

DRAINAGE AND SEWERAGE. The most populous part of the district is at Great Dunmow where there is a modern system of sewerage and sewage disposal and nearly 500 houses are connected. During the year a loan of £630 was sanctioned by the Ministry of Health for sewer extensions at Chelmsford Road and Ongar Road and 670 yards of new sewer laid and the necessary manholes provided.

Thaxted is next in importance and here a new scheme of sewerage and sewage disposal was being carried out at the end of the year.

Felstead Village has an old combined system of sewerage and a new disposal works.

The method of sewage disposal at all the above places is by septic tanks and revolving sprinklers over circular filters.

Felstead School has its own disposal system which consists of septic tank and land filtration.

All the other parishes in the district are without a proper system of sewerage. Houses with drains in the most populous parts of these parishes are drained into cesspools where water closets are in use. A good number of houses which have drains for sink waste water only are connected to old road drains that empty as a rule into the nearest water course.

Great Bardfield is the next parish most in need of a proper sewerage system while Hatfield Broad Oak is occasionally complained of by the Lea Conservancy Board although the small amount of pollution here has little if any effect on the river water. During the year the sewer was extended 90 yards at Stebbing, 42 yards at Hatfield Heath and 105 yards of sewer were relaid at Takeley.

CLOSET ACCOMMODATION. The approximate number of cesspit privies is 2508, pail closets 730, hand-flushed water closets 310 and water closets with flushing apparatus 339. Owing to the pressure of other work conversion has not proceeded as quickly as desirable lately. Rapid conversion is expected at Thaxted as soon as the new Sewerage scheme is completed.

Great Dunmow and Felstead Village are on the water carriage system and there are about 100 hand-flushed water closets at Thaxted

SCAVENGING. A weekly collection of house refuse is made at Great Dunmow, Thaxted, and the village of Felsted. Scavenging of the latter two places has been started during the last five years. At Great Dunmow and Felsted the house refuse is disposed of at tips. At Thaxted it is burnt in an incinerator. In the other parts of the district the tenants are responsible for the disposal of house refuse and the contents of privies. The most congested part not being scavenged by the Council is Great Bardfield, to which attention will be given as opportunity occurs.

The Council do not undertake the emptying of privies in any part of the district.

SANITARY INSPECTION OF THE DISTRICT. Appended below (Table V) is a statement of the work done by the Sanitary Inspector's department during 1925. The systematic inspection of the district has been greatly hampered by the increased work under the Public Health (Meat) Regulations, 1924, and by the call upon the Inspector's time in connection with housing, and I consider that the statement below constitutes a very creditable record of work.

TABLE V. 1925.
Sanitary Inspector's Returns.

Complaints received...	...	...	...	...	...	27
Inspections and re-inspections	...	...	...	...	...	961
Nuisances detected	...	...	...	...	...	60
Informal Notices served	...	...	...	...	...	60
Notices outstanding January 1st	...	...	...	...	...	15
Notices outstanding December 31st	...	...	...	...	...	5
Notices complied with	...	...	...	...	...	70
Statutory Notices served	...	...	...	...	...	12
Legal Proceedings	...	...	...	...	...	0
Convictions	...	...	...	...	...	0
Work carried out by the Council (Sect. 36. P.H.A., 1875), &c...	...	...	...	...	...	0
Overcrowding discovered	...	...	...	...	...	0
,, outstanding 1st January	...	...	...	...	...	8
,, abated	...	...	...	...	...	0
,, outstanding 31st December	...	...	...	...	...	8
Filthy houses cleansed	...	...	...	...	...	2
Privies converted to W.Cs.	...	...	...	...	...	2
,, ,, ,, pail closets	...	...	...	...	...	12
Additional closets to old property—pail closets	...	...	...	...	...	1
Approximate No. of privies	...	...	...	...	...	2508
,, ,, ,, Pail closets	...	...	...	...	...	730
,, ,, ,, Flushing W.Cs.	...	...	...	...	...	310
,, ,, ,, Hand-flushed	...	...	...	...	...	339
House drains repaired or relaid	...	...	...	...	...	10
Houses connected to the water main	...	...	...	...	...	28
Water Certificates granted, Sect. 6 P.H. (Water) Act, 1878	...	...	...	...	...	13
,, ,, deferred	...	...	...	...	...	1
Houses and Schools disinfected	...	...	...	...	...	30
Unsound Food, number of Seizures or Surrenders	...	...	...	...	...	32
16 pigs' heads, 12 livers, fore-quarter of mutton, 2 fore-quarters of beef and 1 carcase of pork.						
(This does not include the heads, organs, and carcasses condemned at the Dunmow Flich Bacon Factory).						

PREMISES OR OCCUPATIONS WHICH CAN BE CONTROLLED BY BYE-LAWS OR REGULATIONS. Further details of the inspection of these during 1925 are given in Table Va.

TABLE V. (A.)
Controlled Premises and details of Inspection.

Premises.	No. in District.	No. Inspected.	No. of Inspections	Notices served.	Notices complied with.	Legal Proceedings.
Common Lodging Houses	1	1	3	1	1	0
Bakehouses	32	32	36	2	2	
Cowsheds	124	124	146	2	1	
Milkshops	2	2	4	0	0	
Slaughter Houses	15	15	381	1	1	
Knacker's Yards	1	1	4	0	0	
Offensive Trades	0	0	0	0	0	

COMMON LODGING HOUSES. There is only one common lodging house in the district, situated at Church End, Great Dunmow. Bye-Laws are not in force, but the house is regularly inspected.

BAKE-HOUSES. The number in the Rural District is now 32. The practice in the last five years has been to inspect these twice a year, but during 1925 the increased amount of work in connection with meat inspection has interfered with this and fewer inspections have been made.

COW-SHEDS, DAIRIES, ETC. There are now 94 cow-keepers in the district, occupying 124 premises, and 146 inspections were made during 1925. A veterinary inspection of the cows in the area was also carried out, and this will be referred to in the section of this report dealing with the inspection and supervision of food.

SLAUGHTER-HOUSES. The number on the register is now 15, and visits numbering 381 have been made to them. Constant supervision of the premises is one of the results of the increased inspection of meat, as opportunity is taken at the same time to inquire into the condition of the buildings. As no Bye-Laws have been made, and the Council had not Urban powers prior to the advent of the Public Health (Meat) Regulations, 1924, the 15 slaughter-houses are all "Registered" as opposed to "Licensed."

KNACKER'S YARDS. There is one licensed knacker's yard in the district, situated at Great Dunmow. This has been inspected four times during the year and found satisfactory. No boiling is done.

OFFENSIVE TRADES. The Council has not Urban powers, and so has no control over these. No action is at present required.

SCHOOLS. In the Dunmow Rural District there are 30 public elementary schools and 3 others, one a large public school. The Medical Officer of Health visits the schools in his capacity as Medical Inspector for the County Council, and opportunity is taken at the same time to enquire into the sanitary condition of the school premises. The Sanitary Inspector also visits the schools when making enquiries regarding cases of infectious disease and the sanitary arrangements are inspected. During the past year two cases of polluted water supply were dealt with. There has been a marked improvement in the matter of periodical renovation of elementary school premises during the past few years.

The drainage and sanitary fittings of Felsted Public School are inspected and reported on, privately, by the Sanitary Inspector, once during each term.

Inspection and Supervision of Food.

(A) MILK SUPPLY. A large quantity of milk is produced in the District ; all the supplies required in the area are furnished from the local farms and about 2/3rds of the daily quantity produced is dispatched to London.

During the year 1925, a veterinary inspection of cows was made by Mr. H. A. Young, M.R.C.V.S., Dunmow. For the purposes of this examination all the milch cows in the district were inspected, whether owned by registered cow-keepers or not. The number of cow-keepers visited was 94 and 1,141 cows were examined, in 124 cowsheds. Of the cows examined, 80 per cent. were healthy, the remainder being more or less in a poor condition. 63 were found to have sore teats ; 19 had lost one or more quarters and had other minor injuries ; 25 were suffering from non-tuberculous induration of the udder and others were found to be suffering from mammitis. 36 samples of milk were taken for microscopical examination. In 2 cases only were Tubercle Bacilli found. The suspected cows were isolated and the milk from them thrown away until the cases were afterwards dealt with under the Tuberculosis Order, 1925.

Of the 124 cow-sheds inspected, 97 were reported on as in fairly good condition, 23 as "Fair" and 4 in bad condition.

The Sanitary Inspector accompanied the Veterinary Inspector in a good number of the inspections and is dealing with the cases where improvements are required.

Licences for the sale of milk under special designations are dealt with by the County Council.

The duties under the Public Health (Meat) Regulations are carried out by the Sanitary Inspector who is a qualified Inspector of Meat and Other Foods. Notices are given by butchers and others as to the time of slaughter and while it is obviously impossible for one Officer to inspect all the meat killed in a large Rural District over 70 per cent. of the animals slaughtered for food in the area are seen.

The Dunmow Flitch of Bacon Company Ltd. have about 300 pigs killed weekly at the Dunmow factory, and all these are examined by a veterinary surgeon employed by the Company, but the necessary notices are given to the Council, whose Sanitary Inspector also makes inspections.

The number of slaughter-houses in the area is as follows :—In 1920, 15 ; in January, 1925, 15 ; in December, 1925, 15.

All the 15 slaughter-houses have been registered. Urban powers were not in force before the Regulations.

The meat traders' shops in the district are generally of the old-fashioned type, with open fronts, but it is hoped that it will be possible to have these converted to shops of a more modern type where the meat will have more protection from contamination. In the meantime every effort is made to secure the discontinuance of the practice of hanging meat outside the shops, where it is liable to contamination from dust and flies and the attentions of passing dogs.

Apart from meat, no unsound food was discovered during the year.

Prevalence of, and Control over, Infectious Disease.

During 1925 53 notifications were received, and the number of cases of notifiable disease, other than tuberculosis, reported is 26. The details concerning these cases, including the age incidence, will be found in Table VI, and particulars of the cases of tuberculosis in Table VIa.

SCARLET FEVER.—The number of cases reported in each of the five years under consideration is as follows :—

1921	72
1922	28
1923	17
1924	6
1925	13

The most serious outbreak was in 1921, but it is gratifying to note that no deaths from scarlet fever have been registered in the district during the five years. The disease has, on the whole, been of a mild type, and it is probable that other cases have occurred so mild that the patient never felt really ill and never sought medical advice, so that these cases remain undetected. It is probable that the continuance of the disease is due to the presence of these mild undiscovered cases.

DIPHTHERIA.—The number of cases notified since 1921 is shown in the following table :—

1921	22	Deaths	1
1922	5	„	0
1923	5	„	0
1924	6	„	0
1925	5	„	0

The most serious outbreak was again in 1921. Of these cases, 7 were reported from Hatfield Heath. All attended one school, which was closed and disinfected, and no more cases occurred.

Diphtheria anti-toxin is obtainable by the medical practitioners from the Isolation Hospital, and prompt use is made of this remedy.

ENTERIC GROUP OF FEVERS.—The number notified in the past five years is as under :—

1921	0
1922	0
1923	1
1924	0
1925	1

Of the two cases of typhoid fever shown above one was admitted to hospital. One of these cases ended fatally.

From the above table it will be seen that the incidence of this group of fevers is very slight.

The practical disappearance of fevers of the typhoid group is one visible result of the expenditure in recent years on sanitary work.

Malaria, Dysentery, Trench Fever—Two cases of malaria and one case of dysentery have been reported in the five years, 1921-25.

Small-pox. No cases have occurred in the district during the years 1920-25, or for some years previously. No vaccinations have been performed by the Medical Officer of Health under the Public Health (Small-pox Prevention) Regulations, 1917.

Cerebro-spinal Meningitis—No cases have been recorded during the past five years.

Encephalitis Lethargica—This disease was made notifiable in 1919, and in the five years reviewed in this report 4 cases have been reported, 2 in 1921, 1 in 1922, and 1 in 1924. These cases were all adults. The two cases in 1921 recovered, but the other two ended fatally.

TABLE VI. Notifiable Diseases (other than Tuberculosis) notified during 1925.

DUNMOW RURAL DISTRICT.

NOTIFIABLE DISEASE.	NUMBER OF CASES NOTIFIED AT AGES—YEARS.												Cases admitted to Hospital.	Total Number of Deaths.	
	At all ages.	Under 1 year.	1—2.	2—3.	3—4.	4—5.	5—10.	10—15.	15—20.	20—35.	35—45.	45—65.			65 and over.
Scarlet Fever ...	13		1	1	1	1	5	3		1				11	—
Diphtheria ...	5						2	2	1					3	—
Typhoid Fever ...	1									1				—	1
Erysipelas...	2										1	1		1	—
Pneumonia ...	5								1	1			3	—	6
Totals ...	26	—	1	1	1	1	7	5	2	3	1	1	3	15	7

NON-NOTIFIABLE DISEASES.—The main source of information regarding these is the school intimations of disease. These are sent to the Medical Officer of Health, who is also the School Medical Inspector. There has been no outbreak of non-notifiable disease of any severity in 1925. During the year two schools were closed on account of measles—Felsted Council School from 9-2-25 to 27-2-25 and Leaden Roding C.E. School from 2-2-25 to 9-2-25, while High Easter C.E. School was closed from 30-1-25 to 9-2-25 on account of severe colds.

TUBERCULOSIS.—Particulars of new cases of tuberculosis reported in 1925, and of deaths from this disease in the area, are set out in Table VIa, and the number of cases notified in the past five years is shown below :—

Year.	Pulmonary.	Other Forms.
1921	14	7
1922	7	2
1923	13	6
1924	18	3
1925	19	8

There has been a considerable improvement in the matter of notification in cases of tuberculosis, but this is still neglected by some medical practitioners, and in 1925 20 per cent. of the deaths were un-notified cases.

TABLE VI. (A). Tuberculosis—Year 1925.

DUNMOW RURAL DISTRICT.

Age-Periods. (years).	New Cases.				Deaths.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
0 to 1	—	—	—	—	—	—	—	—
1 „ 5	—	1	—	—	—	—	—	—
5 „ 10	1	—	2	1	—	—	—	—
10 „ 15	2	2	—	—	—	—	—	—
15 „ 20	1	—	—	—	1	1	—	—
20 „ 25	1	—	1	1	—	2	—	—
25 „ 35	1	3	—	2	—	2	—	1
35 „ 45	1	—	—	—	—	—	—	—
45 „ 55	1	3	—	—	—	1	—	—
55 „ 65	1	—	—	1	1	—	—	1
65 and upwards	1	—	—	—	—	—	—	—
Totals ...	10	9	3	5	2	6	—	2
	27				10			

The percentage of un-notified deaths is 20 per cent.

EXAMINATION OF PATHOLOGICAL AND BACTERIOLOGICAL SPECIMENS.—This service is provided by the Essex County Council, and increasing use is made of the facilities by the practitioners in the district. During 1925 the following specimens were submitted to the County Public Health Laboratory from the Dunmow Rural District :—

Swabs for diphtheria	48
Sputa	27
Typhoid, Widal's reaction ...	2
Ringworm.....	1

There are no facilities available in the area for the cleansing of verminous persons and their belongings. Disinfection of the homes after the removal of cases of infectious disease is carried out by the Council's staff, and infected bedding and other articles may be removed to the Isolation Hospital for steam disinfection.

Combined Medical Service.

BRAINTREE AND DUNMOW AREA, 1925.

“The scheme for combined medical services has been in operation for a little over two years. The advantages of the arrangement are the avoidance of overlapping and the multiplication of officials, and from this point of view the scheme has much to commend it.

In this area the difficulty has been the extent of the district and size of the area to be supervised by one medical officer. From the County Council side, the advantage is that the various medical activities are carried on by a local officer, and there is also a financial saving. From the Local Authorities point of view, there is the advantage of having an officer devoting the whole of his time to public health duties. The scheme is, I think, undoubtedly preferable to that of having a part-time M.O.H., who is also engaged in practice, especially as public health is becoming so greatly a specialised branch of medicine, but it has the disadvantage of engendering a fear that it is an attempt to subordinate still further the local authorities to the County Council. From the point of view of the officer himself, the scheme has the advantage of providing a variety of work, but this has also the drawback that no man can hope to be an expert in all branches of the work, and as a result some are bound to suffer. There is also the difficulty of a multiplicity of employers, all conscious of the work which the officer should carry out for them, but by no means unanimous on such matters as his remuneration. In this area the work is still further hampered by the obviously inadequate allowance for travelling.

My own opinion is that the scheme has proved advantageous to the County Council, and has much to commend in the case of the smaller

Local Authorities, but that unless the remuneration and conditions of service are improved, it is not one which will, if adopted generally in the country, attract good men into the Public Health Service."

General Provision of Health Services in the Area.

Hospitals provided by the Local Authority or the County Council :

(1) Tuberculosis. The institutional treatment of tuberculosis is provided by the County Council. There is no institution for the reception of tuberculous patients in the Rural District, and patients from the district are sent to the County Council's institutions elsewhere.

(2) Maternity. There is no institutional provision for maternity cases in the area.

(3) Fever. The Rural District Council has provided an Isolation Hospital at Dunmow for scarlet fever, diphtheria, and typhoid fever. This consists of an administrative block, two ward blocks disinfecting station with steam disinfecter, laundry, ambulance shed and a pump house. It is situated in the centre of the district, and has accommodation for from 12 to 18 cases.

(4) Small-pox. The Joint Small-pox Hospital at Sible Hedingham is intended for the reception of small-pox cases occurring in the Dunmow District amongst others. It is at present occupied by the Essex County Council, and used for the treatment of tuberculous children, but in the case of an outbreak of small-pox the County Council would vacate it. Sporadic cases of small-pox are to be admitted to the Small-pox Hospital at Colchester.

Homeless Children—A Children's Home is maintained at Great Dunmow by the Dunmow Board of Guardians.

Ambulance facilities—A motor ambulance is kept at the Isolation Hospital for the transport of infectious cases, and this is also available for the removal of accident and other cases.

Clinics and Treatment Centres.

Maternity and Child Welfare—There is one Centre in the district at Hatfield Heath, holding one session per month. This is administered by a local committee, working under the County Council scheme. Other Centres are needed in the district, notably at Great Dunmow and Thaxted, but the difficulty has been to organise the local committees.

School Clinics—None are provided for the district, but it is hoped to arrange for a clinic at Great Dunmow.

Tuberculosis Dispensaries—There is a Dispensary at Great Dunmow, open on the first and third Tuesdays in each month. The

accommodation has not been satisfactory, the front room of a cottage being hired for the morning for the purpose of the Dispensary, but it is hoped shortly to move into better premises.

Public Health Officers of the Local Authority.

Medical Officer of Health—P. JACOB GAFFIKIN, M.C., M.D., B.Ch., B.A.O., D.P.H.

Sanitary Inspector—J. PLUMBLEY, Certificate R.S.I., Certificate, Inspector of Meat and other Foods.

Sanitary Inspector's Clerk—F. RICKWOOD.

Medical Superintendent, Isolation Hospital—J. NAPIER GARDINER, M.D.

The Dunmow Rural District Council is one of the constituent authorities of the Braintree and Dunmow United (Sanitary) Committee which has adopted the Essex scheme for combined medical service, whereby a whole-time officer is appointed who acts as M.O.H. for the Local Authorities and also as Assistant County Medical Officer for the same area. At the end of 1925 I was asked by the County Medical Officer for a report on the working of the scheme in this area, and I feel I cannot do better than to reproduce my report here :—

Nursing in the Home—In eleven parishes or groups of parishes in the district the services of a district nurse are available. The organisation is by means of District Nursing Associations, which are affiliated to the County Nursing Association, and which receive some financial assistance from the County Council, but the Associations are not subsidised by the Local Authority.

Home nursing for infectious diseases is not provided.

Midwives.—The Local Authority has not arranged for the employment of, or for subsidy to, practising midwives.

The number of midwives practising in the area is 11, and they are located in parishes as under :—

Dunmow	Hatfield Broad Oak	Stebbing
Felstead	High Easter	Takeley
Great Bardfield	Little Canfield	Thaxted
Great Easton	Leaden Roding	

Chemical and Bacteriological Work. With the exception of the examination of water, this is undertaken by the County Council. During 1925, 7 samples of water were sent for analysis. The work is carried out by the County Public Health Laboratories.

Bye-laws, Adoptive Acts, etc. There are no local or adoptive Acts in force in the district, but the Council have under consideration the adoption of bye-laws for new buildings and for tents, vans, sheds and for similar structures, and these will come into force during 1926.

Appendix.

1. GENERAL STATISTICS.

Area (acres), 73,503.

Population (Census 1921), 15,352.

Registrar-General's estimate: Mid-year 1925, 15,110.

Number of Inhabited Houses (1921), 3,896.

Number of Families or separate Occupiers (1921), 3,923.

Rateable Value, £88,348.

Sum represented by a penny rate, £368.

2. EXTRACTS FROM VITAL STATISTICS FOR THE YEAR

	Total.	M.	F.	
Births, Legitimate	206	97	109	} Birth Rate 14'2
„ Illegitimate	9	5	4	
Deaths	201	94	107	Death Rate 13'3.

Number of women dying in, or in consequence of childbirth } from sepsis, nil
 } other causes, 1

Deaths of infants under one year of age, per 1,000 births:—

Legitimate 51 Illegitimate Nil. Total 51.

Deaths from Measles (all ages)	...	...	nil.
„ „ Whooping Cough (all ages)	...	...	nil.
„ „ Diarrhoea (under 2 years of age)	...	...	1

Housing.

General housing conditions have changed very little during the past five years. The new houses erected in the period under review are as under:—

Year.	Total.	By Local Authority under Housing Act, 1919, 1923 or 1924.	By other persons or bodies with State assistance.
1921	22	13	0
1922	38	15	0
1923	32	—	0
1924	45	—	3
1925	14	—	9

The 28 houses erected by the Council under the Housing Act, 1919, are situated in the parishes of Thaxted and Felstead. Apart from these, the policy of the Rural District Council has been to encourage building of houses by private enterprise, but while this has helped to provide houses for the fairly well-to-do class of the community who could afford a fairly high rent or to buy a house, it has not relieved the shortage as far as the worse paid section is concerned, particularly as

regards the agricultural labourers, and it is not to be expected that private enterprise will take on what is bound to be an unremunerative proposition. During 1925 the Council decided that 200 workmen's cottages were urgently required in the Rural District, but were of opinion that not more than 100 could be provided in the first two years owing to the difficulty of getting the work done by the available builders in the district.

A scheme for 100 houses was sanctioned by the Ministry of Health and at the end of the year tenders had been accepted for 36 houses, and sites were being obtained for more.

The population is almost stationary, and if any change has taken place during the past five years I consider that it has slightly increased. Cases of overcrowding are kept under observation and are dealt with as opportunities occur. At the end of the year there were 8 known cases of overcrowding which had not been abated.

The general standard of houses is about the average for agricultural districts, there being chiefly old houses with a sprinkling of new ones. The defects found to exist are generally due to delapidation and faulty construction in old houses. The delapidations are due to lack of attention by the owners at the proper time, particularly in the case of the timber and plaster houses which are the common type in the district. It may be mentioned that rents in the district are very low. The Tenants as a rule are not neglectful, but of course there are exceptions.

Owing to the pressure of other work the systematic inspection of the district has not been carried on as consistently as before the War.

Housing Statistics for the Year.

NUMBER OF NEW HOUSES ERECTED DURING THE YEAR.—

(a) Total (including numbers given separately under (b))	14
(b) With State assistance under the Housing Acts:	
(1) By the Local Authority ...	0
(2) By other bodies or persons ...	9

1. UNFIT DWELLING HOUSES :—

Inspection :

(1) Number of defective dwelling houses inspected for housing defects (under Public Health or Housing Acts) ...	42
(2) Number of dwelling houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910, or the Housing Consolidated Regulations, 1925 ...	14
(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ...	6

(4)	Number of dwelling houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	...	...	...	...	31
2.	REMEDY OF DEFECTS WITHOUT SERVICE OF FORMAL NOTICES.					
	Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their Officers	...	...	...	...	33
3.	ACTION UNDER STATUTORY POWERS.					
	A.— <i>Proceedings under Section 3 of the Housing Act, 1925:—</i>					
(1)	Number of dwelling houses in respect of which notices were served requiring repairs	...	...	...	...	4
(2)	Number of dwelling houses which were rendered fit after service of formal notices:—					
	(a) By owners	...	...	...	...	2
	(b) By Local Authority in default of owners	...	...	...	...	0
(3)	Number of dwelling houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close					0
	B.— <i>Proceedings under Public Health Acts:—</i>					
(1)	Number of dwelling houses in respect of which notices were served requiring defects to be remedied	...	...	...	...	4
(2)	Number of dwelling houses in which defects were remedied after service of formal notices:—					
	(a) By owners	...	...	...	...	4
	(b) By Local Authority in default of Owners	...	...	...	...	0
	C.— <i>Proceedings under Sections 11, 14 and 15 of the Housing Act, 1925:—</i>					
(1)	Number of representations made with a view to the making of Closing Orders	...	...	...	...	2
(2)	Number of dwelling houses in respect of which Closing Orders were made	...	...	...	...	2
(3)	Number of dwelling houses in respect of which Closing Orders were determined, the dwelling houses having been rendered fit	...	...	...	...	0
(4)	Number of dwelling houses in respect of which Demolition Orders were made	...	...	...	...	0
(5)	Number of dwelling houses demolished in pursuance of Demolition Orders	...	...	...	...	0
(6)	Number of dwelling houses demolished voluntarily					0

Annual Report of the Medical Officer of Health for the Year 1925 for the Rural District of Dunmow

on the administration of the Factory and Workshop Act, 1901, in
connection with
FACTORIES, WORKSHOPS AND WORKPLACES.

1.—Inspection of Factories, Workshops and Workplaces.

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.

Premises. (1)	Number of		
	Inspections (2)	Written Notices. (3)	Occupiers prosecuted. (4)
FACTORIES ... (Including Factory Laundries)	1	—	—
WORKSHOPS ... (Including Workshop Laundries)	43	2	—
WORKPLACES (Other than Outworkers' Premises)	—	—	—
Total ...	44	2	—

2.—Defects found in Factories, Workshops and Workplaces.

Particulars. (1)	Number of Defects.			Number of offences in respect to which Prosecu- tions were instituted. (5)
	Found. (2)	Remedied. (3)	Referred to H.M. Inspector. (4)	
<i>Nuisances under the Public Health Acts :</i>				
Want of cleanliness ...	1	1		
Want of ventilation ..				
Overcrowding ...				
Want of drainage of floors ...				
Other nuisances ...				
Sanitary Accommo- } insufficient ...	1	1		
dation ... } unsuitable or defective				
... } not separate for sexes				
<i>Offences under the Factory & Workshop Acts :</i>				
Illegal occupation of underground bake- house (s. 101) ...				
Other offences ...				
(Excluding offences relating to outwork and offen- ces under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Work- shops Transfer of Powers) Order, 1921.)				
Total ...	2	2		

OUTWORK IN UNWHOLESOME PREMISES, Section 108.

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

P. J. GAFFIKIN,

Medical Officer of Health.

29th March, 1927.

