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GUISBOROUGH URBAN DISTRICT.



NORTH RIDING (GUISBOROUGH)
COMBINED DISTRICTS.

. REPORT . for the Year 1937

of the Medical Officer of Health,
C. R. GIBSON, M.A., M.B., CH.B.,

D.P.H.

Guisborough :

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1938.

WILKINSON COUNTY DISTRICT

REPORT
for the year 1913

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TO THE CHAIRMAN AND MEMBERS
OF THE
GUISBOROUGH URBAN DISTRICT COUNCIL.

Gentlemen,

I beg to submit my Annual Report for the year 1937, the contents and arrangement of which are in accordance with the Ministry of Health circular 1650.

Summaries of the vital statistics for the year will be found on page 5 and in the table on page 20. According to the Registrar-General's estimate the population of the district is steadily increasing, a conclusion which is supported by the number of new houses being erected, particularly in Guisborough itself. In view of the vicissitudes of the iron and steel industry in recent years, and a declining population in neighbouring districts this is encouraging. The three main rates of vital statistics, birth-rate, death-rate and infant mortality rate, are all satisfactory. The birth-rate, at 17·7, is the highest it has been since 1930, and compares very well with the average for England and Wales, which is 14·9. The death-rate, at 10·7, is a low figure for this district, having only once been approached or improved on (again in 1930, when it was 10·6) since before the war: to compare it with the rate for England and Wales an allowance has to be made for the higher local proportion of elderly people, so that beside the national rate of 12·4 must be placed the reduced local rate of 10·2. The infant mortality rate in England and Wales for 1937 was 58; in 1936 the local rate was 47½; in 1937 this satisfactory figure was further reduced to 35.

Infectious disease was also little prevalent during the year, the only one of importance being the national epidemic of influenza which in this district was responsible for ten deaths.

Water supplies were satisfactory during the year, the Council's re-housing schemes were almost completed, and a preliminary survey was undertaken with a view to general adoption in Guisborough of the water-carriage system.

I am, Gentlemen,

Your obedient servant,

C. R. GIBSON,

Medical Officer of Health.

Guisborough,

24th May, 1938.

1. PUBLIC HEALTH OFFICERS.

	Borough of Redcar.	Guisborough Urban District.	Loftus Urban District.	Saltburn and Marske-by-the-Sea Urban District.	Skelton & Brotton Urban District.
A. <i>Whole-time Officers.</i>					
Medical Officer of Health	Dr. C. R. Gibson.				
Medical Officer to Joint Isolation Hospital ...	Dr. C. R. Gibson.				
Sanitary Inspectors ...	Mr. W. Tutin	Mr. R. H. Kilburn*	Mr. E. Hollis*	Mr. T. Young*	Mr. R. Barry
Assis't Sanitary Inspectors	Mr. N. Hudson	Mr. F. A. Russell	—	Mr. J. R. Hall	—

*Also Surveyor for the district concerned.

Statistics and Social Conditions of the Area.

Area (in acres) 18,924.

Registrar-General's estimate of resident population, 1937 : 8,034.

Number of inhabited houses (end of 1937) according to Rate Books; 2,221.

Rateable value : £28,447.

Sum represented by a penny rate: £108.

The main industries of the district are ironstone mining, iron and steel works and agriculture.

Extracts from Vital Statistics of 1937.

	Total	M.	F.	
Live births, legitimate ...	135	76	59	} Birth Rate 17·7.
illegitimate ...	7	4	3	
Still-births ...	3	1	2	: Rate per 1,000 total births, 20½.
Deaths ...	86	47	39	: Death-rate ... 10·7.

Deaths in consequence of child-birth:

	Deaths.	Rate per 1,000 total births.
(a) from sepsis ...	0	0
(b) from other causes ...	1	7
(c) total ...	1	7

Death-rate of infants under one year of age :

All infants, per 1,000 live births ...	35
Legitimate infants, per 1,000 legitimate live births ...	30
Illegitimate infants, per 1,000 illegitimate live births ...	143

Death from Measles (all ages) ...	0
„ „ Whooping Cough (all ages) ...	0
„ „ Diphtheria (all ages) ...	0
„ „ Diarrhoea (under two years of age) ...	0
„ „ Pneumonia (all ages) ...	0
„ „ Influenza (all ages) ...	10
„ „ Tuberculosis (all ages) ...	2
„ „ Cancer (all ages) ...	13
„ „ Heart disease (all ages) ...	23

General Provision of Health Services in the Area.

The ambulance facilities are adequate for the ordinary needs of the district.

There have been no developments or changes in the services provided, with the exception that an agreement has been made with the Eston Urban District Council for the reception into that authority's Smallpox Hospital of any cases of Smallpox that might arise in this area.

Sanitary Circumstances of the Area.

Water: The small Council water-supply at Newton was improved during the year by the piping of an additional spring into the existing storage tank.

Throughout the district the water-supply has been satisfactory throughout the year both as to quality and quantity.

The Council appointed Mr. C. Clemesha Smith, M.I.C.E., M.I.W.E., to report to them on the Guisborough Water Company's undertaking, which provides water for Guisborough and Dunsdale and farms in the vicinity. The source of this supply is a gathering ground and reservoir on the Guisborough moor, supplemented in the summer months as required by water pumped from the Wiley Beck above Charlton's. The water is then filtered through Candy filters and chlorinated before distribution.

Samples of the raw Wiley Beck water and of the filtered mixed water from a tap at 2, Fountain Street, Guisborough, were submitted for chemical analysis to the Counties Public Health Laboratories on August 18th, and the results are summarised below:—

Chemical results in parts per 100,000 :—

	Sample A.	Sample B.
	Raw water from Wiley Beck.	From tap at 2, Fountain St., Guisborough.
Appearance	... Faint opalescence, slight deposit of vegetable and mineral debris	Very faint opalescence, settling to slight film deposit of mineral particles
Colour	... Slight yellow	Normal
Odour	... Nil	Nil
Reaction ph.	... Neutral 7·4	On Acid side 6·7
Free Carbonic Acid	... 0·26	0·6
Total Solids, 180°C.	... 15·0	10·0
Chlorine in Chlorides	... 2·0	1·8
Nitrogen in Nitrates	... Nil	Nil
Nitrites	... Nil	Nil
Hardness :—Permanent	... 6·5	4·0
Temporary	... 1·0	0·0

	Sample A.	Sample B.
Metals	Iron 0 012	Iron 0 015, Lead absent
Free Ammonia	0 0012	0 0000
Albuminoid Ammonia	0 0104	0 0096
Oxygen absorbed in 4 hours at 80°F.	0 120	0 115

Abstracts of Reports: Sample A: From a chemical standpoint we regard the water as wholesome, but, being water from a beck, presumably without any filtration, the physical characters and quality of the water will be subject to seasonal variation.

The character of the water is such that it would exert a solvent action upon bright lead and laboratory experiments confirm this view, to the extent that the water is capable of dissolving 0.04 parts of lead per 100,000 when in contact therewith for 24 hours. The usually accepted permissible limit for lead in water is taken as 0.01 parts of lead per 100,000.

Sample B: From the chemical standpoint we regard the water as pure and wholesome, suitable for drinking and domestic purposes.

The character of the water is such that it would exert a solvent action upon bright lead and laboratory experiments confirm this view, to the extent that the water is capable of dissolving 0.14 parts of lead per 100,000 when in contact therewith for 24 hours.

(Signed) J. F. BEALE,

for Drs. Beale and Suckling.

I would draw your attention to the remarks in the above reports on the action of the water on lead, in view of the past history of the water and of the fact, I understand, that the Water Company is under statutory obligation to treat the water for lead-solvency. Notwithstanding this it would appear that the water as delivered to the consumer has a considerable solvent action upon lead, greater even than has the raw water from Wiley Beck.

Five samples of water were submitted for bacteriological examination, two being raw water from Wiley Beck, and three being filtered and treated water as delivered for consumption.

	From Wiley Beck.		From 2, Fountain St., Guisborough.		
Sample taken	August 18th	Sept. 8th	July 21st	August 18th	Nov. 2nd
Bacterial count (3 days at 22° c.)	810	710	440	320	440
B. Coli.	Present in 1 c.c.	Present in 1 c.c.	Absent in 100 c.c.		
Streptococci	Present in 1 c.c.	Present in 20 c.c.	Absent in 100 c.c.		
B. Enteritidis Sporogenes	Present in 250 c.c.	Absent in 250 c.c.	Absent in 250 c.c.		
Remarks	Polluted and unsafe	Shows evidence of pollution	Good water and safe		

Drainage and Sewerage: No extensions were made in 1937. The sewage treatment plant at Guisborough, completed in 1936, has continued to work satisfactorily.

Rivers and Streams: The beck previously polluted by the effluent from the sewage farm at Guisborough is now, following the installation of the new treatment plant, in good condition, and I am informed that trout have been caught in the beck below the farm.

Closet Accommodation: The Sanitary Inspector reports that 69 pail-closets were converted to water-carriage in 1937 in Guisborough, and one at Lazenby. A survey made during November, with a view to the putting into effect of Sec. 47 of the Public Health Act, 1936, showed that there were remaining in Guisborough itself 724 pail-closets and in the outlying districts approximately 380 pail-closets and 40 privy middens, the latter being mainly at isolated farms and cottages. A commencement was made by selecting 107 pail-closets in Guisborough for conversion in the early part of 1938.

Public Cleansing: The scavenging of Guisborough is carried out by direct labour, a covered motor vehicle being used. Pail-closets are emptied between midnight and 7.0 a.m., and dry refuse collected between 7.0 a.m. and 4.30 p.m. Disposal is by tipping at a partially controlled tip, refuse being covered with sand and soil. The scavenging of Dunsdale and Yearby is also by direct labour; in Upleatham, Wilton, Lazenby, Lackenby, Newton, Barnaby and Chaloner Pit, it is carried out by contract. In Hutton, where there are no dry closets, domestic refuse is removed by the owners of the estate.

Sanitary Inspection of the Area: This is summarised in Table 5 on page 16. The Sanitary Inspector furnishes a more detailed analysis of the nuisances dealt with:

		Number	Remedied by Dec. 31st, 1937
Defective sanitary conveniences	...	213	204
Defective premises	... ..	39	39
Defective drainage	... ..	33	33
Verminous premises	... ..	5	5
Offensive accumulations	... ..	3	3
Animals improperly kept	... ..	2	2
Insufficient water-supply	... ..	1	1
		296	287

Shops: 46 were visited and no matters requiring attention under the Shops Act, 1934, were discovered.

Smoke Abatement: No action taken.

Swimming Baths and Pools: None in the district.

Eradication of Bed Bugs: Five houses, none of them Council houses, were found infested with bed bugs, two of these were houses treated in 1936. Similar treatment was again applied and no further complaints have been received.

Schools: There was no School Closure on account of infectious disease recommended during the year.

Housing.

Housing inspection, etc., is summarised in table 7 on page 18.

Thirty-eight houses were completed by the Council in Guisborough and 36 of these were used to re-house overcrowded families. A further 15 cases of overcrowding were relieved by arranging the interchange of tenancies. Of the 22 cases outstanding at the end of the year 12 are in the parish of Wilton and the Council proposes to erect six houses at Lazenby to facilitate dealing with these.

Private building has also been active during the year, 32 houses being erected by private owners compared with 16 in 1936. The new houses are all on open sites, dry, well lit and ventilated, and will increase the healthiness of the district.

Inspection and Supervision of Food.

Milk Supply: Cowsheds and dairies are inspected [periodically and samples of milk submitted for bacteriological examination as to cleanliness.

Tabular Summary of Milk Examinations.

	No. of Registered Cowkeepers and Dairies.	No. of Samples submitted.	Bacterial count per c.c.				Coliform bacilli in 1/100th c.c.	
			under 10,000.	10,000— 30,000.	30,000— 100,000.	over 100,000.	Absent.	Present.
Redcar Borough ...	42	34	2	12	16	4	27	7
Guisborough U.D. ...	78	18	1	9	8	—	11	7
Saltburn & Marske U.D.	32	14	1	6	7	—	10	4
Skelton & Brotton U.D.	112	9	1	2	5	1	6	3
Loftus U.D. ...	70	1	—	1	—	—	1	—
Totals ...	334	76	5	30	36	5	55	21
Percentages ...			7	39	47	7	73	27

Meat and other Foods. Slaughterhouses in the district were inspected regularly and meat is inspected at or soon after slaughter. The following table gives particulars, the parts condemned being one fore-quarter of a cow (16 stone) and two beasts' lungs.

Carcases Inspected and Condemned.

	Cattle, excluding			Sheep	
	Cows	Cows	Calves	and Lambs	Pigs
Numeer Killed	503	6	28	1247	1045
Number Inspected	391	6	17	1063	805
<i>All diseases except Tuberculosis.</i>					
Whole carcase condemned ...	—	—	—	—	—
Carcases of which some part or organs condemned	—	—	—	—	—
Percentage of number inspected affected with disease other than Tuberculosis	—	—	—	—	—
<i>Tuberculosis only.</i>					
Whole carcasses condemned ...	—	—	—	—	—
Carcases of which some part or organs condemned	2	1	—	—	—
Percentage of number inspected affected with Tuberculosis ...	0·5%	16·7%	—	—	—

Adulteration, etc. No action was taken by the Council under the Food and Drugs (Adulteration) Act, 1928, this being administered by the County Council.

Shell-fish (Molluscan). There is no sea-board and therefore no shell-fish beds in the district. Shell-fish are very rarely sold in the district and information of their sale by only one tradesman was obtained: this referred to one bag of mussels and about ten score oysters, which had been obtained from Boston, Lincs.

Prevalence of, and Control over, Infectious and other Diseases.

Scarlet fever has shown diminished prevalence compared with recent years, there having been 23 cases notified, compared with an average annual number of 42 in the five preceding years; in the five years before that again, however, the average yearly incidence was 14 cases. In the second quarter of the year no cases at all were notified. Three of the cases were in Dunsdale, and all the others in Guisborough itself. Viewing the incidence of scarlet fever in the Combined Districts as a whole, from the beginning of regular notification in 1893, there is visible, apart from the epidemic ups and downs covering five years or less, a regular fall in the trend of the curve down to a minimum about 1916, followed by a reversal of the change to a rise of similar proportions, still in operation. In 1916 there were, in the whole of the Combined Districts, only 48 notified cases of scarlet fever; in 1894, which was a year of lower prevalence between years of higher prevalence, there were 274 cases. That was 22 years before 1916, and similarly, 19 years after 1916, there were in 1935, also a year of low prevalence, 210 cases. The local history of the disease suggests a slow

regular variation in its prevalence, underlying the rapid changes from year to year, and repeating itself after a period of not less than 50 years, possibly rather more than 100 years. The minimum, about 1916, is already some twenty years behind us; there is no sign at present of the maximum having been reached.

There is then a possibility that for some years the number of cases of scarlet fever may remain at a comparatively high level. But, notwithstanding the greater prevalence of the disease in the last twenty years, there have been fewer deaths from it, so that it is now less harmful than measles or whooping-cough.

Scarlet Fever: Deaths and
Fatality Rate (Number of deaths per thousand cases notified).

		North Riding (Guisborough) Combined Districts.		England & Wales.
		Number of Deaths.	Fatality Rate.	Fatality Rate.
1905—09	...	8	9·8	?
1910—14	...	31	25·9	?
1915—19	...	5	9·9	17·8
1920—24	...	6	8·5	11·2
1925—29	...	6	8·5	7·4
1930—34	...	3	2·7	6·3
1935—37	...	0	0 0	4·8
(3 years)				(1935 & 1936 only).

In the last five years there have been, in the Combined Districts, 1,376 cases of the disease and one death, so that the fatality rate over that period has been 0·7 per thousand, less than one-tenth of what it was in 1925-29.

The proportion of cases removed to isolation hospital has almost steadily increased. In 1915-19 only 25% of the patients were isolated out of their own homes and yet in one of these years there were no more than 48 cases in the whole area of the Combined Districts. Since then the proportion of cases removed to hospital has increased until now it averages 77% over all the districts, while the total number of cases has grown as regularly. It is not that removal to hospital with subsequent return of the patient home on discharge has itself had any effect in increasing the prevalence of the disease, but it would appear to have done nothing to prevent it. One cannot say that removal to hospital in scarlet fever is useless as a public health measure, for it has doubtless had some effect in bringing about the great reduction in the fatality of the disease, and although the years of low prevalence again are much the same as they were in the 'nineties, the years of higher prevalence now do not reach such large figures. The explanation of the inadequacy of isolation in the wiping out of scarlet fever has come to light in the last few years; it appears that the same germ which in one person will cause an attack of scarlet fever, in another will cause tonsillitis only, or in a third, symptoms not particularly different from a cold in the head, or in a fourth, a local infection at

some other part of the body, and these cases, not scarlet fever but caused by and carrying the same germ, since they are not isolated, spread their infection to other persons, some of whom develop typical scarlet fever. The logical alternatives would appear to be, either to give up removal to hospital of patients with scarlet fever, with the exception of the more serious cases that cannot receive at home the care they need, or to isolate strictly, and preferably in hospital, not only all cases of scarlet fever but also all those cases of tonsillitis, colds, etc., due to the same germ. The latter course is impracticable as many of these attacks are too mild to be brought to medical notice, definite diagnosis of the causal organism cannot be made without a delay of several days for bacteriological investigation, hospitals and staffs would require to be enlarged, and the cost would be out of proportion to the benefit likely to accrue.

The percentage of cases of scarlet fever removed to hospital in each of the districts last year and in the last five years has been as follows:—

		Redcar Borough.	Guisborough U.D.	Loftus U.D.	Saltburn & Marske U.D.	Skelton & Brotton U.D.
1937	...	70%	78%	96%	56%	88%
1933—37	...	74%	74%	89%	66%	82%

The principle governing admission to hospital of scarlet fever cases which is at present adopted in the district is that, if the patient can be properly isolated and treated at home, he should remain there, and proper isolation is held possible if there is someone to attend to the patient who is herself protected by a previous attack of fever and if it is easy to avoid contact of unprotected children with the patient. Doubtless some cases that could be with advantage isolated and treated at home have been removed to hospital because perhaps the parents thought the child would make a better recovery there, but it is certain that the ordinary mild attack of scarlet fever should be recovered from quicker and with less risk of complications if treated alone at home rather than in association with others in a hospital ward.

Both diphtheria and enteric fever were entirely absent from the district during the year.

An epidemic of influenza occurred in the first quarter of the year with a number of cases of influenzal pneumonia; four cases of this were notified in January, nine in February, four in March and three in April, which accounts for half of the 41 cases of pneumonia notified during the year. The type of disease appeared to be mild, the general death-rate in the first quarter of the year being particularly low.

Other non-notifiable infectious disease was slight, the most important being a general outbreak of measles about midsummer and after.

The number of patients admitted to the Joint Isolation Hospital from this and other districts is given in the following table for the twelve months ended March 31st, 1938, the figures in brackets being the admissions in the previous twelve months.

Joint Isolation Hospital.

Patients admitted April 1st, 1937, to March 31st, 1938.

	Redcar Borough.	Guisborough U.D.	Loftus U.D.	Saltburn & Marske U.D.	Skelton & Brotton U.D.	Total.
Scarlet Fever ...	73 (121)	22 (15)	57 (29)	25 (10)	50 (45)	227 (220)
Diphtheria ...	8 (3)	2 (1)	11 (18)	1 (5)	10 (4)	32 (30)
Enteric Fever ...	*2 (1)	— (19)	— (4)	— (1)	2 (18)	*4 (44)
Puerperal Fever	2 (2)	—	— (1)	1 (—)	— (2)	3 (5)
	85 (129)	24 (35)	68 (52)	27 (16)	62 (69)	266 (301)

* Includes one case in which diagnosis was altered to appendicitis.

Three new cases of tuberculosis, all pulmonary, were notified during the year, and there were two deaths from the disease: this is a low figure, but in 1936 there had been nine deaths, so that the average would appear to be about normal.

No action was taken under Section 62 of the Public Health Act, 1925; no tuberculous person employed in the milk trade was discovered, and no action was required under the Public Health (Prevention of Tuberculosis) Regulations, 1925.

No action has been taken under Section 66 of the Public Health Act, 1925, for the prevention of blindness or for the treatment of persons suffering from any disease or injury to the eyes.

APPENDIX.

3. NOTIFIABLE DISEASES (other than Tuberculosis), 1937.

	All Ages	Under 1	1 year	2—	3—	4—	5—	10—	15—	25—	35—	45—	65—	Cases admitted to Hosp.	Total deaths
Smallpox	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	...	—	—	1	—	2	12	2	4	2	—	—	—	18	—
Diphtheria	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Enteric Fever	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	...	—	—	—	—	—	—	—	—	1	—	—	—	—	—
Pneumonia	...	2	1	2	1	—	2	1	4	7	6	9	6	—	—
Erysipelas	...	—	—	—	—	—	—	—	—	—	1	1	1	—	—

4. TUBERCULOSIS.

Age Periods.	New Cases.				Deaths.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 year	—	—	—	—	—	—	—	—
1—4 years	—	—	—	—	—	—	—	—
5—9 years	—	—	—	—	—	—	—	—
10—14 years	—	—	—	—	—	—	—	—
15—19 years	—	1	—	—	—	—	—	—
20—24 years	—	1	—	—	—	—	—	—
25—34 years	1	—	—	—	—	1	—	—
35—44 years	—	—	—	—	1	—	—	—
45—54 years	—	—	—	—	—	1	—	—
55—64 years	—	—	—	—	—	—	—	—
65 years and upwards	—	—	—	—	—	—	—	—
All Ages	1	2	—	—	1	2	—	—

All of the fatal cases previously notified.

5. ABSTRACT OF THE WORK OF THE SANITARY DEPARTMENT.

	Number dealt with	Informal Notices	Statutory Notices	Result	Remarks
Nuisances ...	296	256	4	All Abated, except 9	—
Slaughterhouses ...	7	—	0	—	—
Dairies and Cowsheds ...	78	156 to limewash, 4 for repairs, 3 others	—	Two of the repairs part completed ; five outstanding from 1936 com- pleted.	—
Bakehouses ...	9	—	0	—	—
Factories and Workshops ...	53	3	0	Still outstanding, but to be dealt with.	—
Common Lodging House ...	1	—	0	—	—
Offensive Trades ..	7	—	0	—	6 fried fish shops, 1 gut- scraping business.
Music Halls, Cinemas, etc...	1	0	0	—	—
Premises disinfected ..	25	—	—	—	—
Shops ...	46	—	—	—	—

6. LABORATORY EXAMINATIONS.

	Borough of Redcar.	Guisborough Urban District.	Loftus Urban District	Saltburn and Marske-by-Sea Urban District	Skelton and Brolton Urban District.	Total.
Sputa examined for Tubercle bacilli	48	25	18	11	15	117
Sputa found positive	9	6	4	3	4	26
Swabs from Diphtheria suspects examined	39	28	23	14	36	140
Sputa from Diphtheria suspects found positive	8	3	4	2	15	32
Swabs from Diphtheria convalescents examined	20	2	11	19	32	84
Swabs from Diphtheria contacts	3	17	2	—	8	30
Blood examined for Enteric group (Widal Test)	3	—	1	—	4	8
Faeces. for Enteric Group	2	1	2	—	11	16
Other examinations	5	—	3	1	3	12
Diphtheria Antitoxin issued by Local Authority	Yes	Yes	Yes	Yes	Yes	

7. HOUSING STATISTICS.

New Houses erected in 1937:

(a) By the Urban District Council	...	...	...	...	38
(b) By private enterprise	...	...	...	...	32
Houses reconstructed in 1937	..	...	...	...	5

1. *Inspection of Dwelling-houses during the year :*

(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	161
(b) Number of inspections made for the purpose	...	...	...	1160
(2) (a) Number of dwelling-houses (included under sub-head (1) above which were inspected and recorded under the Housing Consolidated Regulations, 1925	...	...	...	78
(b) Number of inspections made for the purpose	...	...	...	800
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	...	...	...	1
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found to be not in all respects reasonably fit for human habitation	...	...	...	71

2. *Remedy of defects during the year without service of formal notices :*

(1) Number of defective dwelling-houses rendered fit in consequence of informal action by the local authority of their officers	37
---	-----	-----	-----	----

3. *Action under Statutory Powers during the year :*

A. Proceedings under Sections 9, 10 and 16, of the Housing Act, 1936 :

(1) Number of dwelling-houses in respect of which notices were served requiring repairs	...	...	...	2
(2) Number of dwelling-houses rendered fit after service of formal notices:				
(a) By owners	...	...	...	2
(b) By local authority in default of owners	...	...	...	Nil

B. Proceedings under Public Health Acts :

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	...	...	...	41
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :				
(a) By owners	...	...	...	41
(b) By local authority in default of owners	...	...	...	Nil

C. Proceedings under Sections 11 and 13, of the Housing Act, 1936 :

(1) Number of dwelling-houses in respect of which Demolition Orders were made	...	...	...	Nil
(2) Number of dwelling-houses demolished in pursuance of Demolition Orders	...	...	...	2

D. Proceedings under Section 12, Housing Act, 1936 :

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	...	...	...	0
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	...	...	...	Nil

4. *Housing Act, 1935. Overcrowding :—*

(a)	(1)	Number of dwelling-houses overcrowded at the end of the year	...	22
	(2)	Number of families dwelling therein	... ..	22
	(3)	Number of persons dwelling therein	... ..	121
(b)		Number of new cases of overcrowding reported during the year	...	6
(c)	(1)	Number of cases of overcrowding relieved during the year	...	51
	(2)	Number of persons concerned in such cases	... ..	343
(d)		Number of dwelling-houses again overcrowded after being dealt with	...	Nil
(e)		To relieve overcrowding in Wilton Parish it is proposed to erect six houses at Lazenby.		

8. SUMMARY OF VITAL STATISTICS.

Period.	Population.	Births.	Deaths.	Deaths at Ages.		Deaths from all forms of Tuberculosis.	Yearly Birth-rate.	Yearly Death-rate.	Infant Mortality Rate (Infant Deaths per thousand births).
				Under 1 year.	1—4 years.				
1884—1888	6,100	1100	552	161	88	—	36.1	17.1	146
1889—1893	5,623	849	410	94	56	—	30.2	14.6	108
1894—1898	5,630	910	413	98	44	—	32.4	14.7	108
1899—1903	5,645	932	468	132	50	—	33.0	16.6	142
1904—1908	6,300	1026	509	132	69	42	32.6	16.2	129
1909—1913	7,062	1044	542	128	56	58	29.6	15.4	122½
1914—1918	6,600	997	548	106	—	40	30.2	16.6	106
1919—1923	7,104	964	495	94	30	30	27.1	13.9	97½
1924—1928	6,656	651	440	53	31	33	19.6	13.2	81½
1929—1933	6,888	575	486	36	21	23	16.7	14.1	62½
1934	7,932	131	99	5	7	7	16.5	12.5	38
1935	7,949	133	120	11	3	5	16.7	15.1	83
1936	7,980	126	112	6	3	9	15.8	14.0	47½
1937	8,034	142	86	5	3	2	17.7	10.7	35