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Contributors

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INSTITUTE OF SOCIAL
MEDICINE

10, PARKS ROAD,
OXFORD

County Borough of Smethwick.

The
Health of the Borough
in
1943.

HUGH PAUL, M.D., D.P.H.,

Medical Officer of Health,
Tuberculosis Officer, School Medical Officer
and Medical Superintendent of Joint Isolation
Hospital and Sanatorium.

JOHN H. WRIGHT, M.B.E., F.S.I.A.,

Chief Sanitary Inspector.





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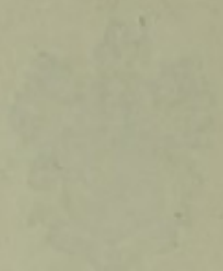
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A County Borough of Southwick

Health of the Borough

1943

THOMAS PAUL, M.D., D.P.H.

At a meeting of the Health Committee of the Borough Council, held on the 12th day of January, 1943, at 7.30 p.m., the following resolution was passed:—

THOMAS PAUL, M.D., D.P.H.

County Borough of Smethwick.

*Public Health Department,
"The Uplands,"
Hales Lane,
Smethwick,
July, 1944.*

TO THE MAYOR, ALDERMEN AND COUNCILLORS FOR THE
COUNTY BOROUGH OF SMETHWICK.
MR. MAYOR, LADIES AND GENTLEMEN,

The year 1943 was rather an uneventful one in the realm of public health in Smethwick; there were no serious setbacks to health and no material developments in the work of the Health Department.

The birth rate showed a very pleasing increase, and the actual number of births was the highest for ten years. This change is probably somewhat artificial, and in part is due to war conditions, and may not continue. Further, the rate is still considerably lower than that prevailing for some years after the last war. Nevertheless the increase in the number of children born is very welcome, and one can only hope that it will continue.

There were 41 illegitimate births; the average for the past three years is not appreciably greater than that for the decade before the war.

The death rate showed little change, but once again the deaths from cancer increased. This increase has steadily and remorselessly gone on for two decades, and now exactly one person in every six dies from cancer in this town.

The infant mortality rate was relatively high. The steady decline in infant deaths which has been such a feature of our statistics for many years continued till the second year of the war, but has since been reversed. The rate of 64.5 per 1,000 was much the same as it was ten or twelve years ago, and is substantially higher than the previous year's rate of 54.5. Very surprisingly, and for the only time in Smethwick, the rate of illegitimate children was actually lower than that for legitimate children.

The incidence of infectious diseases showed no startling changes. Whooping cough was very prevalent, but diphtheria notifications were only 22, the lowest number ever recorded. There was however a minor recrudescence of diphtheria in the spring of 1944, but the cases were on the whole very mild. Diarrhoea and enteritis in children caused eleven deaths, an unusually large number, and influenza killed 34 persons. The incidence of scarlet fever was low.

TUBERCULOSIS.

Tuberculosis continued to show the increase which was recorded in 1941 and 1942. The death rate from this disease during the last three years was 10% higher than for the three years immediately preceding the war, and the notifications were 25% higher, a very disquieting fact. The increase was greater in the case of women than of men.

The non-pulmonary type of the disease increased more than the pulmonary, but the total figures are too small to be of statistical significance.

The amount of work done at the Chest Clinic has increased considerably. The number of patients examined has increased by about 10% since 1938, but the number of patients visited in their homes has increased in the same period from 31 to 234. In addition, the tuberculosis visitor has made many more home visits. The X-Ray work has steadily increased since the plant was installed in 1931, and even in the last year the number of photographs taken has increased from 878 to 1,139.

The number of patients admitted to pulmonary hospitals and sanatoria increased from 67 in 1942 to 107 in 1943.

TREATMENT ALLOWANCES FOR TUBERCULOUS PERSONS.

The scheme of financial assistance to persons undergoing treatment for pulmonary tuberculosis has been in operation in the Borough for exactly 12 months, the first allowance having been paid during the week commencing 21st June, 1943.

In July last, the tuberculosis register contained particulars of approximately 600 persons, but after excluding (a) those who were suffering from the non-pulmonary type of the disease, (b) those reporting at the Chest Clinic for routine examination as distinct from treatment, (c) those not normally employed and (d) those who were known to have returned to work, there remained only 58 cases for closer examination. Of these, only 23 persons were found to be eligible for allowances under the Ministry's scheme, and these allowances were granted at once.

Several reports have been made to the Health Committee on the working of the scheme, and in the body of this report a summary of the figures for a period of one year is set out, giving statistical details.

The scheme of financial allowances is certainly a step in the right direction, and helps in the treatment and prevention of a grave disease, but it is only a step. Its greatest defect is its failure to give allowances to chronic or incurable cases, thereby placing on the Clinical Tuberculosis Officer the invidious task of dividing his patients into two classes, and of telling the patients in one of these groups that they are not curable, and therefore ineligible for grant. This task is not made any the easier by the official explanation that the money devoted by the Treasury to this purpose is granted under the Defence Acts, and is allocated specifically for the purpose of getting more persons back to work.

The universal comment of the ineligible is bitter, and under the circumstances, understandable: "They only want us when they can make money out of us; when we can't earn any they throw us on the scrap heap!"

It is of no avail to tell them that they can get allowances from the Public Assistance Committee. The invidious distinction between the useful and the useless is only emphasised.

It does not appear to be a question of money; the ineligible can be given the necessary grants by the Public Assistance Committee. But these can only be given after an application is made by the patient to the Relieving Officer, and it is necessary arbitrarily to divide the patients into two categories, (a) those whom the Treasury consider can be restored sufficiently to help the war effort, and (b) those who from the Treasury point of view are useless in the war effort.

The unfortunate tuberculosis officer is given the duty of dividing the sheep from the goats, and of telling the latter that they are useless to the war effort. The Ministry of Health is to be congratulated on its choice; no body of men could carry out this task with more kindly sympathy and consideration, or with greater tact, but no body of men could be found who could dislike it more.

Is this task really necessary?

LIGHT WORK.

I would like to draw attention to the number of patients who have recovered from their complaint to such an extent that they are capable of undertaking light work but who fail to obtain suitable employment. It is the practice in these cases to advise patients that they are so capable and to request them to apply to the Employment Exchange and take such other steps as may be necessary to secure suitable employment. At the same time, they are advised to consult the Clinical Tuberculosis Officer as to the suitability of any work that may be offered before accepting it.

At the present time there are 12 patients certified as fit for light work who are unable to obtain it and continue therefore to receive maintenance allowances. The average period during which they have been fit for such employment is rather more than four months, and in three cases it is more than eight months since the patients concerned were certified as being fit for light work.

This state of affairs is somewhat surprising in an area in which so many different trades are carried on.

ADEQUACY OF ALLOWANCES.

The maintenance allowances are not generous by modern standards, and a number of cases dealt with could have been granted higher allowances under the Council's regulations for the administration of home assistance under the Poor Law Acts. Having regard to the fact that the "tuberculosis" scheme requires the scale rates to be decreased by the amount of any sickness or disablement benefit payable under the National Insurance Act and by the amount of any disability or treatment allowance received in respect of pulmonary tuberculosis from the Ministry of Pensions or other public funds, the scale rates for adults might be improved.

The allowances for dependent children under 16 years of age also need reconsideration; they are less than those administered nationally by the Assistance Board to the children of healthy unemployed persons and supplementary pensioners. In view of the special circumstances and the obvious need for special care and nourishing diet if they are to remain free from the complaint of their parents, there would appear to be a good case for an appreciable increase in their allowance.

Both these factors usually operate in the case of the family man who, generally speaking, has the greatest responsibilities, and while cases cannot be cited in which patients have refused to accept treatment because of the inadequacy of the allowances, the remarks and attitude of some of them showed that they expected more generous treatment.

If such an attitude is justified, one is bound to wonder whether the object the scheme is being achieved, namely, whether the allowances do in fact enable necessary treatment to be undertaken without financial anxiety about the support of the family or the upkeep of the home.

VENEREAL DISEASE.

The position as regards venereal disease is not altogether unsatisfactory. The number of cases of syphilis coming to our notice, although higher during the last two years than during the first two years of the war, is nevertheless no higher than the average for the last three years of peace, while there is an actual reduction in the incidence of gonorrhœa.

Complacency is not however justified. We have only knowledge of those cases coming for treatment to our treatment centre at the General Hospital, and we do not hear of the missed cases, or of persons who do not seek treatment. The local general practitioners tell me they have not noticed any increase in venereal disease during the war years.

ST. CHAD'S HOSPITAL.

The municipal hospital continued to deal with a large and varied assortment of patients, and the bed occupation was the highest since the war. During the early period of the war, the admissions had been deliberately restricted in order to be able to deal with air raid casualties, and also to enable the patients in the hospital to be so grouped as to give the maximum possible protection against high explosives and incendiary bombs. The shortage of beds, however, and the consequent suffering of those who could not secure institutional treatment, became so severe that it was decided to admit patients to the full capacity of the hospital, and the average occupation went up from 98 in 1941 to 111 in 1943.

The acute housing shortage together with the higher birth rate made the position of expectant mothers so difficult that the demands for beds on the maternity floor exceeded all previous records, and the number of women who were confined in St. Chad's increased from 373 in 1941 to 536 in 1943. The result was that the maternity floor was almost always full, and occasionally dangerously overcrowded, and administration became more and more difficult. There was one slight outbreak of sepsis which was rapidly brought under control.

The accommodation for newly-born infants is grossly inadequate both in quantity and quality. After the war it will be a matter of urgency to provide more than one nursery, suitably heated, with good isolation provision, and generous plumbing. The wearing of masks has been compulsory on this floor for some years.

The staffing of the midwifery block has been, and still is inadequate, but the sister in charge and the staff midwives have done wonderful work in spite of their great difficulties. Their cheerfulness and unselfishness are obvious to their patients, and greatly appreciated by the hospital committee.

In general in the hospital an attempt is made to conform to the 96 hour fortnight. This period is not greatly exceeded by the day staff, but the night staff still do substantially more.

INFANT WELFARE.

The number of health visitors and school nurses remains at thirteen, of whom the equivalent of seven do maternity and child welfare work. As their work is so urgent that even in war-time it cannot safely be restricted, and as their duties have been greatly increased both in amount and in responsibility, it has been a matter of great difficulty to maintain the existing services. The number of infant welfare centres which was 13 per week before the war has been reduced to 10. The attendances of children under one year has not however been reduced; in fact, the numbers of such children attending are greater than ever before; and have steadily increased since 1940. Now 90 per cent. of the newly born attend our centres. The children over one year of age however have not attended in substantial numbers, and although more of them came in 1943 than in either of the previous two years, their total attendances are still fewer than half the pre-war figures.

This is in main due to the fact that their mothers are doing war work. Many of these children however attend the day nurseries regularly (56,015 attendances in 1943).

It can therefore be safely claimed that a higher proportion of all children under five years of age come under the direct supervision of your doctors and nurses than at any time in the past.

ANTE-NATAL CARE

The attendances of mothers at our Ante-Natal Centres reached another new level, and provided an embarrassing difficult situation for the staff. In 1938 there were two obstetric officers and 6,226 attendances; last year the attendances were just under 9,000 and the work is in the main done by one doctor. The clinics are unduly crowded, and it is impossible to give each woman the detailed attention one would desire, but nothing can be done about it yet.

The number of individual women who attended was 1,510, a figure in excess of the number of births (1,389).

MIDWIFERY.

In spite of war-time difficulties, of shortage of staff and of illness, the municipal midwifery services had a very satisfactory year. All but about 200 of the births in the town took place either in St. Chad's Hospital (527) or were undertaken by the municipal midwives (664). The standard of visiting we have set is 26 visits per patient, but actually

the midwives averaged 27 visits for every case booked, and 29 for every case delivered.

The number of cases for which medical aid was summoned by our own or independent midwives, remains fairly constant at about 200 each year.

The maternal mortality rate (2.15) was about the same as for England and Wales (2.29).

HOUSING.

The primary public health need in Smethwick is housing, more housing and better housing. The conditions under which many of our inhabitants live are almost intolerable, and appear to be getting worse. Constantly pathetic letters are reaching this department from persons who are in desperate straits, and who have nowhere to go. Quite apart from the newly married couples, where the husband is in the forces and for whom the housing situation immediately after the war is indeed bleak, there are large numbers of couples with one, two or three young children who are living in totally inadequate semi-furnished rooms. Many of these persons are at the mercy of unsympathetic landlords and landladies, to whom the possession by their sub-tenants of children is a crime punishable by outlawry; they live in constant fear of eviction, a fear which no legal statute can quite remove, and the contribution to the national effort which they are making is reduced by anxiety, and by their frequent efforts, usually fruitless, to secure better accommodation.

A married woman, the wife of a war worker and the mother of two young children, gave birth at St. Chad's to twins. On hearing the news the landlady of the furnished rooms they occupied, told the happy father that she would not allow the new babies to return to the rooms. She did not like babies, and mother and children could die of exposure or go to the workhouse for all she cared. She could easily re-let her rooms.

The remedy for these troubles is simply stated, but not so easily put into operation. It is more houses, and still more houses, and yet more houses. When the supply of houses is sufficient for the demand, and there is a minute margin over, then not only will these housing troubles cease, but the slums will melt away of themselves. The tenants of the leaky shells in Halford's Lane did not live (or exist) there because they liked either the houses or the neighbourhood, but because they could get no better accommodation. As soon as tenants can leave their houses for better accommodation, and that will only come when a vast housing programme is completed, the natural laws of supply and demand will apply and it will not be possible to exploit a tenant by charging a high rent for an insanitary house, or part of a house.

For the past 30 years the country tried to meet the problem, partly it is true by building houses, but also substantially by restrictive legislation. This legislation failed because dishonest persons will always get round the law, and because after all, the price of an article is what it will fetch, and a house in which in a normal market would not sell for £10, may now have a scarcity value of ten or twenty times that sum.

For these reasons, the Government's temporary house—the Portal house or modification of it—must receive a great welcome. It is true that these houses fall short of our minimum standards for normal times, but they are palaces compared with the accommodation in which thousands of our people are living to-day. The Portal Houses are small for a family of four, but they are bigger than a one-roomed furnished slum. The kitchen may be very near to the living room and hence the smell of cooking may pervade the whole house, but they are self-contained and they can become a home.

The choice during the next five years will not be between the Portal sub-standard house, and the good municipal type house which we all hope to see built by the million in the near future, but between the Portal House on the one hand, and on the other no house at all, or cramped rooms. The young married couple want a home. They must have a home. The Portal house is not a first-class home, and I look

forward to the time when I shall personally be agitating for their complete abolition, but it can be a temporary home and a better temporary home than can be provided by any other means.

Let us therefore press loudly for more and more Portal houses. That will be our first task. Our second will be to press equally strongly for their replacement by first class houses with every modern amenity of light and air and sanitary convenience.

The above remarks are highly controversial. Most Medical Officers of Health would regard with great uneasiness, or even with open hostility, any lowering of housing standards and indeed all of us hope that the standard of housing of the future will be very much better than ever it has been in the past. We do not consider that the Portal house, or a modification of it will attain or can ever attain the standard of housing we regard as an essential. Why therefore, do we welcome it?

A woman wrote to me the other day to ask me to assist her to get housing accommodation. Her husband is an ex-serviceman invalided out of the Army. She has an 18 months old child and is expecting a second baby. She and the baby sleep on a sofa in their one room, and the husband on two chairs. She has tramped the town for months seeking accommodation and is now losing heart. Would she be satisfied with a Portal house? She would think it Heaven! It isn't, but . . .

Mr. and Mrs. U. have twins, and they all live, sleep, and eat in one room. Perhaps it's an exaggeration to say live. Let's say exist. Would they like a Portal house for a few years until a proper house is available?

Mr. and Mrs. C. have a furnished house in the Bearwood district and they like it. They have two babies, and the house is just right. There is no agreement signed however, and the landlord wants to evict them, and threatens to put them in the street. Mrs. C. tells me that he offered them three rooms above a shop as alternative accommodation. These rooms have no cooking facilities, no washing facilities, and no fittings for any kind of artificial lighting. He asks 18/6 per week rent, with £14 down. Would they like a Portal house? Well, they would prefer the Bearwood house in which they now live, but in the Portal house, they would not have to put up with the unwelcome attentions of a Shylock, and they would not have to worry about where to sleep next week.

Mr. S. has been discharged from the forces. He has a wife and two babies, and is looking forward to—no, he is probably not looking forward, but his wife is expecting to have another baby soon. They have one bedroom and it is not big enough to hold another cot for the expected child.

One could go on indefinitely. The choice before these people is not whether they will get a nice new municipal house immediately after the war or a Portal house. If such choice were offered them, there is no doubt which they would prefer. The Portal house would find no tenants. But such a choice is out of the question. The question which is eternally before the eyes of these poor people is how long are they to continue to tolerate these terrible conditions, and how soon can they get some place they can call home, some place which will be their own. If they can get a clean, neat, small two-roomed steel house in 1945, they will be delighted.

But this is not all. There are thousands of young men in the armed forces who have married during the past four years, and they will want some place of their own. If any of them should return in 1944 there will not be any accommodation for them to get. The houses just do not exist. They will have to do what the unfortunate families described above have been doing for years; they will have to tramp from street to street seeking some place, however humble, in which to lodge. And such places will be *more* difficult to get immediately after the war, not *less* difficult.

It is imperative that something should be done for them at the earliest possible moment, not in ten years time, or even five. It is quite impossible to provide them all with the standard type of municipal house in even five years. The Portal house fills the gap. It is only a stopgap, but it is infinitely better than any practical alternative during the next couple of years.

I believe the public can rest assured that Medical Officers of Health will press for the abolition of all these Portal houses from about 1955.

The re-housing difficulties in Smethwick are greater than for most other towns, because our 2,500 acres are almost completely built up, and we must perforce either build outside the boundaries, as we have done in the past, or build upwards in the shape of flats.

There are two points of view. Some would endeavour to house in our 2,500 acres the 75,000 persons who represented our normal population before the war, and to do this would embark on a programme of flats. They would also use for further housing those sites in the industrial north east of the town which are now covered by houses ripe for demolition.

Others would leave as open spaces most of the cleared sites, or would provide more parks and grassland and more playing fields. They would leave all the north east part of the town to industry and would build the new houses required in the country—outside our boundaries. This plan might well reduce the population of the town to 50,000.

In order to decide which of these two plans would be the better, one has only to consider what the inhabitants would think in 1964. Would they consider that their forebears had shown the greater vision if their towns of 50,000 were widely and generously spaced and open, with ample green spaces, or if their town of 75,000 contained 30 persons to the acre and lacked open spaces.

DAY NURSERIES.

The number of day nurseries did not vary during the year and no new ones have been opened since December, 1942. Three of the five existing nurseries however, have been extended, the Hollies from 30 to 50 places, and Edgbaston Road and Brasshouse Lane from 50 to 60 places each.

The attendances continue to be very high, and all nurseries are working to capacity. The total attendances during the year were over 56,000.

The organisation of a scheme for providing and administering these day nurseries has been a matter of great difficulty in these days of shortage of material and of nursery and domestic staff, and the fact that our scheme was built up so smoothly and quickly was due in no small measure to the very great help given to us by the permanent officers of the Ministry of Health in Birmingham.

There was a complete absence of red tape, and decisions were often given by telephone, being confirmed later by letter. Equipment was speedily supplied, the Ministry of Labour helped very much in the allocation of staff, and suggestions for modification, improvement or extension were sympathetically received and considered and speedily carried out.

The organisation of these nurseries has indeed been a pleasant task.

CONCLUSION.

Finally, I should like to express my most sincere thanks for generous help freely given to the department by the Chairman and members of the Health Committee, by my colleagues in other offices, and by my own staff, who have carried on and are still carrying on cheerfully under great difficulties.

I am, Mr. Mayor, Ladies and Gentlemen,

Your obedient servant,

HUGH PAUL, M.D., D.P.H.,
Medical Officer of Health.

Annual Report for 1943.

GENERAL STATISTICS.

AREA: 2,500 acres.

POPULATION: Census, 1931—84,406.

Estimated pre-war: 78,290.

Estimated war-time population cannot be given.

RATEABLE VALUE: £422,410.

ESTIMATED PRODUCT OF A PENNY RATE: £1,600

RATES IN THE £: 15s. 4d.

ESTIMATED NUMBER OF HOUSES IN THE BOROUGH: 21,195.

EXTRACTS FROM VITAL STATISTICS

			1942	1943
BIRTHS:	Males	...	656	677
	Females	...	590	670
	Total	...	1,246	1,347
Illegitimate Births included in above total			40	41
Birth-rate per 1,000 population			17.2	18.6
DEATHS:	Males	...	490	497
	Females	...	384	449
	Total	...	874	946
Death-rate per 1,000 population			12.0	13.08
INFANT DEATHS:	Males	...	32	58
	Females	...	36	29
	Total	...	68	87
Infantile Mortality:				
	Legitimate	...	53.0	65.0
	Illegitimate	...	100.0	48.8
	Total	...	54.5	64.5

DEATHS FROM:	No.	1942	No.	1943
		Rate per 1,000 Population.		Rate per 1,000 Population.
Enteric Fever	—	—	—	—
Measles	4	0.05	2	0.02
Whooping Cough	2	0.02	3	0.04
Diarrhoea and Enteritis (under 2 years)	4	0.05	11	0.15
Diphtheria	2	0.02	—	—
Scarlet Fever	—	—	2	0.02
Influenza	4	0.05	34	0.47
Cancer	139	1.92	156	2.15
Respiratory Diseases	131	1.81	147	2.03
Pulmonary Tuberculosis	51	0.70	61	0.84
Other Forms of Tuberculosis	6	0.08	4	0.05
Cerebro Spinal Fever	3	0.04	1	0.01
Road Traffic Accidents	16	0.22	5	0.07

BIRTH-RATES, CIVILIAN DEATH-RATES, ANALYSIS OF MORTALITY, MATERNAL MORTALITY AND CASE RATES FOR CERTAIN INFECTIOUS DISEASES IN THE YEARS

1942		1943				
	Smethwick.	England and Wales.	County Boro's and Great Towns including London.	148 Smaller Towns (Resident Populations 25,000 to 50,000 at 1931 Census)	London Administrative County.	
BIRTHS:—						
Live	17.2	15.8	17.3	18.4	14.0	
Still	0.53	0.54	0.66	0.62	0.48	
DEATHS:—						
All Causes	12.0	11.6	13.3	12.1	13.9	
Typhoid and Paratyphoid	—	0.00	0.00	0.00	0.00	
Scarlet Fever	—	0.00	0.00	0.00	0.00	
Whooping Cough	0.02	0.02	0.03	0.02	0.04	
Diphtheria	0.02	0.05	0.06	0.04	0.02	
Influenza	0.05	0.09	0.09	0.10	0.07	
Smallpox	—	—	—	—	—	
Measles	0.05	0.01	0.02	0.01	0.01	
Rates per 1,000 Civilian Population:—						
	54.5	49	59	46	60	
Deaths under 1 year of age	3.2	5.2	7.5	4.8	8.6	
Deaths from Diarrhoea and Enteritis under 2 years of age	—	—	—	—	—	
NOTIFICATIONS:—						
Typhoid Fever	—	0.01	0.01	0.01	0.02	
Paratyphoid Fever	—	0.01	0.01	0.01	0.01	
Cerebro Spinal Fever	0.16	0.14	0.17	0.12	0.15	
Scarlet Fever	2.07	2.19	2.49	2.34	1.86	
Whooping Cough	2.40	1.73	1.97	1.56	2.72	
Diphtheria	0.64	1.05	1.35	0.91	0.76	
Erysipelas	0.32	0.30	0.36	0.26	0.43	
Smallpox	—	0.00	0.00	—	0.00	
Measles	6.89	7.46	9.27	7.39	8.62	
Pneumonia	1.94	1.07	1.30	0.94	0.94	
Rates per 1,000 Total Births (Live and Still):—						
	21.79	12.61	15.94	10.80	17.69	
MATERNAL MORTALITY (excluding Abortion):—						
Puerperal Infection	1.55	0.42	Not available.	—	3.10	
Others	2.33	1.59	—	—	17.69	
Total	3.89	2.01	—	—	including Puerperal Fever.	
NOTIFICATIONS:—						
Puerperal Fever	—	—	—	—	—	
Puerperal Pyrexia	—	—	—	—	—	
Rates per 1,000 Total Births (Live and Still):—						
	9.26	11.68	15.11	9.26	15.23	
	—	0.39	Not available.	—	3.05	
	2.15	1.45	—	—	15.23	
	2.15	1.84	—	—	including Puerperal Fever.	
	4.30	—	—	—	—	

REVIEW OF VITAL STATISTICS IN SMETHWICK DURING
THE PAST 25 YEARS.

Year	Birth rate per 1,000	Death rate per 1,000	Infant mor- tality rate per 1,000 births	Zymotic death rate per 1,000	Respiratory diseases	Death rates per 1,000		
						Pulmonary Tuberculosis	Non- Pulmonary Tuberculosis	Cancer
1919	22.19	13.00	84.6	0.45	3.2	1.19	0.12	1.03
1920	27.08	11.16	82.18	0.64	2.4	0.81	0.31	0.92
1921	25.46	11.11	88.28	0.69	2.27	0.68	0.22	0.85
1922	21.39	11.22	86.12	0.67	2.31	0.78	0.32	1.13
1923	20.24	10.82	65.49	0.79	1.82	0.93	0.17	1.04
1924	20.19	10.12	74.79	0.41	1.87	0.67	0.17	1.20
1925	18.36	10.36	80.11	0.52	1.91	0.77	0.24	1.10
1926	18.35	10.39	65.86	0.37	1.88	0.79	0.10	1.26
1927	17.0	11.9	78.6	0.61	2.26	0.84	0.05	1.19
1928	17.1	10.0	63	0.28	1.52	0.69	0.10	1.11
1929	17.8	13.4	79.8	0.70	2.58	0.95	0.12	1.23
1930	18.0	10.4	66.4	0.41	1.17	0.67	0.11	1.28
1931	18.0	11.2	69.6	0.57	1.63	0.62	0.10	1.24
1932	15.2	10.5	78.4	0.23	1.36	0.52	0.09	1.53
1933	14.4	10.8	62.0	0.16	1.60	0.62	0.05	1.44
1934	15.7	10.6	56.9	0.22	1.60	0.57	0.14	1.20
1935	14.7	11.1	60.9	0.31	1.10	0.59	0.06	1.56
1936	15.5	10.5	59.9	0.18	1.60	0.54	0.02	1.47
1937	14.6	11.5	52.5	0.27	1.64	0.70	0.02	1.35
1938	15.3	11.0	62.2	0.25	1.28	0.70	0.10	1.59
1939	14.8	10.7	54.5	0.26	1.04	0.52	0.05	1.79
1940	15.3	14.0	41.9	0.14	2.72	0.61	0.07	1.86
1941	15.09	13.9	60.0	0.18	2.10	0.84	0.06	1.89
1942	17.2	12.0	54.5	0.16	1.81	0.70	0.08	1.92
1943	18.6	13.08	64.5	0.24	2.03	0.84	0.05	2.15

INFECTIOUS DISEASES.

SCARLET FEVER.

The incidence of, and mortality from, Scarlet Fever during the past five years is as follows:—

Year	Cases notified	Attack rate per 1,000 population	Number of deaths	Case mortality per cent.
1939	111	1.41	—	—
1940	141	1.96	—	—
1941	220	3.06	1	0.4
1942	150	2.07	—	—
1943	128	1.77	2	1.5

DIPHTHERIA.

The incidence of, and mortality from, Diphtheria during the past five years is as follows:—

Year	Cases notified	Attack rate per 1,000 population	Number of deaths	Case mortality per cent.
1939	115	1.46	10	8.7
1940	44	0.61	2	4.5
1941	52	0.72	—	—
1942	47	0.64	2	4.2
1943	22	0.30	—	—

The number of children immunised during the past two years is as follows:—

	1942	1943
Under five years of age	841	1,109
From five to fifteen years of age ...	1,195	1,211
Totals	2,036	2,320

At the 31st December, 1943, it was estimated that 46 per cent. of the child population under five, and 70 per cent. of children from five to fifteen were protected against diphtheria.

TYPHOID AND PARATYPHOID FEVER.

One case of typhoid and one of paratyphoid fever were notified during the year.

CEREBRO-SPINAL FEVER.

Five cases of cerebro-spinal fever were notified, and there was one death. During 1942 the number of cases was 12 and 3 deaths, compared with 29 and 5 deaths in 1941.

WHOOPING COUGH AND MEASLES.

Whooping Cough and Measles were prevalent during 1943, the former showing an incidence higher than for the country as a whole.

	Cases Notified		Attack-rate per 1,000 population	
	1942	1943	1942	1943
Whooping Cough	174	453	2.40	6.26
Measles	499	494	6.89	6.83

SMETHWICK & OLDBURY JOINT ISOLATION HOSPITAL.

STATEMENT OF CASES ADMITTED AND DISCHARGED DURING THE YEAR 1943.

	Number of Cases in Hospital on December 31st, 1942.				Number of Cases Admitted during 1943				Cases Discharged, Died, or Transferred to other Institutions during 1943.				Number of Cases in Hospital on December 31st, 1943.			
	Males	Females	Children under 16	Total	Males	Females	Children under 16	Total	Males	Females	Children under 16	Total	Males	Females	Children under 16	Total
SMETHWICK :																
Diphtheria ...	1	...	3	4	5	14	10	29	6	13	9	28	...	1	4	5
Scarlet Fever ...	...	1	2	3	...	2	24	26	...	3	24	27	...	...	2	2
Measles ...	...	...	...	...	...	...	14	14	...	...	14	14	...	...	...	...
Whooping Cough ...	...	...	...	...	...	...	13	13	...	...	12	12	...	...	1	1
Erysipelas ...	...	...	...	...	4	6	1	11	4	...	1	11	...	...	...	...
Pneumonia ...	...	...	1	1	...	...	...	...	...	...	1	1	...	...	...	...
Chicken-pox ...	...	...	...	...	...	...	7	7	...	...	6	6	...	...	1	1
Cerebro Spinal Fever ...	...	...	...	...	...	...	2	2	...	...	2	2	...	...	...	...
Scabies ...	...	...	...	...	1	...	3	4	1	...	1	2	...	...	2	2
Impetigo ...	...	...	...	...	...	...	1	1	...	...	1	1	...	...	...	...
OLDBURY :																
Diphtheria ...	...	...	4	4	4	6	35	45	4	5	33	42	...	1	6	7
Scarlet Fever ...	...	...	3	3	1	...	10	11	1	...	10	11	...	...	3	3
Mumps ...	...	...	...	...	...	...	1	1	...	...	1	1	...	...	...	...
Chicken Pox ...	...	...	...	...	...	...	1	1	...	...	1	1	...	...	...	...
Impetigo ...	...	...	2	2	...	...	...	...	...	...	2	2	...	...	...	...
Measles ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
WEST MIDLANDS JOINT HOSPITAL BOARD :																
Diphtheria ...	...	...	1	1	1	1	9	11	1	1	6	8	...	...	4	4
Totals ...	1	1	16	18	16	29	132	177	17	28	125	170	...	2	23	25

TUBERCULOSIS.

NOTIFICATIONS.

The following table shows the notifications received and the attack rate with the deaths and death-rate for each year since the commencement of the Public Health (Tuberculosis) Regulations, 1912:—

	Notifications received :		Attack Rate per 1,000 of the population :		Deaths		Death rate	
	Pulmon-ary	Other forms	Pulmon-ary	Other forms	Pulmon-ary	Other forms	Pulmon-ary	Other forms
1912	307	—	4.1	—	69	29	0.94	0.36
1913	318	50	4.3	0.68	64	20	0.87	0.27
1914	143	167	1.9	2.2	84	14	1.15	0.19
1915	229	103	3.1	1.4	79	15	1.09	0.21
1916	204	117	2.6	1.4	91	12	1.16	0.15
1917	206	126	2.6	1.6	103	6	1.31	0.07
1918	194	80	2.5	1.0	97	11	1.27	0.14
1919	260	60	3.5	0.8	87	9	1.19	0.12
1920	146	31	1.9	0.4	62	24	0.81	0.31
1921	88	14	1.1	0.18	53	17	0.68	0.22
1922	112	17	1.4	0.2	61	25	0.78	0.32
1923	80	18	1.02	0.2	73	14	0.93	0.17
1924	110	18	1.39	0.2	53	14	0.67	0.17
1925	74	24	0.9	0.3	61	19	0.77	0.24
1926	94	16	1.2	0.2	61	8	0.79	0.10
1927	87	38	1.1	0.49	65	4	0.84	0.05
1928	73	25	0.8	0.29	59	9	0.69	0.10
1929	108	34	1.2	0.4	81	11	0.95	0.12
1930	76	19	0.89	0.22	57	10	0.67	0.11
1931	80	29	0.93	0.33	53	9	0.62	0.10
1932	65	20	0.76	0.23	44	8	0.52	0.09
1933	55	16	0.64	0.19	53	5	0.62	0.05
1934	72	19	0.85	0.22	48	12	0.57	0.14
1935	95	19	1.15	0.23	49	5	0.59	0.06
1936	81	21	0.99	0.25	44	2	0.54	0.02
1937	77	4	0.95	0.04	57	2	0.70	0.02
1938	78	20	0.97	0.25	56	8	0.70	0.10
1939	89	15	1.11	0.19	40	4	0.52	0.05
1940	52	15	0.72	0.20	44	5	0.61	0.07
1941	83	10	1.15	0.14	61	5	0.84	0.06
1942	102	28	1.40	0.38	51	6	0.70	0.08
1943	92	20	1.27	0.27	61	4	0.84	0.05

The following table shows the total NEW CASES, i.e., all PRIMARY NOTIFICATIONS and also NEW CASES coming to the knowledge of the Medical Officer of Health from the death returns, transfers from other areas, etc.

TUBERCULOSIS.

AGE PERIODS.	1942				1943			
	Pulmonary.		Other forms.		Pulmonary.		Other forms.	
	M	F	M	F	M	F	M	F
0 to 1	—	—	—	—	—	—	—	—
1 to 5	1	—	—	4	—	1	—	2
5 to 10	1	—	7	4	1	1	2	4
10 to 15	1	2	—	—	2	2	2	—
15 to 20	5	6	1	3	9	8	—	3
20 to 25	13	12	2	2	4	12	2	1
25 to 35	18	10	2	2	12	8	1	3
35 to 45	12	4	—	—	11	2	1	—
45 to 55	10	3	1	1	15	2	1	—
55 to 65	8	4	—	—	5	6	—	—
65 upwards	4	1	—	—	—	2	1	—
TOTALS	73	42	13	16	59	44	10	13

The deaths from tuberculosis during 1942 and 1943 are shown as follows:—

AGE PERIODS.	1942				1943			
	Pulmonary		Other forms		Pulmonary		Other forms	
	M.	F.	M.	F.	M.	F.	M.	F.
0 to 1	—	—	—	—	—	—	—	—
1 to 5	—	1	1	—	—	—	—	1
5 to 15	—	—	—	1	—	—	—	2
15 to 45	24	9	2	1	20	19	—	—
45 to 65	10	5	1	—	11	8	1	—
65 upwards	1	1	—	—	2	1	—	—
TOTALS ...	35	16	4	2	33	28	1	3

The number of cases remaining on the Dispensary Register on 31st December, 1943, was 529, viz.:—

Pulmonary—Males	213	Non-pulmonary—Males	70
Females	173	Females	73
Total	386	Total	143

Attendances at the Chest Clinic were as under:—

	1942	1943
First examinations	622	656
Re-examinations	552	601
Consultations	967	1,109
Mantoux tests	158	204
Artificial-pneumothorax	237	467
Gold treatment	53	43
Artificial light treatment	409	498
Total attendances	2,998	3,288

Number of X-Ray examinations 878 1,139

Visits to patients at Home:—

(a) by Health Visitor	1,884	1,734
(b) by Clinical T.O.	223	234
Patients admitted to sanatoria	67	107
Patients discharged from sanatoria	40	93
Patients died in sanatoria	12	13
Patients remaining in sanatoria at end of year	37	38

PULMONARY TUBERCULOSIS — TREATMENT ALLOWANCES.

SUMMARY OF ASSESSMENT OFFICER'S REPORTS TO HEALTH COMMITTEE.

Date of Report	No. of Allowances in pay-ment at date of previous Report	New Applica-tions or Re-applications granted	No. in Pay-ment during the period	No. Refused	No. in Pay-ment at date of Report	Weekly Cost	Revisions and Re-assessments
8/7/43	—	23	31	—	23	£23 8 0	—
9/9/43	23	11	21	8	26	£34 6 6	21
6/1/44	26	21	8	14	33	£43 5 0	24
9/3/44	33	8	6	6	35	£47 16 6	41
4/5/44	35	3	4	7	31	£41 17 6	40

The total number of persons who have been granted financial assistance up to 4/5/44 was 65.

APPLICATIONS FOR ASSISTANCE HAVE NOT BEEN GRANTED FOR THE FOLLOWING REASONS:—

Date of Report	Not Eligible Other Means	Not in Scope	At Work	Died	Other Reasons	Refused Treatment	Total
8/7/43	16	3	4	3	5	—	31
9/9/43	16	4	—	—	1	—	21
6/1/44	7	1	—	—	—	—	8
9/3/44	6	—	—	—	—	—	6
4/5/44	3	—	—	—	—	1	4
Totals ...	48	8	4	3	6	1	70

ALLOWANCES HAVE CEASED FOR THE FOLLOWING REASONS:—

Commenced	Work	Entered Hospital Or Sanatorium	Left District	Refused Treatment	Died	Other Reasons	Total
9/9/43	2	3	2	1	—	—	8
6/1/44	6	3	1	1	1	2	14
9/3/44	2	3	—	1	—	—	6
4/5/44	5	1	—	—	—	1	7
Totals ...	15	10	3	3	1	3	35

MENTAL DEFICIENCY ACTS.

The following is an extract from the Return of Mental Defectives as on 1st January, 1944, submitted to the Board of Control:—

	M.	F.	Total.
Number of cases in Institutions (excluding cases on licence)	39	29	68
Number of cases on licence from Institutions	5	4	9
Number of cases under Guardianship	5	5	10
Number of cases in " places of safety " ...	—	—	—
Number of cases under Statutory Supervision	124	103	227
Number of cases in receipt of Poor Law Relief:—			
(a) In Institutions	1	2	3
(b) Domiciliary	4	8	12

VENEREAL DISEASES.

By arrangement, treatment is available for Smethwick patients at the General Hospital, Birmingham, and the figures below are taken from the report received from the Medical Director of the V.D. Department:—

- A. Number of Smethwick patients dealt with at, or in connection with the Out-patient Clinic for the first time and found to be suffering from:—

	1942	1943
Syphilis	20	16
Soft Chancre	—	—
Gonorrhœa	37	27
Conditions other than Venereal ...	40	116
	97	159

- B. Total Number of attendances at the Out-Patient Clinic of all persons residing in Smethwick
- | | | |
|--|-------|-------|
| | 2,382 | 2,535 |
|--|-------|-------|

ST. CHAD'S HOSPITAL.

STATISTICS RELATING TO THE YEARS 1942 AND 1943.

(A) IN-PATIENTS.

	1942	1943
1. Total number of admissions (including infants born in Hospital)	2,577	2,810
2. Number of women confined in Hospital ...	470	536
3. Number of live births	456	527
4. Number of still births	20	20
5. Number of deaths among the newly-born (i.e., under four weeks of age)	20	25
6. Total number of deaths among children under one year (including those given under 5) ...	39	41
7. Number of maternal deaths among women admitted to hospital for confinement ...	4	—
8. Total number of deaths	146	159
9. Total number of discharges (including infants born in hospital)	2,433	2,625
10. Duration of stay of patients included in 8 and 9 above. Number of cases whose total stay was for the following periods:—		
(a) Under four weeks	2,259	2,449
(b) Four weeks and under thirteen weeks	285	305
(c) Thirteen weeks or more	35	30
11. Number of beds occupied (excluding cots in in maternity wards): average during the year	106.1	111.5
12. Number of surgical operations under general anæsthetic (excluding dental operations)...	802	958

(B) OUT-PATIENTS.

There is at present no out-patient department in connection with St. Chad's Hospital.

CLASSIFICATION OF IN-PATIENTS WHO WERE DISCHARGED
FROM OR WHO DIED IN THE INSTITUTION DURING THE YEAR
ENDED 31st DECEMBER, 1943.

Disease Groups.				Children under 16 years of age.		Men and Women.	
				Dis- charged.	Died.	Dis- charged.	Died.
A.	Acute Infectious Disease	...	...	9	1	12	4
B.	Influenza	...	...	1	—	15	—
C.	Tuberculosis:—						
	Pulmonary	...	...	3	—	12	2
	Non-pulmonary	...	...	4	1	2	3
D.	Malignant Disease	...	...	—	—	22	25
E.	Rheumatism:—						
	(1) Acute Rheumatisms (Rheumatic Fever) together with sub-acute rheumatism and chorea	...	...	5	—	7	1
	(2) Non-articular manifestations of so-called "rheumatism" (mus- cular rheumatism, fibrositis, lumbago and sciatica)	...	...	3	—	10	—
	(3) Chronic Arthritis	...	...	—	—	3	—
F.	Venereal Disease	...	...	—	—	—	—
G.	Puerperal Pyrexia, including cases classified (in London) as puerperal fever:—						
	(a) Women confined in Hospital	...	...	—	—	2	—
	(b) Other cases	...	...	—	—	—	—
H.	Other Diseases and Accidents connected with pregnancy and childbirth			—	—	116	—
I.	Mental Diseases:—						
	(a) Senile Dementia	...	...	—	—	—	—
	(b) Other	...	...	—	—	—	—
J.	Senile Decay	...	...	—	—	—	1
K.	Accidental Injury and Violence	...	...	21	—	44	—
	In respect of cases not included above:—						
L.	Diseases of the Nervous System and Sense Organs			74	6	40	11
M.	Disease of the Respiratory System			58	6	88	15
N.	Diseases of the Circulatory System			5	—	49	13
O.	Diseases of the Digestive System			448	—	269	16
P.	Diseases of the Genito-Urinary System			12	1	85	15
Q.	Diseases of the Skin			19	—	31	—
R.	Other Diseases			23	27	77	3
S.	Mother and Infants Discharged and not included in above figures:—						
	Mothers	...	...	—	—	531	—
	Infants	...	...	513	—	—	—
T.	Any persons not falling under any of the above headings			9	—	3	8
				1,207	42	1,418	117
				2,784			

INFANTILE MORTALITY DURING THE YEAR 1943

CAUSE OF DEATH	0-1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total under 4 weeks	1-2 m'ths	2-3 m'ths	3-4 m'ths	4-5 m'ths	5-6 m'ths	6-7 m'ths	7-8 m'ths	8-9 m'ths	9-10 m'ths	10-11 m'ths	11-12 m'ths	Total
Cerebro-spinal Fever ...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	1
Whooping Cough ...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1
Measles ...	...	...	1	...	...	...	...	...	...	...	1	...	...	...	...	1	2
Influenza ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Coeliac Disease...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	1
Acute Encephalitis ...	...	...	...	...	...	1	...	...	2	...	...	...	...	...	...	...	3
Infantile Convulsions...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	1
Infective Endocarditis	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	1
Acute Bronchitis ...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1
Broncho-pneumonia ...	...	...	1	...	2	3	3	...	1	1	...	1	2	...	...	...	13
Pneumonia ...	...	1	1	...	2	...	...	3	...	...	...	...	...	...	...	...	6
Acute Dilatation of Stomach	...	...	...	...	...	...	...	1	1	1	4	...	...	...	...	...	2
Gastro-enteritis ...	...	1	...	1	2	1	1	2	1	...	...	...	...	...	...	...	11
Acute Nephritis ...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1
Impetigo ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Congenital Hydrocephalus	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1
Spina Bifida ...	...	1	1	...	2	1	...	...	...	...	...	...	...	...	...	...	3
Congenital Malf. of Heart	...	1	...	...	1	...	...	1	1	...	...	...	...	...	...	...	3
Congenital Pyloric Stenosis...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	1
Other Cong. Malformations	1	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	2
Congenital Debility Marasmus	2	...	...	...	2	...	...	1	...	...	...	...	...	...	...	...	3
Premature Birth ...	18	...	...	...	18	1	...	...	...	...	...	...	...	...	...	...	19
Intra-cranial Hæmorrhage	6	...	...	...	6	...	...	...	...	...	...	...	...	...	...	...	6
Congenital Atelecasis	2	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	2
Accidental Burns ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
TOTALS :—	30	5	4	1	40	8	6	13	6	3	5	2	2	...	...	2	87

MATERNITY AND CHILD WELFARE.

SUMMARY OF STATISTICS FOR THE YEAR 1943.

BIRTHS.

The number of births notified during the past five years under Section 203 of the Public Health Act, 1936, as adjusted by transferred notifications, was as follows:—

	1939	1940	1941	1942	1943
Live Births	1,157	1,041	1,058	1,254	1,343
Still Births	40	36	26	37	46
Total	<u>1,197</u>	<u>1,077</u>	<u>1,084</u>	<u>1,291</u>	<u>1,389</u>

Comparison with the returns of the local Registrar shows that very few births escape notification.

HEALTH VISITING.

The Council employs a Superintendent and thirteen health visitors who are also School nurses, the equivalent of seven whole-time visitors being engaged in Maternity and Child Welfare work. The number of visits paid during the two years was:—

	1942	1943
(i) To Expectant Mothers ... First Visits	817	866
Total Visits	1,786	1,806
(ii) To Children under one year of age First Visits	1,165	1,263
Total Visits	5,593	6,593
(iii) To Children between one and five years of age ... Total Visits	8,495	9,384

The total number of visits paid by the health visitors during the past six years is as follows:—

1938.....	18,899	1941.....	26,981
1939.....	23,942	1942.....	26,349
1940.....	23,507	1943.....	30,033

INFANT WELFARE CENTRES.

The number of Centres provided and maintained by the Council is seven, with ten sessions weekly; the total attendances during the past five years was:—

	Under 1 year	1—5 years	Total
1939	18,049	14,909	32,958
1940	15,553	9,069	24,622
1941	13,760	6,968	20,728
1942	17,675	6,459	24,134
1943	20,119	7,094	27,213

			1942	1943
Number of children attending for the first time	Under 1 year ...	...	1,089	1,205
	1—5 years ...	...	264	270
	Total ...	...	1,353	1,475
Number of children on the registers at end of year:	Under 1 year ...	...	876	1,011
	1—5 years ...	...	1,691	1,791
	Total ...	...	2,567	2,802

The number of children under one who attended for the first time equalled 89.7% of the notified births in 1943 and 86.8% in 1942.

OPHTHALMIA NEONATORUM.

		1942	1943
Number of cases notified ...	...	8	8
Cases treated by Health Visitors ...	...	1	1
Cases treated at Eye Hospital ...	...	7	8
Cases resulting in impaired vision ...	None	None	None
Home visits ...	...	30	40

Notifications during the past ten years:—

1934.....	19	1939.....	5
1935.....	22	1940.....	6
1936.....	23	1941.....	14
1937.....	9	1942.....	8
1938.....	14	1943.....	8

ANTE-NATAL CLINIC.

Since the establishment of the first Ante-Natal Clinic in 1920, the total attendances have been as follows:—

1920 ...	42	1932 ...	3,509
1921 ...	107	1933 ...	3,771
1922 ...	127	1934 ...	4,412
1923 ...	241	1935 ...	5,169
1924 ...	275	1936 ...	5,044
1925 ...	537	1937 ...	5,201
1926 ...	1,015	1938 ...	6,226
1927 ...	1,079	1939 ...	6,739
1928 ...	1,465	1940 ...	6,336
1929 ...	2,253	1941 ...	7,221
1930 ...	3,760	1942 ...	8,526
1931 ...	3,859	1943 ...	8,988

During 1943, 1,510 individual women attended the clinic; during 1942 the number was 1,365.

POST-NATAL CLINIC.

		1941	1942	1943
Individual patients attending ...	...	266	394	352
Percentage of notified births ...	...	24	30	26
Total attendances ...	...	844	1,054	996

MUNICIPAL MIDWIVES.

	1941	1942	1943
Number of bookings	665	773	729
Ante-natal visits	2,918	3,892	4,123
Cases attended	559	642	664
Nursing visits	12,894	13,987	15,415

The number of cases in which medical aid was summoned during 1943 was 202 and during 1942, 192. These figures are in connection with domiciliary cases and include municipal and independent midwives.

MATERNAL DEATHS.

Number of women dying in, or in consequence of, childbirth:—

1942 (1) Sepsis ... 2	(2) Other causes ... 3
1943 (1) Sepsis ... —	(2) Other causes ... 3

The Maternity Mortality rate for the past twenty years was:—

1923.....6.9	1930.....4.5	1937.....2.5
1924.....3.7	1931.....1.9	1938.....3.3
1925.....4.1	1932.....5.4	1939.....3.4
1926.....3.5	1933.....3.2	1940.....2.6
1927.....3.0	1934.....5.3	1941.....2.7
1928.....4.2	1935.....3.3	1942.....3.9
1929.....5.2	1936.....2.3	1943.....2.1

The rate for England and Wales was 2.01 for 1942, and 2.29 for 1943.

WAR-TIME NURSERY.

In January, 1941, the first War-time Nursery was established at "The Hollies." The numbers attending were at first small, but as the facilities became known and appreciated the numbers went up to capacity, i.e., 30 children.

On 27th December, 1943, the accommodation was increased from 30 to 50 children by provision of another large room which was built on the west side of the Recreation Room.

The accommodation at Edgbaston Road Nursery was also increased from 50 to 60 children on 30th April, 1943, and during the current year (1944) a similar increase was agreed to by the Ministry of Health at Brasshouse Lane Nursery.

The demand for Day Nursery accommodation has been maintained during the year and all five Nurseries are operating to capacity. The total attendances during 1943 was 56,015. The number of individual children at present on the register is 281.

Nursery	Number of Places	Total Attendances 1943	Average daily attendances
1. The Hollies	50	10,708	35
2. Brasshouse Lane (opened 12.1.42)	50	11,624	38
3. Holly Lane (opened 13.4.42)	33	8,637	28
4. Edgbaston Road (opened 22.6.42)	60	14,824	48
5. Norman Road (opened 14.12.42)	40	10,222	33

REPORT OF THE CHIEF SANITARY INSPECTOR

SANITARY ADMINISTRATION.

In submitting my report on the Sanitary Administration of the Borough for the year 1943 I am able to record a satisfactory increase over previous war years in the amount and effectiveness of the work performed by sanitary inspectors. This in spite of the fact that my staff remained throughout the year at the lowest level it has yet reached, i.e., two district inspectors. The reasons for this are fully explained in the body of the report (which is presented this year in a somewhat new form) and need not be elaborated here, except to say that the respite from enemy action has enabled us to devote more time and energy to public health duties.

I shall refer in this foreward to two items only which seem to call for special mention:—

FOOD.

The quantity of unsound food destroyed during the year, viz., four and three-quarter tons, may at first glance seem alarming, especially in war time when the nation's food supply is in the hands of a special Ministry whose slogan is "The conservation of food is second only to the preservation of life." But when it is realised that this total represents only 2.4 ounces per head of the population for the whole year the position is not so grave. It is conceivable that this amount is still wasted DAILY in the homes of consumers. The total food condemned is admittedly higher than the peace-time average, but it has to be remembered that in normal times a good deal of food which is patently unmarketable is destroyed by the distributors and retailers without reference to the department. In war-time our inspection is required because only on a food inspector's certificate can the damaged food be replaced.

HOUSING.

I have pointed out in each war-time report that there is a gradual deterioration in the condition of house property in the town, especially the poorer type of property. Taking the short term view this is unfortunate because of the discomforts and inconveniences that the tenants of these houses have to suffer. But in the long run, it may prove to be not a bad thing if houses which cannot by present civilised

standards be regarded as fit domiciles for human beings, should after the war be in a state so decrepit that their unfitness is easily demonstrable even to County Court Judges and Ministry of Health Inspectors.

One realises that Housing will be a first priority in post-war reconstruction. And one also acknowledges that the rapid construction of large numbers of houses for those families who will be without any kind of home of their own at the end of the war will have first call upon the energies of Local Authorities. At the same time one hopes that the first acute shortage will be satisfied within reasonable time, so that a new wholesale clearance of unfit houses may be embarked upon. About one third of existing houses in Smethwick are unfit, judged by present-day standards, to be regarded as dwellings for human beings. A big proportion of them ought never to have been admitted on any standards. Therefore I look forward to a time not too far distant when a wholesale redevelopment of the town will be undertaken, giving to every family a sanitary and cheerful habitation, in which the maintenance of bodily health and cleanliness will be possible, and sited so as to be out of the range of industrial dirt, industrial noise and industrial ugliness. This can only be done by drastic planning for the future, and the first step towards its achievement must surely be a revision of the borough boundaries.

CONCLUSION.

I wish to tender thanks to the Chairman and members of the Health Committee for their strong support during a difficult period, to the Medical Officer of Health, and the Chief Officers of other departments, and finally to my own attenuated staff both permanent and temporary, who have continued to give of their best under discouraging conditions.

Finally a word of praise to those members of the staff who are serving in His Majesty's Forces. All of them have done well, and all have attained commissioned rank. Tribute has already been paid to the achievement of Mr. J. V. Perrins, who has been awarded the Distinguished Flying Cross, and his success is noted again here for purposes of record.

JOHN H. WRIGHT,
Chief Sanitary Inspector.

SANITARY ADMINISTRATION OF THE BOROUGH

I. REGISTER OF COMPLAINTS.

In my last year's review I reported that the number of complaints had not materially increased although there was a general deterioration in the standard of environmental hygiene in the town. This deterioration is, however, reflected in the statistics for the period under review.

The number of complaints registered in the Complaint Book was 1015, which is the highest number ever recorded during one year. It compares with 752 for 1942 and a pre-war average of 788.

COMPLAINT RATE. For comparative purposes the number of complaints received is best expressed in the form of a Complaint Rate, i.e. the number of complaints per 1,000 houses. This rate for the Borough as a whole, and for each Ward, as compared with that of previous years is as follows:—

		1943	1942	1941
Sandwell	... ..	83.48	61.04	57.00
Victoria	... ..	70.80	49.51	44.89
Soho	... ..	68.76	55.80	43.85
Cape	... ..	65.95	40.26	41.11
Spon Lane	... ..	41.22	27.19	24.90
Bearwood	... ..	39.07	31.88	29.64
Uplands	... ..	25.08	34.33	28.67
Warley	... ..	15.02	11.54	9.14
Whole Borough	... ..	47.90	35.88	32.12

II. INSPECTION OF PREMISES.

NUMBER OF VISITS. The total number of visits made for all purposes during the year shows a substantial increase on the previous year. It is the highest recorded for the war years, during which only two inspectors have been engaged on district work. The comparative numbers are:—

1940	... ..	6,204 inspections
1941	... ..	6,869 inspections
1942	... ..	7,565 inspections
1943	... ..	10,587 inspections

It will be seen that the number of inspections has increased by more than 30%. This is in a large measure attributable to the extended working hours which became operative from 1st January, 1943.

PURPOSE OF VISITS. The relative proportion of visits made for various purposes compared with the previous year and pre-war years is as follows:—

Purpose of Visits	Percentage of Total Visits		
	1943	1942	Average 1929-1938
Housing Act	2.57%	1.19%	25.43%
Complaints (including re-visits)	70.92%	68.25%	22.27%
Infectious Diseases	1.80%	3.45%	2.22%
Slaughterhouses	0.01%	—	5.26%
Private Slaughtering	1.25%	1.06%	0.41%
Food Sampling	2.27%	4.25%	2.03%
Rats and Mice Destruction	3.57%	1.92%	0.70%

The following Table shows the number of inspections made for each purpose during the period under review.

Purpose of Visit	No.
Housing Act—Inspections	55
Housing Act—Re-inspections	217
Visits to Housing Work in progress	7
On Complaint	1,788
Re-Visits re Notices served	5,720
Ashes Accommodation Inspections	352
Re-visits re Ashes Accommodation	68
Infectious Diseases	191
Slaughterhouses	1
Meat and Food Shops	285
Meat Regulations	7
Private Slaughtering	132
Markets Inspected	47
Dairies and Milk Shops	20
Stables	5
Bakehouses	8
Food Sampling	293
Factories	81
Outworkers	1
Pigsties	52
Rats and Mice (Destruction) Act	378
Drains tested	4
Miscellaneous	875
Total ...	10,587

III. REPAIR OF HOUSE PROPERTY.

AVAILABILITY OF MATERIALS AND LABOUR. At the commencement of the period under review it was becoming increasingly difficult to secure compliance with Repair Notices. Owners, when pressed to carry out essential repairs, stated that they had been unable to get any builder to accept their orders. There was also difficulty in obtaining certain materials such as sheet zinc, which is necessary for roof repairs. Enquiries made from local builders and from the Ministry of Labour showed that the bulk of available building and property repairing labour had been deflected to essential constructional work required for the armed forces and the various supply Ministries. Towards the end of the period the position became much easier. Building labour was being brought back and most property repairers found themselves able to undertake more work.

These conditions are reflected in the record of the number of cases in which Section 49 of the Smethwick Corporation Act 1929 had to be invoked. Owners who normally have drains and water closets put in order on receipt of tenants' requests were unable to do so during the difficult period and tenants consequently complained to this Department. Also owners were unable to comply with the Notices served and a larger number of instances occurred where the work had to be carried out in

default. As will be seen from the following Table there were many more cases than usual in which persons sought the help of the Department in the period 1940-1942 and the number of cases where the work had to be carried out in default was particularly high. In 1943 the figures tended to subside towards pre-war levels.

Year	Number of Drains, W.C.s etc., required to be repaired under Section 49, Smethwick Corporation Act, 1929	Number of cases in which work was carried out by Corporation in Owner's Default
Average		
1932-1938	161	10
1940	319	25
1941	218	20
1942	323	35
1943	203	1st Half Year 27 2nd Half Year 14 — 41

SECTION 275. PUBLIC HEALTH ACT 1936. Early in the year the Health Committee gave authority for the use, in suitable cases, of the powers conferred on local authorities by Section 275 of the Public Health Act 1936. This Section reads: "A local authority may, by agreement with the owner or occupier of any premises, themselves execute at his expense any work which they have under this Act required him to execute . . ." A local builder offered to carry out any such work on behalf of the Council, and he was given certificates from time to time, stating what work he was carrying out for the Corporation and for property owners direct, which enabled him to retain his workmen. In June 1943 the Ministry of Health by arrangement with the Ministry of Works and Ministry of Labour issued Circular 2828A by which a special priority could be given to "works of maintenance or repair which are the subject of a statutory notice issued by the local authority, or works that are otherwise authorised by the local authority as essential to avoid danger to health or grave deterioration of structures." Such priority was accordingly secured for the builder referred to above.

During the nine months February to October 1943, repairs were carried out by the Council on behalf of property owners in respect of 40 houses. In each case a comprehensive agreement was entered into and a substantial deposit secured before the commencement of the work. The deposits received totalled £242 0s. 0d. and the total cost of work was £918 14s. 1½d. Owing to the easier situation it has not been necessary to use this Section since October 1943.

The value of this procedure was not so much in the amount of work actually carried out by the Corporation as in the fact that it completely invalidated the defence often made by property owners that they could not get repairs done. As a result the amount of work carried out by owners themselves was greatly increased. The amount of repair work carried out in 1943 in response to Notices served was 67% higher than that for 1942 but only about ½th of the increase was directly due to work carried out on behalf of the owners by the Corporation.

DEFECTS RECORDED AND REMEDIED. From the outbreak of war until the end of 1942 there was a marked decline in the number of defects in connection with which Notices were served. There was a still greater decline in the number of defects remedied until the end of 1941, but in 1942 this downward trend was checked and during 1943, the year under review, the number had risen to more than double the 1941 figure.

Comparative figures are set out below and it will be seen that the number of defects remedied in 1943 i.e. 2,084 was over 300 greater than the number recorded in 1942 i.e. 1,755.

	1939	1940	1941	1942	1943
Defects Recorded ...	2,790	2,334	1,836	1,755	2,649
Defects Remedied ...	2,837	1,304	903	1,244	2,084

The full details of the defects dealt with during the period under review are shown by the following table:—

SANITARY DEFECTS.

Type of Defect	Number dealt with Reported Remedied	
Dirty Premises	188	206
Roofs, Spoutings and Eaves Gutters Defective	584	532
Yard and W.C. Drains Blocked	104	105
Yard and Passage Surfaces Defective	5	4
Defective Sinks and Sink Waste Pipes	44	38
Accumulations of Offensive Matter	11	5
Defective Plaster of Walls and Ceilings	396	320
W.C.s without proper Flushing Arrangements ...	129	115
Ashbins or Ashplaces Defective	246	68
Insufficient Lighting and Ventilation	87	57
Pan Closets Defective	—	2
Animals kept so as to be a Nuisance	—	1
Water Fittings Defective	34	31
Smoke Nuisance	2	1
Insufficient W.C. Accommodation	1	1
Houses without Sinks	1	3
Dampness	99	62
Insufficient Water Supply	8	4
Dangerous Buildings, etc.	7	2
Defective or Insufficient Drainage	13	16
Inadequate Food Storage Accommodation ...	3	—
No Proper Storage for Coal	3	—
Defective Washboilers	70	56
Defective External Brickwork and Chimneys ...	128	92
Defective Floors	122	80
Defective Firegrates	87	89
Defective Stairs and Handrails	31	11
Defective Rainwater Cisterns	8	5
Defective Woodwork of Doors, Windows, etc. ...	117	80
Miscellaneous	120	97
Lack of Domestic Washing Accommodation ...	1	1
Totals ...	2,649	2,084

LEGAL PROCEEDINGS. During the period under review application was made to the Court for Abatement Orders in 8 cases where owners had failed to comply with the Statutory Abatement Notices served. In

seven of these cases the summons, after several adjournments, was withdrawn; the work having been completed. In the remaining case the magistrates made an Order for the work to be carried out in 28 days. As this Order was not complied with the owner was fined £5 and the work was carried out by the Corporation.

CHARACTER OF REPAIR WORK. During the difficult days of 1940, 1941 and 1942 most towns in the Midlands area found it possible to secure only repairs in relation to maintaining houses in a weatherproof condition and with drainage arrangements functioning properly. It is gratifying to record that in Smethwick throughout this period it has been possible to carry out a high proportion of repairs in addition to those of the particularly urgent character mentioned above. This is shown by the following Table of defects which owners were called upon to remedy compared with previous years:—

Nature of Repairs	Percentage of total repairs required per annum				Average 1929-1938
	1943	1942	1941	1940	
Weatherproofing	22.04%	17.61%	18.9%	16.74%	8.36%
Maintenance of drains, W.C.s, etc.	10.95%	21.94%	15.52%	20.95%	9.48%
Other external structural repairs	7.29%	5.69%	5.50%	6.50%	9.81%
Remedy of Dampness (other than weatherproofing) ...	3.74%	3.82%	3.76%	3.73%	4.24%
General Internal Repairs ...	40.54%	40.17%	41.23%	33.48%	40.16%
Provision of Amenities ...	0.64%	0.29%	0.59%	1.53%	3.66%

It must not be assumed from these figures that property generally is being maintained in a good condition. The total defects remedied by Notices served on owners during the war years (owing to lessened Housing Act Inspections) is less than one third that of normal times, consequently a major Housing Repair problem is being created which will tax the resources of the Department in post war years. On the other hand the position has not deteriorated so seriously as was anticipated in 1940.

IV. SUPERVISION OF FOOD SUPPLIES.

FOOD SAMPLING. Routine Food sampling was carried on as usual. The following Table shows the number and type of samples taken, together with the purpose of examination and the results:—

Type of Samples	Purpose of Sampling	Number of Varieties	Number of Samples	Number not Satisfactory	Percentage not Satisfactory
Milk	Chemical Exam.	3	117	2	1.71%
Milk	Bacterial Exam.	3	8	2	25.00%
Milk	Tubercle Bacilli	3	6	—	0.00%
Miscellaneous Foods ...	Chemical Exam.	54	68	7	10.29%
Miscellaneous Foods ...	Bacterial Exam.	7	11	6	54.54%
Drugs	Chemical Exam.	24	32	—	0.00%
Total for all purposes ...		94	242	17	7.02%

The percentage of samples taken for chemical examination which proved to be unsatisfactory was well below that for an average year. Moreover the deficiencies found were slight.

The relatively high percentage of unsatisfactory reports on samples submitted for bacterial examination is due to the fact that samples were taken during the year only in cases where there were grounds for suspecting that a satisfactory standard was not being maintained. There is every reason to suppose that the satisfactory standard for milk supplies attained in 1942 was continued throughout 1943.

FOOD INSPECTION. Routine food inspections were carried out during the year; the total number of inspections was definitely higher than for previous years. The amounts and types of food condemned were as follows:—

Type of Food	Weight			
	Tons.	Cwts.	Qrs.	Lbs.
Meat and Meat Products ...	1	3	3	8
Fish	1	1	1	22
Vegetables		7	3	10
Fruit		8	1	2
Fats		1	2	27
Miscellaneous	1	12	1	16
	—	—	—	—
Total ...	4	15	2	1

This total is more than double that of 1942 and nearly 2 tons more than the total for 1941. Although this may seem large in the aggregate actually it is quite a moderate total for a town of the size and importance of Smethwick. The main reason, however, for the increase was that inspections made of a stock of bottled fish preparations belonging to a wholesale firm resulted in the condemnation of nearly 8,000 jars of food.

Of the foodstuffs found unfit for human consumption 93% were condemned for decomposition and unsoundness and the remainder for diseased conditions, mainly tuberculosis.

PRIVATE SLAUGHTERING. The only slaughtering of animals for food in the Borough is that of pigs on private premises. There is a steady increase in the number of pigs so killed owing to the policy of the Ministry of Food in encouraging the rearing of pigs by householders. Pig keeping in a densely populated area such as Smethwick is attended with many disadvantages and a vigorous enforcement of the bye-laws had in 1939 brought this trade to a minimum; each year the number of pigs killed on private premises was being reduced and in 1940 there were only 9 pigs killed, the lowest on record. Comparative figures are:—

Year	Number of Pigs killed on Private Premises
1939	25
1940	9
1941	44
1942	86
1943	157

The number and percentage of diseased conditions encountered are as follows:—

Number of pigs killed	...	...	...	...	157
Number of Pigs inspected	...	...	...	...	157
Number found diseased:—					
(a) All Diseases except Tuberculosis—					
(i) Whole Carcases condemned	...	...	...	...	Nil
(ii) Carcases of which some part or organ was condemned	...	...	...	...	9
(iii) Percentage of number affected with disease other than Tuberculosis	...	...	...	...	5.73
(b) Tuberculosis only—					
(i) Whole Carcases condemned	...	...	...	...	2
(ii) Carcases of which some part or organ was condemned	...	...	...	...	12
(iii) Percentage of number affected with Tuberculosis	...	...	...	...	8.89

The percentage of animals in which some diseased condition or other was found is 14.62 compared with 10 for the previous year. The percentage of animals affected with diseases other than tuberculosis shows little change, but that for animals affected with tuberculosis rose from 4.62 to 8.89.

LEGAL PROCEEDINGS. It was not found necessary to institute any legal proceedings during the period under review for food offences. There were two prosecutions in the previous period.

GENERAL. The general conclusion to be drawn from the year's work on food control is that the standard and purity of the town's food supply is being maintained at a generally satisfactory level.

V. CONTROL OF INSECT PESTS AND VERMIN.

There is nothing needing special mention under this heading except with regard to action under the Rats and Mice (Destruction) Act, 1919.

During the period under review a Survey of the Borough was made at the request of the Ministry of Food in order to ascertain what areas in the town were infested by rats and mice. This was carried out by means of a questionnaire and investigations made as suggested by the local knowledge of the District Sanitary Inspectors. A report and map were prepared which showed that infestation in Smethwick was not at a very high level, probably due to a persistent policy of rat repression which has been pursued over many years. Thirty-six areas were delineated as being infested to a more or less degree, and systematic action was commenced in these areas. Progress was not very rapid during the period under review owing mainly to shortage of staff, and to the fact that the campaign did not begin until the year was well advanced. Owing to the publicity given to the campaign against rats, more complaints than usual were received and more minor areas have accordingly been located and are receiving attention. The number of visits made for the purpose of the Act during the period under review has only been higher on one occasion which was in 1932 when 421 visits were made for the purpose. The following are the number of visits made compared with previous years.

Year	Number of Visits re Rats and Mice Destruction
1938	112
Average 1939-1942	70
1943	378

Owing to the inception of the campaign being late in the year under review no useful purpose would be served by giving statistical information of the result of operations for this period, but at the time of writing this report steady progress is being made and a full report should be possible at the end of 1944.

With regard to the financial aspect of the campaign. Occupiers are responsible for the elimination of rats and mice on their premises. A charge is accordingly made to occupiers of premises where, and this is so in the majority of cases, material is supplied and operations directed and supervised by the Department. In some cases, for a variety of reasons, the cost is not recoverable. The Ministry of Food has agreed to re-imburse the Council for irrecoverable expenditure over and above that incurred by the Council in the year 1938. The Council's excess expenditure for that year was 12s. 0d. During 1943 expenditure has exceeded income by £6 13s. 3d.

GENERAL. The matters specially referred to in this report cover over 80 per cent. of the work of sanitary administration for the year under review. The remainder comprises work which calls for no special mention. While much work which is normally carried out has had to be neglected, as in the previous war years, the basic and fundamental matters concerned with environmental hygiene have been dealt with.

During the investigation in the summer of 1934, it was found that the results of the investigation were not as satisfactory as they should have been. It was found that the results of the investigation were not as satisfactory as they should have been.

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