

Annual report of the Medical Officer of Health / City Council of Pretoria.

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CITY COUNCIL OF PRETORIA

FORTY-THIRD

Annual Report

OF THE

Medical Officer of Health

FOR THE

YEAR 1946-1947



WALLACHS' PTA. 64129 13/10/48

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CITY COUNCIL OF PRETORIA

FORTY-THIRD

Annual Report

OF THE

Medical Officer of Health

FOR THE

YEAR 1946-1947

INDEX.

| | |
|--|------------------|
| Abattoir | 36-42 |
| Ante-Natal Clinics | 28 and 30-31 |
| Anti-Plague Measures | 47 |
| Annual Rateable Values | 9 |
| Area of Municipality | 9 |
| Births and Birth Rates | 10-11 |
| Cerebro-Spinal Meningitis | 20 |
| Child Welfare Activities | 27-31 |
| Climatic Data | 9 |
| Compound Hospital Returns | 36 |
| Dairies and Milk Control | 42-44 |
| Dairy Employees—Typhoid Testing | 45 |
| Dental Clinics | 26-27 |
| Deaths and Death Rates | 11-17 |
| Diphtheria and Diphtheria Immunisation | 19-20, 28-29, 31 |
| Dipping Tanks | 45 |
| Drainage, Sewage and Refuse Disposal | 49-50 |
| Foodstuffs—Supervision of | 48-49 |
| Game—Inspection of | 48 |
| Health Committee—Public | 45 |
| Health, Education and Propaganda | 33 |
| Health Inspectors' Work | 46 |
| Housing—European and Non-European | 61-66 |
| Infantile Mortality and Rates | 12-14 |
| Infectious Diseases | 17-26 |
| Influx Control | 65 |
| Isolation Hospital | 24-26 |
| Introductory Letter | 3 |
| Licensed Premises | 49 |
| Location Medical Services | 35-36 |
| Malaria | 20 and 46-47 |
| Medical Examinations | 34-35 |
| Midwifery—Supervision of | 28 |
| Milk Control and Dairies | 42-44 |
| Nursery Schools | 31-33 |
| Nursing Homes—Inspection of | 31 |
| Population | 10 |
| Poultry—Inspection of | 48 |
| Pounds | 45 |
| Rehousing—European and Non-European | 61-66 |
| Sanitary and Rubbish Removal Services | 49-50 |
| Scarlet Fever | 19 |
| Sewage Works | 50-58 |
| Slum Elimination | 59-60 |
| Smallpox | 20-21 |
| Special Disease Clinics | 21-23 |
| Staff | 5-7 |
| Statistical Tables | 67-79 |
| Sub-Economic Housing | 61-64 |
| Typhoid Fever | 17-18 |
| Tuberculosis | 19 and 21 |
| Venereal Diseases | 22-23 |
| Water Supply | 50 |

Introductory Letter.

YOUR WORSHIP THE MAYOR

and MEMBERS OF THE CITY COUNCIL, PRETORIA.

I have the honour to present to you the Forty-third Annual Report of the Health Department for the year ended 30th June, 1947.

The report is a record of all important matters concerning the health of the City and is in compliance with the requirements of the Public Health Act, No. 36 of 1919.

Once again it is pleasing to record that in the past year we have maintained the high standard of health in the City.

The population as a whole is still steadily increasing and the City is expanding very much more rapidly than has been anticipated. This rapid increase in population and the difficulty in obtaining building materials have contributed to shortage in housing accommodation. The Council, has, however, carried on with an extensive building programme for Sub-Economic and Economic houses, and we are gradually catching up with the deficiencies. If this building pace is maintained we should, within a few years, be able to provide adequate and suitable accommodation for all sections of the population. As soon as a reasonable balance in housing is reached, it is hoped to carry on where we left off before the war, with a more vigorous slum elimination programme.

Our infantile mortality rates for Europeans for this year is the lowest ever recorded. This rate is such an important pointer in the health of a community that it has been dealt with in detail in the body of the report. It is most pleasing to note that not only is the European infantile mortality rate the lowest ever recorded, but the infantile mortality rate of 53.78 for all races is lower than the previous year's record of 61.17.

The European birth rate of 29.96 is 2.18 higher than that for last year and it is the highest recorded since 1913-1914.

The death rate for Europeans has only once been lower than this year's figure of 6.18. The rate of 6.70 for Natives, however, is the lowest ever recorded and the rates of 7.44 for all Non-Europeans and 6.63 for all races are also the lowest ever recorded. On the whole, therefore, we can be satisfied that our statistics reflect favourable health conditions.

I wish to thank your Worship and Members of the City Council for the assistance extended to me, and in particular I desire to express my appreciation of the support given to me by the Chairman, Councillor C. H. Parsons and members of the Health Committee.

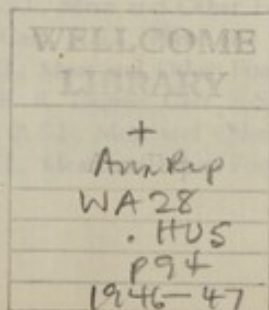
The past year has seen a great deal of increase in the scope of the activities of the Department. The quality of the work is reflected in the statistical reports, and for this, I am grateful for the loyal, efficient and enthusiastic support which I have always received from practically the entire staff.

I am grateful for the assistance rendered by the public, heads and sub-heads of other Departments.

I once again want to emphasise my deep personal appreciation of the wholehearted co-operation which I have always received from the Press. The Press has been a standby in giving publicity to all important health measures. Whenever it has been necessary for me to call the attention of the public to any important health statement the Press has been only too willing to give it the greatest prominence. The public certainly owes the Press a debt of gratitude for the interest it has shown in the health of the people of this City, and the country as a whole.

H. NELSON,

Medical Officer of Health.



Introductory Letter.

YOUR WORSHIP THE MAYOR

and MEMBERS OF THE CITY COUNCIL, VICTORIA.

I have the honor to present to you the following Annual Report of the Health Department for the year ended 31st Dec. 1914.

The report is a record of all important matters concerning the health of the City and is in complete accordance with the requirements of the Public Health Act No. 36 of 1910.

Once again it is pleasing to record that in the past year we have maintained the high standard of health in the City.

The population as a whole is still steadily increasing and the City is expanding very much more rapidly than in former years. The rapid increase in population and the difficulty of obtaining suitable sites for housing has led to a corresponding increase in the number of houses and flats erected. It is therefore necessary to keep a close watch on the health of the population. As soon as a new house is erected it is placed in every way as safe as possible and with a view to the health of the community.

Our sanitary measures for the year have been successful. The rate of sickness has been kept at a low level and the death rate has been kept at a low level. It is most pleasing to note that the rate of sickness has been kept at a low level and the death rate has been kept at a low level.

The death rate for the year of 1914 is 1.18 higher than for the year of 1913. The death rate for the year of 1914 is 1.18 higher than for the year of 1913.

The death rate for the year of 1914 is 1.18 higher than for the year of 1913. The death rate for the year of 1914 is 1.18 higher than for the year of 1913.

I wish to thank you, Worship and Members of the City Council, for the interest and support you have given to the Health Department.

The year has been a year of progress in the work of the Health Department. The year has been a year of progress in the work of the Health Department.

I am, Sir, your obedient servant, J. H. B. B. B.

I am, Sir, your obedient servant, J. H. B. B. B.

J. H. B. B. B.

Medical Officer of Health.

PUBLIC HEALTH COMMITTEE.

Councillor C. H. Parsons (Chairman).
 Councillor S. le Roux Koch (Vice Chairman).
 Councillor Mrs. M. M. Curson, M.P.C.
 Councillor C. F. Deetlefs.
 Councillor V. H. Rudd.

STAFF OF THE PUBLIC HEALTH DEPARTMENT AS AT 30th JUNE, 1947.

| | |
|---|--|
| H. NELSON, M.A., M.D., Ch.B., B.A.O., D.P.H., D.T.M. | Medical Officer of Health. |
| T. LOTTER, M.B., Ch.B., L.R.C.P. & S., L.R.F.P.S., D.P.H. | Assistant Medical Officer of Health. |
| A. PIJPER, M.D., D.Sc. | Pathologist (Part-time). |
| S. BEHR, B.A., M.B., Ch.B., B.A.O. . . . | Assistant Medical Officer—Venereology. |
| R. E. MEAKER, M.B., Ch.B., D.P.H. . . . | Assistant Medical Officer—Non-European Services. |
| R. E. W. DICKS, M.B., Ch.B., D.P.H. . . . | Medical Officer (Isolation Hospital). |
| A. T. B. BODENSTAB, M.B., Ch.B., D.P.H. | Additional Assistant Medical Officer. |
| M. VERA BUHRMANN, M.B., Ch.B., D.P.H. | Assistant Medical Officer—Child Welfare. |
| I. P. MARAIS, B.Sc. Agric., B.V.Sc., Dr. Med. Vet. | Veterinary Officer. |
| W. G. VAN ASWEGEN, B.Sc., B.V.Sc. . . . | Assistant Veterinary Officer. |
| F. T. E. NICHOLSON, Cert. R.S.I. and Meat and Other Foods, Cert. of Agric. Dairying, Natal. | Chief Health Inspector. |
| L. E. THOMAS, Cert. R.S.I. and Meat and Other Foods Cert., Trop. Hyg., Adv. Knowledge, San. Eng., Building Construction and Drawing (Adv.) | Assistant Chief Health Inspector. |
| W. G. FUNSTON, Cert. R.S.I. and Meat and Other Foods, Trop. Hyg. | Senior Health Inspector in Charge (Adminis- trative). |
| H. M. DE VAAL, B.Sc., Applied and Industrial Chemistry | Municipal Chemist and Analyst. |
| P. R. LOEWENSTEIN, B.Sc. (Eng.) | Assistant Municipal Chemist. |
| P. J. J. PIENAAR, M.Sc. | 3rd Grade Asst. Municipal Chemist and Analyst. |
| A. L. GOLDBERG, B.Sc. (Eng.) | 4th Grade Asst. Chemist. |

SENIOR HEALTH INSPECTORS IN CHARGE.

| |
|---|
| K. C. J. LUCOUW, Cert. R.S.I. |
| A. VELTHUYSEN, Cert. R.S.I. |
| J. L. COETZEE, Cert. Meat and Other Foods. |
| R. BLOEMINK, Cert. R.S.I., Meat and Other Foods, Trop. Hyg., Adv. Knowledge. |
| F. B. TAIT, Cert. R.S.I., Meat and Other Foods, Trop. Hyg., Adv. Knowledge, San. Science. |
| E. J. JAMMINE, Cert. R.S.I., Meat and Other Foods, Adv. Knowledge, Trop. Hyg. |
| J. A. HOTINE, Cert. R.S.I., Meat and Other Foods, Trop. Hyg. |

SENIOR HEALTH INSPECTORS.

| |
|---|
| N. VORSTER, Cert. R.S.I., Meat and Other Foods, Trop. Hyg. |
| D. W. BURGESS, Cert. R.S.I., Meat and Other Foods, Trop. Hyg. |
| J. S. R. MARAIS, Cert. R.S.I., Meat and Other Foods, Trop. Hyg. |

FIRST GRADE HEALTH INSPECTORS.

| |
|---|
| W. SCOTT, Cert. R.S.I., Meat and Other Foods. |
| R. G. SIEBERT, Cert. R.S.I., Meat and Other Foods, Trop. Hyg. |
| F. J. H. STOCKWELL, Cert. R.S.I., Meat and Other Foods, Trop. Hyg. |
| J. L. PARKIN, Cert. R.S.I., Meat and Other Foods, Trop. Hyg. |
| J. C. BOSHOFF (Miss), B. A. Degree, Cert. R.S.I., Meat and Other Foods. |
| O. A. BERGMAN, Cert. R.S.I., Meat and Other Foods, Trop. Hyg. |
| W. O. JOHN, Cert. R.S.I., Meat and other Foods, Trop. Hyg. |

SECOND GRADE HEALTH INSPECTORS.

G. W. CLUBB, Cert. R.S.I., Meat and Other Foods.
 T. B. NOTHNAGEL, Cert. R.S.I., Meat and Other Foods.
 S. M. SCOTT, Cert. R.S.I., Meat and Other Foods.
 M. D. NEL, Cert. R.S.I., Meat and Other Foods.
 J. C. THERON, Cert. R.S.I., Meat and Other Foods.
 P. R. Q. WILBRAHAM, Cert. R.S.I., Meat and Other Foods, San. Science.
 P. T. FURSTENBURG, Cert. R.S.I., Meat and Other Foods, Adv. Knowledge.

THIRD GRADE HEALTH INSPECTORS.

S. P. G. WILSON, Cert. R.S.I.
 H. G. MOMMSEN, Cert. R.S.I.
 A. DE LA H. SERFONTEIN, Cert. R.S.I.
 A. L. NYSCHENS, Cert. R.S.I.
 T. J. VAN DER HEEVER, Cert. R.S.I., Trop. Hyg.
 J. G. PEROLD, Cert. R.S.I.
 J. T. GORDON, Cert. R.S.I.
 H. L. NEETHLING, Cert. R.S.I.

CLERICAL STAFF.

Senior Clerk:

R. O. R. CARRUTHERS, Cert. R.S.I., Meat and Other Foods, Trop. Hyg.

Record Clerk:

I. M. MALLET (Miss).

Junior Clerks:

J. H. LEACH. C. P. LEACH. J. KRUGER.

Typistes:

T. I. DAVIDSON. M. M. ADENDORFF. K. J. HAUPT. D. R. WELTHAGEN. K. KATZENELLENBOGEN.

SUB-ECONOMIC HOUSING SCHEMES.

Manageress: K. S. MARTIN, Dip. Public Health, Cert. Gen. Nursing and Midwif.
 Asst. Manageress: G. F. PIENAAR, Lower Secondary Teacher's Cert., Univ. of Cape Town, A.R.S.I., Assoc. Soc. of Women Housing Managers, Octavia Hill Training.
 Clerk: M. M. LAZAR, Cert. R.S.I.
 Handymen: J. BRODIE, P. J. DU PLESSIS and P. J. CRONJE.

DISINFECTING OFFICER.

V. J. BESTER.

RODENT ERADICATORS.

J. P. SCHOLTZ.

A. J. VLOK.

ANTI-MALARIAL STAFF.

B. HATTINGH.

P. J. FURSTENBURG.

J. H. VAN NIEKERK.

HEALTH VISITORS.

F. L. ROSS, Cert. S.A. Medical Council (Gen. and Midwif.); Cert. R.S.I., Health Visitor and School Nurse.
 G. S. J. PRETORIUS, Cert. S.A. Medical Council (Gen. and Midwif.); Cert. R.S.I. Health Visitor and School Nurse; Mothercraft.
 E. W. MURRAY, Cert. S.A. Medical Council (Gen. and Midwif.); Cert. R.S.I. Health Inspector; Cert. R.S.I. Health Visitor and School Nurse; Mothercraft.
 B. M. SCHOLTZ, Cert. S.A. Medical Council (Gen. and Midwif.); Cert. R.S.I. Health Visitor and School Nurse.

- H. C. E. PRETORIUS, Cert. S.A. Medical Council (Gen. and Mid.); Cert. R.S.I. Health Visitor and School Nurse.
- A. S. SCHULTZ, Cert. S.A. Medical Council (Gen. and Mid.); Cert. R.S.I. Health Visitor and School Nurse; Mothercraft.
- D. H. BRONKHORST, Cert. S.A. Medical Council (Gen. and Midwif.); Cert. R.S.I. Health Visitor and School Nurse; Mothercraft.
- A. C. M. VAN DER WESTHUIZEN, Cert. S.A. Medical Council (Gen. and Midwif.); Cert. R.S.I. Health Visitor and School Nurse; Mothercraft.
- D. N. MACLEAY, Cert. S.A. Medical Council (Gen. and Midwif.); Cert. R.S.I. Health Visitor and School Nurse.
- I. L. KOCKOTT, Cert. S.A. Medical Council (Gen. and Midwif.); Cert. R.S.I. Health Visitor and School Nurse; Mothercraft.
- S. PIENAAR, Cert. S.A. Medical Council (Gen. and Midwif.); Mothercraft.

NON-EUROPEAN NURSES.

- | | |
|--------------------------------|-------------------------------|
| D. F. THOMAS, Cert. Midwife. | G. MSIMANG, Cert. Midwife. |
| SALMINA HUMA, Cert. Midwife. | IVY MBOBO, Cert. Midwife. |
| ANNA NTJA, Cert. Midwife. | TALITHA LEEUW, Cert. Midwife. |
| VIOLET PHATUDI, Cert. Midwife. | GLORIA MOGALE, Cert. Midwife. |
| JOHANNA PAUL, Cert. Midwife. | |

NON-EUROPEAN CLINIC ORDERLIES.

- | | |
|------------------|------------------|
| JACOB MOHOLO. | WALTER MATABOGE. |
| JOSEPH MONTOEDI. | HENRY SETHEKGE. |

PUBLIC CONVENIENCE ATTENDANTS.

- | | |
|----------------|--------------------|
| TEN EUROPEANS. | TWO NON-EUROPEANS. |
|----------------|--------------------|

ATTENDANT—MUNICIPAL WASH-HOUSE.

R. J. GROBLER.

POUNDMASTERS.

- | | | |
|-------------|--------------|-------------|
| C. J. OTTO. | L. J. BOTHA. | C. W. SHORT |
|-------------|--------------|-------------|

CARETAKER.

MRS. S. J. NEL.

ADDITIONAL MEDICAL STAFF (ISOLATION WARDS).

PART-TIME STAFF:

- | | |
|-------------------------------|-------------------------------------|
| DR. E. A. GRUNBERGER | } Ear, Nose and Throat Specialists. |
| DR. J. H. W. CASEWELL | |
| DR. H. J. BESSELAAR | |
| DR. G. VAN DYK | |
| | } Surgical Specialists. |

TEMPORARY STAFF.

- | | |
|---|--------------------|
| S. M. PRUNS, Cert. S.A. Medical Council (Gen. and Midwif.); Cert. R.S.I. Health Visitor and School Nurse; Mothercraft | } Health Visitors. |
| A. M. PRINS, Cert. S.A. Medical Council (Gen. and Midwif.); Cert. R.S.I. Health Visitor and School Nurse | |
| H. M. E. VANDER MERWE, Midwifery Cert. Mothercraft Certificate | |
| J. WINKEL, Gen. Nursing; Health Visiting; Maternity Nursing; Tuberculosis Home Visiting | |
| | |

H. C. E. BRETHURST, M.D., 254 Medical College, 1700 N. 1st St., Health Visitor
 and School Nurse.
 A. S. SCHULTZ, M.D., 254 Medical College, 1700 N. 1st St., Health Visitor
 and School Nurse.
 D. H. BROOKHUIS, M.D., 254 Medical College, 1700 N. 1st St., Health Visitor
 and School Nurse.
 A. C. M. VAN DER WERF, M.D., 254 Medical College, 1700 N. 1st St., Health Visitor
 and School Nurse.
 D. N. MACLEAY, M.D., 254 Medical College, 1700 N. 1st St., Health Visitor
 and School Nurse.
 E. L. KOCKITT, M.D., 254 Medical College, 1700 N. 1st St., Health Visitor
 and School Nurse.
 S. PENNA, M.D., 254 Medical College, 1700 N. 1st St., Health Visitor
 and School Nurse.
 D. F. THOMAS, M.D., 254 Medical College, 1700 N. 1st St., Health Visitor
 and School Nurse.
 SALINA HUMA, M.D., 254 Medical College, 1700 N. 1st St., Health Visitor
 and School Nurse.
 ANNA KUA, M.D., 254 Medical College, 1700 N. 1st St., Health Visitor
 and School Nurse.
 VIOLLET BRATTON, M.D., 254 Medical College, 1700 N. 1st St., Health Visitor
 and School Nurse.
 JOHANNA PAUL, M.D., 254 Medical College, 1700 N. 1st St., Health Visitor
 and School Nurse.
 JACOB ROBERTO, M.D., 254 Medical College, 1700 N. 1st St., Health Visitor
 and School Nurse.
 JOSEPH MONTREY, M.D., 254 Medical College, 1700 N. 1st St., Health Visitor
 and School Nurse.
 PUBLIC CONVENIENT ATTENDANCE
 TEN EUROPEAN
 ATTENDANT-MILITARY WASHINGTON
 R. J. GORRIS, M.D., 254 Medical College, 1700 N. 1st St., Health Visitor
 and School Nurse.
 C. J. OTTO, M.D., 254 Medical College, 1700 N. 1st St., Health Visitor
 and School Nurse.
 ADDITIONAL MEDICAL STATE ISOLATION WARREN
 PART-TIME STATION
 DR. E. A. GRONINGER, M.D., 254 Medical College, 1700 N. 1st St., Health Visitor
 and School Nurse.
 DR. H. W. CASWELL, M.D., 254 Medical College, 1700 N. 1st St., Health Visitor
 and School Nurse.
 DR. H. J. RESSLAAR, M.D., 254 Medical College, 1700 N. 1st St., Health Visitor
 and School Nurse.
 DR. G. VAN DYK, M.D., 254 Medical College, 1700 N. 1st St., Health Visitor
 and School Nurse.
 TEMPORARY STAFF
 S. M. PRINS, M.D., 254 Medical College, 1700 N. 1st St., Health Visitor
 and School Nurse.
 A. M. PRINS, M.D., 254 Medical College, 1700 N. 1st St., Health Visitor
 and School Nurse.
 H. M. E. VAN DER WERF, M.D., 254 Medical College, 1700 N. 1st St., Health Visitor
 and School Nurse.
 J. WINKEL, M.D., 254 Medical College, 1700 N. 1st St., Health Visitor
 and School Nurse.

CITY COUNCIL OF PRETORIA.

FORTY-THIRD ANNUAL REPORT

of the

Medical Officer of Health.

CLIMATIC DATA.

Latitude: 25 degrees, 44 minutes, 3 seconds South.

Longitude: 1 hour, 52 minutes, 48 seconds East.

Mean Altitude: 4,480 feet.

Temperature: (Statistics kindly supplied by the Chief Meteorologist, Pretoria).

| | Mean Max. °F. | Mean Min. °F. | Highest Reading. °F. | Lowest Reading. °F. | Mean Relative Humidity at | | Rainfall. | |
|-------------------|---------------------|---------------------|----------------------------|---------------------------|------------------------------|-------------|-----------|-------|
| | | | | | 8.30 a.m. % | 3 p.m. % | Inches. | Days. |
| 1946: | | | | | | | | |
| July | 68·2 | 35·6 | 74·8 | 23·9 | 59 | 28 | 0·00 | 0 |
| August | 70·2 | 39·2 | 79·0 | 30·0 | 54 | 25 | 0·00 | 0 |
| September | 80·1 | 49·8 | 87·0 | 42·3 | 41 | 22 | 0·00 | 0 |
| October | 82·5 | 56·4 | 91·9 | 49·0 | 53 | 28 | 1·80 | 5 |
| November | 81·8 | 57·7 | 92·0 | 51·6 | 61 | 38 | 3·80 | 12 |
| December | 84·8 | 59·7 | 93·8 | 49·8 | 58 | 38 | 5·00 | 10 |
| 1947: | | | | | | | | |
| January | 83·2 | 60·6 | 90·5 | 53·4 | 70 | 48 | 4·23 | 19 |
| February | 83·3 | 60·0 | 90·0 | 54·0 | 67 | 48 | 4·79 | 11 |
| March | 79·0 | 56·8 | 86·1 | 50·8 | 72 | 48 | 5·35 | 10 |
| April | 76·4 | 52·6 | 83·3 | 41·5 | 72 | 44 | 0·94 | 4 |
| May | 70·6 | 40·7 | 77·2 | 36·0 | 62 | 33 | 0·06 | 1 |
| June | 65·9 | 37·0 | 72·0 | 29·1 | 70 | 32 | 0·36 | 2 |

AREA OF MUNICIPALITY.

The area of Pretoria and suburbs, inclusive of Town Lands, is 60·37 square miles. The town is built on and between three parallel ranges of quartzite hills running East and West, the soil in the valleys being largely shale.

ANNUAL RATEABLE VALUES.

Rateable Values:

| | 1945/46. | 1946/47. |
|-------------------|--------------------|--------------------|
| Land | £8,575,479 | £8,630,454 |
| Buildings | £24,315,620 | £25,244,280 |
| | <u>£32,891,099</u> | <u>£33,874,734</u> |

The value of Exempt Properties (Unrateable) were Land £2,209,681 and Buildings £6,591,260.

The total values therefore were:—

| | 1945/46. | 1946/47. |
|-------------------|--------------------|--------------------|
| Land | £10,768,405 | £19,840,135 |
| Buildings | £30,336,450 | £31,835,540 |
| Totals | <u>£41,104,855</u> | <u>£42,675,675</u> |

For the year under review the rates imposed were 7½d. per £ on land and 1½d. per £ on buildings.

POPULATION.

POPULATION exclusive of inmates of Institutions (Leper and Mental Asylums):—

| | Population as at Census taken during May, 1946. |
|--------------------|---|
| European | 106,986 |
| Native | 52,872 |
| Asiatic | 4,179 |
| Eurafrican | 2,741 |
| | <u>166,778</u> |

POPULATION inclusive of Institutions:—

| | |
|----------------------|----------------|
| European | 108,386 |
| Non-European | 61,192 |
| | <u>169,578</u> |

Note.—The figure for natives is the preliminary census figure; the final one is not yet available.

The population figures from the May 1946 census for the various races have kindly been supplied by the Director of Census, to whom, as well as members of the staff of the Department of Census and Statistics, we are grateful for statistical information so willingly given whenever it is sought.

I am grateful for the regular weekly returns submitted by the Registrar of Births and Deaths of all births and deaths notified within the Pretoria Municipal area. This information is of great value to the Department.

The population figures used throughout this report are the final ones for the Census taken during May, 1946—just prior to the commencement of the period under review. Unfortunately, no later estimated population figures are available.

The Principal Vital Statistics for the Year under review, corrected for outward transfers are:—

| | European. | Native. | Asiatic. | Eur-african. | Total Non-European. | All Races. |
|---|-----------|---------|----------|--------------|---------------------|------------|
| Population | 106,986 | 52,872 | 4,179 | 2,741 | 59,792 | 166,778 |
| Birth Rates | 29·96 | 8·61 | 48·10 | 22·62 | 12·01 | 23·52 |
| Death Rates | 6·18 | 6·70 | 12·20 | 14·59 | 7·44 | 6·63 |
| Infantile Mortality per 1,000 live births | 25·90 | 235·16 | 54·73 | 161·29 | 178·27 | 53·78 |
| Percentage of illegitimate to live births | 1·06 | 55·38 | 1·49 | 32·26 | 38·30 | 7·88 |
| Death rate from Tuberculosis, all forms, per 1,000 population | 0·10 | 1·10 | 2·15 | 3·28 | 1·27 | 0·52 |

BIRTHS.

(Figures for 1945-46 in brackets.)

The following births were registered in Pretoria during the year:—

| | European. | | Native. | | Asiatic. | | Eur- african. | | Total Non- European. | | All Races. | |
|--|-----------|--------|---------|-------|----------|-------|------------------|------|-------------------------|-------|---------------|--------|
| Local Births | 3205 | (2881) | 455 | (525) | 201 | (194) | 62 | (78) | 718 | (797) | 3923 | (3678) |
| Births where mothers were not residents of Pretoria | 779 | (680) | — | | — | | — | | 140 | (156) | 919 | (836) |
| Illegitimate births (in- cluded in local births) | 34 | (20) | 252 | (209) | | 3 (2) | 20 | (14) | 275 | (225) | 309 | (245) |
| Stillbirths .. | 34 | (41) | — | | — | | — | | 43 | (40) | 77 | (81) |

BIRTH RATES.

| | | |
|--------------------------|-------|---------|
| European | 29·96 | (27·78) |
| Native | 8·61 | (9·93) |
| Asiatic | 48·10 | (45·80) |
| Eurafrican | 22·62 | (26·32) |
| All Non-European | 12·01 | (13·27) |
| All Races | 23·52 | (22·46) |

Rates of natural increase, being the excess of births over deaths in proportion to population are as follows:—

| | |
|---------------|--------------------------|
| European.. | 23.78 (20.97) per 1,000. |
| Asiatic .. | 35.89 (34.70) per 1,000. |
| Eurafrican .. | 8.03 (11.47) per 1,000. |

European:

The birth rate of 29.96 is the highest recorded since the year 1913-14 and is 2.18 higher than the rate of 27.78 for last year.

Non-Europeans.

The birth rate of 8.61 for natives is 0.03 above the average for the last ten years, but is nevertheless the lowest rate recorded since the year 1941-1942, when it was 7.22. In my last Annual Report the unsatisfactory registration of native births was commented upon at some length. It is not proposed to further amplify these comments here, except to point out that for the same population of 52,872 there were 455 births registered for this year as against 525 for the previous year—a drop of 70. In any event a birth rate of 8.61 for natives is so obviously below the true rate that little significance can be attached to it, other than to state that this was the figure recorded!

The birth rate of 48.10 for Asiatics, although 2.30 above that of 45.80 for last year, is nevertheless 4.35 below the average of 54.45 for the last fourteen years.

The rate of 22.62 for Eurafricans is amongst the lowest ever recorded. Only twice previously has the rate been lower, namely, 21.59 for the year 1941-42 and 22.35 for the year 1944-1945.

It must be borne in mind, however, that the Asiatic and Eurafrican populations of 4,179 and 2,741 respectively are so small that slight fluctuations in the number of births have a marked effect on the birth rate.

The birth rate of 23.52 for all races is the second highest ever recorded. The highest figure was 23.85 in 1940-1941.

DEATHS.

(Figures for 1945-1946 in brackets.)

| | European. | Native. | Asiatic. | Eurafrican. | Total Non-European. | All Races. |
|--|------------|-----------|----------|-------------|---------------------|-------------|
| Local deaths (all ages) .. | 661 (706) | 354 (389) | 51 (47) | 40 (44) | 445 (480) | 1106 (1186) |
| Deaths of persons not being local residents .. | 297 (328) | — | — | — | 579 (678) | 876 (1006) |
| Total deaths | 958 (1034) | — | — | — | 1024 (1158) | 1982 (2192) |

The "Non-local" deaths occurred at:—

| | Pretoria and other Hospitals. | Mental Hospital. | Leper Asylum. | Prisons. | Visitors. |
|------------------|-------------------------------|------------------|---------------|----------|-----------|
| Europeans .. | 228 (240) | 56 (64) | 6 (7) | — (2) | 7 (15) |
| Non-Europeans .. | 422 (474) | 34 (76) | 71 (94) | 33 (14) | 19 (18) |

DEATH RATES.

| | |
|------------------------|---------------|
| European.. | 6.18 (6.81) |
| Native .. | 6.70 (7.36) |
| Asiatic .. | 12.20 (11.10) |
| Eurafrican .. | 14.59 (14.84) |
| All Non-European .. | 7.44 (7.99) |
| Total for all races .. | 6.63 (7.24) |

European:

The death rate of 6.18 for Europeans is the second lowest ever recorded. The lowest figure was 5.96 for the year 1944-1945.

Non-European.

The rate of 6.70 for Natives is the lowest ever recorded, the previous lowest being that of 7.36 for last year.

The rate of 12.20 for Asiatics is 1.10 higher than the rate of 11.10 for last year, which was the lowest on record.

The rates of 7.44 for all Non-Europeans and 6.63 for all races are the lowest ever recorded.

From these figures it will be seen that there has been a very satisfactory all-round fall in the death rates for the various races. It is an index of the good health of the population as a whole.

INFANTILE MORTALITY.

(Rates for 1945-1946 in brackets.)

| | European. | Native. | Asiatic. | Eurafrican. | Total Non-European. | All Races. |
|--|------------------|-----------|----------|-------------|---------------------|------------------|
| Local Deaths | 83 (98) | 107 (113) | 11 (5) | 10 (9) | 128 (127) | 211 (225) |
| Deaths of infants whose mothers had come to the City for confinement, or infants who were brought in suffering from the illness which caused death | 48 (52) | — | — | — | 70 (58) | 118 (110) |
| TOTAL INFANT DEATHS .. | 131 (150) | — | — | — | 198 (185) | 329 (335) |

INFANTILE MORTALITY RATES.

| | | |
|---------------------------|--------|----------|
| European | 25.90 | (34.02) |
| Native | 235.16 | (215.24) |
| Asiatic | 54.73 | (25.77) |
| Eurafrican | 161.29 | (115.37) |
| All Non-European | 178.27 | (159.35) |
| All races | 53.78 | (61.17) |

The causes of infantile deaths in Europeans were as follows:—

| | 1946/47. | 1945/46. |
|--|---------------|---------------|
| Congenital causes | 1 (Rate 0.31) | 9 (Rate 3.12) |
| Diarrhoeal diseases | 4 (" 1.25) | 14 (" 4.86) |
| Bronchitis and Pneumonia | 12 (" 3.74) | 11 (" 3.82) |
| Infectious diseases | 5 (" 1.56) | 2 (" 0.69) |
| Other causes | 18 (" 5.62) | 13 (" 4.51) |
| Prematurity | 33 (" 10.30) | 35 (" 12.15) |
| Injury at Birth | 10 (" 3.12) | 14 (" 4.86) |
| TOTAL EUROPEAN INFANT DEATHS .. | 83 | 98 |

The causes of death in Non-European infants were as follows:—

| | 1946/47. | 1945/46. |
|--|------------|------------|
| Congenital causes | 3 | 2 |
| Diarrhoeal diseases | 18 | 23 |
| Bronchitis and Pneumonia | 44 | 38 |
| Infectious diseases | 8 | 6 |
| Other causes | 13 | 20 |
| Prematurity | 32 | 25 |
| Injury at birth | 10 | 13 |
| TOTAL NON-EUROPEAN INFANT DEATHS .. | 128 | 127 |

TABLE OF INFANTILE MORTALITY RATES FOR ALL RACES.

| Year. | European. | Native. | Asiatic. | Eurafrican. | All Non-Europeans. | Total for All Races. |
|------------------|-----------|---------|----------|-------------|--------------------|----------------------|
| 1926-27 | 48.48 | 385.51 | 101.26 | 246.37 | 315.31 | 137.49 |
| 1927-28 | 61.30 | 483.51 | 166.67 | 163.26 | 356.04 | 153.79 |
| 1928-29 | 57.85 | 451.12 | 140.19 | 168.83 | 328.88 | 143.86 |
| 1929-30 | 51.77 | 422.48 | 88.80 | 141.17 | 297.92 | 126.94 |
| 1930-31 | 68.33 | 573.68 | 142.86 | 222.23 | 362.07 | 148.42 |
| 1931-32 | 59.41 | 794.87 | 112.00 | 179.48 | 459.80 | 153.48 |
| 1932-33 | 68.44 | 742.42 | 158.54 | 123.08 | 429.27 | 157.99 |
| 1933-34 | 68.13 | 621.40 | 121.74 | 244.68 | 415.93 | 152.60 |
| 1934-35 | 51.26 | 347.00 | 62.50 | 122.64 | 222.00 | 95.91 |
| 1935-36 | 77.67 | 585.94 | 152.67 | 140.19 | 374.49 | 149.58 |
| 1936-37 | 52.66 | 450.24 | 107.38 | 112.36 | 269.49 | 99.42 |

| | | | | | | | |
|---------|---------|-------|--------|--------|--------|--------|--------|
| 1937-38 | .. .. . | 63.57 | 457.14 | 105.26 | 209.88 | 303.35 | 116.21 |
| 1938-39 | .. .. . | 50.95 | 348.53 | 86.85 | 118.18 | 230.24 | 93.94 |
| 1939-40 | .. .. . | 43.84 | 349.67 | 136.90 | 146.34 | 255.39 | 88.92 |
| 1940-41 | .. .. . | 62.60 | 376.34 | 92.48 | 121.95 | 245.32 | 96.84 |
| 1941-42 | .. .. . | 53.30 | 353.84 | 86.42 | 264.70 | 253.06 | 86.10 |
| 1942-43 | .. .. . | 47.34 | 329.48 | 81.97 | 101.12 | 223.30 | 80.07 |
| 1943-44 | .. .. . | 47.94 | 304.99 | 70.71 | 204.08 | 216.64 | 77.80 |
| 1944-45 | .. .. . | 33.98 | 289.69 | 86.49 | 105.26 | 206.45 | 63.50 |
| 1945-46 | .. .. . | 34.02 | 215.24 | 25.77 | 115.39 | 159.35 | 61.17 |
| 1946-47 | .. .. . | 25.90 | 235.16 | 54.73 | 161.29 | 178.27 | 53.78 |

The infantile mortality rate is considered by public health authorities to be an indication of the general health of a population and the sanitary conditions under which they live. It is the figure which reflects the "balance sheet" of health conditions to the vital statistician.

Ever since infantile mortality rate figures have been kept in Pretoria there has been a steady decline, and the above table shows the figures over the last twenty years.

The first infantile mortality rate statistics recorded in Pretoria were for Europeans for the year 1904. From 1904 to 1909, i.e. the first five year period, the average rate was approximately 116, that is to say out of every 1,000 European children born 116 died within the first year of their lives. It is quite possible that this figure was even higher because it is understandable that the registration of deaths was not as accurate then as it is to-day.

It was during this time that the first Medical Officer of Health was appointed to Pretoria. Pretoria was by no means an unhealthy city as judged by prevailing standards, and then, as now, it was regarded as one of the healthy towns of South Africa.

In the old reports, Dr. Boyd, Pretoria's first full-time Medical Officer of Health, makes mention of this infantile mortality rate. The large number of children dying annually must have caused him grave concern and he directed his energies and enthusiasm towards the improvement of conditions which would bring down this rate. The citizens of Pretoria can well pay tribute to the memory of a keen and untiring health worker.

The next five year period, i.e. from 1910 to 1915, shows a reduction in the rate to an average of 85.2 per 1,000 live births per annum. From then on, with irregular intermissions, conditions gradually improved, and this year's figure of 25.90 is the lowest ever recorded in the history of Pretoria.

For the sake of comparison between the largest centres of the Union, the following table is submitted:—

INFANTILE MORTALITY RATES: 1946-1947.

| | European. | Native. | Asiatic. | Eurafrican. | All Non-Europeans. | All Races. |
|--------------|-----------|---------|----------|-------------|--------------------|------------|
| East London | 37.51 | 350.44 | — | 155.84 | — | — |
| Kimberley | 37.70 | 183.53 | — | 101.10 | — | — |
| Boksburg | 32.36 | (| 417.79 |) | — | — |
| Durban | 26.53 | 330.36 | 80.69 | 81.88 | — | 131.77 |
| Cape Town | 27.46 | 261.66 | 74.07 | 93.24 | 107.97 | 84.05 |
| P.M.'Burg | 24.40 | 187.30 | 36.60 | 60.40 | 80.00 | 59.30 |
| Benoni | 31.46 | 299.60 | 29.00 | 145.20 | 261.90 | 163.70 |
| Springs | 32.20 | 206.30 | 538.50 | 83.30 | 200.30 | 101.60 |
| Germiston | 30.88 | 148.47 | 94.34 | — | — | — |
| Johannesburg | 32.35 | 343.43 | 90.01 | 113.90 | 288.80 | 144.90 |
| Pretoria | 25.90 | 235.16 | 54.73 | 161.29 | 178.27 | 53.78 |

The figure of 25.90 is probably amongst the lowest infantile mortality rate figures in the whole world and is one with which we can well be satisfied. The lowest figure ever recorded before this was in 1944-45, when it was 33.98. It is hoped that in the years to come this figure will be still further reduced. There is ample scope for improvement in social, economic and health conditions, which could easily reduce the number of infantile deaths. This is borne out by the fact that the infantile mortality rate figure amongst the wealthier Europeans is already lower than 25.90 and there is no reason why our social and economic conditions could not be so levelled out as to afford the same chances of survival amongst all human beings.

The native figure of 235.16 is still extremely high, although it is the second lowest that has ever been recorded, and must be considered in the light of my remarks in regard to non-European figures in the previous annual reports.

The figure for Asiatics is comparatively low, but the total population is so small that it is not of much value as an indication of existing conditions. The same remarks apply to the European rates.

The figure of 53·78 for all races is the lowest that has ever been recorded, the next lowest being that of last year, namely 61·17. It is indeed pleasing to be able to record such a reduction in all races, although we can by no means be satisfied with our figures for Non-Europeans, and indeed we can never rest until the figure for all races and all economic groups is as low as at least the mean for Europeans.

The steady reduction in rates is attributable to the Council's health services and general policy for the improvement of living conditions of all the inhabitants of the city, and it is hoped that this policy will be vigorously pursued in future and that the numbers of children dying within the first year of their lives will be still further reduced.

The table given hereunder indicates the number of Non-European births and infant deaths notified during the year under review, in the various Non-European residential areas:—

Natives:

| | Marabas Location. | | Bantule Location. | | Atteridgeville Location. | | Town. | |
|----------------------------------|----------------------|---------|----------------------|---------|-----------------------------|---------|---------|---------|
| | Births. | Deaths. | Births. | Deaths. | Births. | Deaths. | Births. | Deaths. |
| Births and infant deaths | 21 | 9 | 98 | 30 | 241 | 30 | 95 | 38 |

Asiatics:

| | Asiatic Location. | | Town. | |
|----------------------------------|----------------------|---------|---------|---------|
| | Births. | Deaths. | Births. | Deaths. |
| Births and infant deaths | 139 | 8 | 62 | 3 |

Eurafricans:

| | Cape Location. | | Town. | |
|----------------------------------|----------------|---------|---------|---------|
| | Births. | Deaths. | Births. | Deaths. |
| Births and infant deaths | 52 | 7 | 10 | 3 |

DEATHS AT AGE 1 AND UNDER 5 YEARS.

Europeans:

18 Deaths were recorded under this age group:—

| | |
|--|-----------|
| Diphtheria | 4 |
| Tuberculosis | 2 |
| Broncho-pneumonia | 1 |
| Lobar Pneumonia | 1 |
| Asthma | 1 |
| Heart Disease | 1 |
| Intestinal obstruction | 1 |
| Congenital malformation of heart | 1 |
| Accident | 6 |
| TOTAL | 18 |

Natives:

48 Deaths were recorded under this age group:—

| | |
|--|-----------|
| Diphtheria | 2 |
| Tuberculosis | 6 |
| Congenital Syphilis | 1 |
| Measles | 1 |
| Infective Encephalitis | 1 |
| Malnutrition | 2 |
| Meningitis (non-meningococcal) | 2 |
| Acute Bronchitis | 1 |
| Broncho-pneumonia | 15 |
| Lobar Pneumonia | 2 |
| Pneumonia | 1 |
| Diarrhoea and Enteritis | 9 |
| Acute Nephritis | 1 |
| Congenital Debility | 1 |
| Accident | 3 |
| TOTAL | 48 |

Asiatics:

5 Deaths were recorded under this age group:—

| | |
|---------------------------|----------|
| Acute Bronchitis | 1 |
| Tuberculosis | 1 |
| Diphtheria | 1 |
| Broncho-pneumonia | 1 |
| Homicide | 1 |
| TOTAL | 5 |

Eurafricans:

| | |
|---------------------------------|----------|
| Acute Bronchitis | 1 |
| Tuberculosis | 1 |
| Diarrhoea and Enteritis | 1 |
| TOTAL | 3 |

DEATHS IN PERSONS OF 5 YEARS AND OVER.

The principal causes of deaths were:

| | Europeans. | | Non-Europeans. | |
|--|------------|--------------------------------------|----------------|--------------------------------------|
| | 1946/47. | Yearly Average for 5 Years. | 1946/47. | Yearly Average for 5 Years. |
| Cancer | 81 | 80.2 | 13 | 12.8 |
| Heart Disease | 143 | 153.0 | 22 | 40.0 |
| Pneumonia, Bronchitis and Broncho-pneumonia .. | 48 | 44.2 | 98 | 63.8 |
| Influenza | — | 1.4 | — | 1.6 |
| Typhoid Fever | 1 | 2.8 | 5 | 5.4 |
| Appendicitis | 3 | 2.4 | 1 | 1.0 |
| Tuberculosis (open) | 11 | 10.0 | 76 | 53.8 |
| Diabetes | 7 | 7.4 | — | 0.6 |
| Apoplexy | 41 | 40.8 | 8 | 8.2 |
| Disease of kidneys | 33 | 27.8 | 17 | 9.6 |
| Disease of arteries | 12 | 10.6 | 3 | 2.0 |
| Disease of liver and gall bladder | 12 | 12.0 | 2 | 3.8 |
| Puerperal disease | 1 | 1.6 | 2 | 1.4 |
| Old Age | 23 | 19.4 | 5 | 4.4 |
| Suicide | 12 | 7.8 | 3 | 3.4 |
| Accident | 34 | 35.2 | 33 | 44.2 |

DETAILS OF CAUSES OF DEATH—5 YEARS AND OVER.

(In all the following tables, figures for 1945-46 are shown in brackets.)

1. CANCER:

Europeans: 81 (0.76). Death rate per 1,000 population (0.88).

Site of disease:—

| | | |
|--|-----------|-------------|
| Buccal cavity and pharynx | 1 | (6) |
| Digestive organs and peritoneum | 36 | (44) |
| Respiratory tract | 10 | (7) |
| Uterus | 7 | (9) |
| Other female genital organs | — | (3) |
| Breast | 7 | (8) |
| Male genital organs | 8 | (5) |
| Male and female urinary organs | 5 | (5) |
| Brain and other parts of the nervous system .. | 1 | (—) |
| Skin | — | (1) |
| Bones | — | (2) |
| Other and unspecified organs | 6 | (1) |
| TOTAL | 81 | (91) |

Death Age:

| Under: | 40 years. | 40-50 | 50-60 | 60-70 | 70-80 | Over 80. | Total. |
|--------|-----------|-------|---------|---------|---------|----------|---------|
| | 6 (4) | 8 (4) | 20 (17) | 19 (32) | 21 (30) | 77 (4) | 81 (91) |

Non-Europeans:

Site of disease:—

| | | | |
|---------------|---|----|------|
| Natives: | Buccal cavity and pharynx | 1 | (1) |
| | Digestive organs and peritoneum | 7 | (3) |
| | Respiratory tract | 1 | (2) |
| | Uterus | — | (2) |
| | Breast | — | (1) |
| | Male and female urinary organs | — | (2) |
| | Other and unspecified organs | — | (1) |
| Asiatics: | Digestive organs and peritoneum | 1 | (2) |
| | Respiratory tract | — | (—) |
| | Uterus | — | (1) |
| | Male genital organs | 1 | (—) |
| Eurafricans: | Oesophagus | 1 | (—) |
| | Digestive organs and peritoneum | 1 | (—) |
| | Uterus | — | (—) |
| TOTAL | | 13 | (15) |

2. DISEASE OF THE HEART: Death rate per 1,000 population 1·34 (1·61).

Europeans: 143 (167).

Non-Europeans: 22 (31). Natives, 9; Asiatics, 10; Eurafricans, 3.

3. BRONCHITIS, PNEUMONIA AND BRONCHO-PNEUMONIA:

Europeans: 48 (59).

Non-Europeans: 98 (90). Natives, 74; Asiatics, 14; Eurafricans, 10.

4. INFLUENZA:

Europeans: — (1).

Non-Europeans: — (—).

5. TYPHOID FEVER:

Europeans: 1 (3).

Non-Europeans: 5 (7)—all natives.

6. APPENDICITIS:

Europeans: 3 (2).

Non-Europeans: 1 (—)—a native.

7. TUBERCULOSIS: (All forms).

Europeans: 11 (10).

Non-Europeans: 76 (67). Natives, 58; Asiatics, 9; Eurafricans, 9.

8. DIABETES:

Europeans: 7 (7).

Non-Europeans: — (—).

9. APOPLEXY:

Europeans: 41 (41).

Non-Europeans: 8 (10). Natives, 5; Asiatics, 2; Eurafricans, 1.

10. DISEASE OF THE KIDNEYS:

Europeans: 33 (33).

Non-Europeans: 17 (46). Natives, 14; Asiatics, 1; Eurafricans, 2.

11. DISEASES OF THE ARTERIES:

Europeans: 12 (8).

Non-Europeans: 3 (—)—all natives.

12. DISEASES OF THE LIVER AND GALL BLADDER.

Europeans: 12 (11).

Non-Europeans: 2 (4). Natives, 1; Asiatics, 1.

13. PUERPERAL DISEASES:

Europeans: 1 (4).

Non-Europeans: 2 (3). Natives, 1; Asiatics, 1.

14. OLD AGE:

Europeans: 23 (15).

Non-Europeans: 5 (5). Natives, 4; Eurafricans, 1.

15. SUICIDE:

Europeans: 12 (8). 3 By corrosive substances, 1 by hanging, 7 by firearms and 1 by cutting or piercing instruments.

Non-Europeans: 3 (3)—all natives, by hanging.

16. ACCIDENT:

Europeans: 34 (46).

Non-Europeans: 33 (51) from the following causes:—

| | Europeans. | Natives. | Asiatics. | Eurafricans. |
|--|------------|-----------|-----------|--------------|
| By motor road vehicle (excluding motor cycles) | 11 | 11 | 1 | — |
| On railways | — | 3 | — | — |
| By motor cycles | 5 | 2 | — | — |
| „ road transport (not motor) | — | 1 | — | — |
| „ food poisoning | 1 | — | — | — |
| „ poisoning (absorption of gases) | — | 2 | — | — |
| „ poisoning (not gas) | 2 | 1 | — | — |
| „ burns (not conflagration) | 1 | 2 | — | — |
| „ mechanical suffocation | — | 1 | — | — |
| „ drowning | 2 | — | — | — |
| „ firearms | 1 | 1 | — | — |
| „ injury by cutting or piercing instruments | — | 1 | — | — |
| „ fall | 5 | — | — | — |
| „ crushing | 1 | — | — | — |
| „ anaesthetis | 2 | 2 | — | — |
| „ other and unspecified accidents | 3 | 4 | — | 1 |
| TOTAL | 34 | 31 | 1 | 1 |

DETAILS OF INFECTIOUS DISEASES NOTIFIED DURING THE YEAR.

(Note: All figures for 1945-46 are shown in brackets.)

For Seasonal and District Distribution of infectious diseases see tables at the end pages of this Report.

1. TYPHOID FEVER:

| | Europeans. | Non-Europeans. |
|-------------------------------------|---------------|----------------|
| Local Cases | 11 (23) | 8 (10) |
| Imported Cases | 46 (37) | 93 (104) |
| Deaths in Local Cases | 1 (2) | 2 (4) |
| Attach Rate per 1,000 Population | 0.103 (0.270) | 0.134 (0.166) |
| Mortality rate per 1,000 population | 0.009 (0.019) | 0.003 (0.067) |

Local Cases:

It is gratifying to note that the incidence of Typhoid Fever is the lowest that has ever been recorded in the City.

This cannot be attributed to any one particular factor, but a very great contributing factor must be the vi testing of food handlers. The entire staff from sixty-six dairies were tested during the year for the possible Typhoid Carrier state. The bloods of fifty-five of those tested were found to have a Vi positive reaction. Seven were European employees and forty-eight non-Europeans. The Non-European positive reactors were admitted to the Typhoid Carrier camp where they were kept under strict supervision.

From every person with a Vi positive reaction specimens of stool and urine were taken for further examination.

The Non-Europeans were discharged from the Carrier Camp when sufficient tests were carried out to indicate that they were not active carriers. They were not allowed to be employed on any dairy work or on farms connected with a dairy. They were also debarred from engaging in any work connected with food handling.

Dairy Inspectors are continually on the look-out for new dairy employees and when found they are referred for blood Vi testing.

Sources of Infection.

All cases were "sporadic." There was no major or milk-borne outbreak.

Four of the European cases were from the same area. The staff of the shops from which these cases obtained most of their foodstuffs, which could have been the possible source of infection, were tested for the possible carrier state. Two of these tests were Vi-positive. Further stool and urine examinations from these positives were negative for B. Typhosus.

Eighteen of the local cases were treated in hospital. Three of the native cases were in one family, two being secondary to the first case.

Imported Cases.

During the year the following cases were admitted to the Municipal Isolation Hospital from areas surrounding Pretoria:—

Distribution:—

| | | Europeans. | Natives. |
|-----|--|------------|----------|
| (1) | From Hercules Municipal areas | 5 | 16 |
| (2) | „ Eastwood Location and Garsfontein | 1 | 9 |
| (3) | „ Silverton, Riverside, etc. | 8 | 12 |
| (4) | „ Pretoria North and Pyramids | 9 | 3 |
| (5) | „ area South West of Pretoria, Mooiplaas, etc. | 2 | 10 |
| | | <hr/> 25 | <hr/> 50 |

Five Europeans and ten Non-Europeans were Pretoria residents who contracted the disease outside the Municipal area. One of the Europeans and one of the natives died.

All the other imported cases were patients who were admitted to our hospital for treatment from outside the Municipal area.

TESTS CARRIED OUT FOR POSSIBLE TYPHOID CARRIER STATE.

| | No. of persons Vi-tested. | Blood found Vi-positive. | Stool or Urine found Positive. |
|---|---------------------------|--------------------------|--------------------------------|
| Typhoid Fever investigations | 70 | 5 | Nil. |
| Dairy typhoid testing | 677 | 55 | 2 urine. |
| Applicants for employment at Rietvlei waterworks | 13 | 2 | Nil. |
| Applicants for employment at Pretoria Hospital | No records kept. | 2 | Nil. |
| Other food handlers | 35 | 2 | Nil. |
| Food handlers tested by private concerns and only the positive reactors reported to Health Department | Unknown. | 5 | Nil. |

Dairy Typhoid Testing.

During the year 66 dairies (producers and distributors) submitted their staff for typhoid testing.

138 Europeans and 539 Natives—Total 677 tested.

7 (5% Europeans and 48 (9%) Natives—Total 55 (8.1%) were Blood Vi+).

Further stool and urine examinations on the seven Europeans were all negative.

Of the 48 Natives, 37 were detained in the Carrier Camp. On further stool and urine examinations Typhoid bacilli were recovered from the urine of two positives.

Of the 11 remaining Natives, two had been tested on a previous occasion, three were from dairies outside the Pretoria Municipal area (stool and urine examinations were negative for B. Typhosus), four refused to be admitted to the Carrier Camp and were allowed to leave for their homes after stool and urine examinations and two absconded.

Typhoid Carrier Camp.

| | |
|---|----------|
| Number of inmates on 1st July, 1946 | 7 |
| Number admitted during the year | 47 |
| | <hr/> 54 |
| Number discharged during the year | 40 |
| Still in camp on 30th June, 1947. | 14 |

Of these 14 Natives, four are Urinary Carriers, one is an Intestinal Carrier and one excreted the bacilli in both stool and urine. The remaining eight are still being kept under observation. Typhoid Immunisation. By Besredka Pills:—

Pill were issued to 59 home contacts and to 31 others.

2. TUBERCULOSIS:

| | Europeans. | Non-Europeans. |
|------------------------|------------|----------------|
| Local cases | 14 (23) | 91 (78) |
| Imported cases | 30 (16) | 179 (16) |

The various forms in which the diseases occurred:—

| | Pul-monary. | Mili-ary. | General-ised. | Menin-gitic. | Abdo-minal. | Spine. | Tubercular Peri-carditis. | Total. |
|-----------------------|-------------|-----------|---------------|--------------|-------------|--------|---------------------------|--------|
| Europeans | 11 | 1 | — | 2 | — | — | — | 14 |
| Non-Europeans | 73 | 9 | 2 | 1 | 2 | 3 | 1 | 91 |
| TOTAL | 84 | 10 | 2 | 3 | 2 | 3 | 1 | 105 |

Of the 105 local cases 63 died during the year.

Sixty (5 Europeans and 55 Non-Europeans) died in Pretoria and three Non-Europeans died at their homes outside Pretoria.

Four Europeans and 38 Non-Europeans were only notified on death. One European and 11 Non-Europeans died within three months of notification, seven Non-Europeans within six months, and two Non-Europeans within nine months.

One European and 17 Non-Europeans gave a familial history. Four Non-Europeans gave a history of having been in contact with a known case.

Three of the Non-Europeans (two local cases and one imported case) were supplied with T.B. Huts.

How Notified.

Thirty notifications were received from the Pretoria General Hospital and the Isolation Hospital, 22 notifications were obtained from the weekly returns from the Registrar of Births and Deaths, 15 were sent in by private practitioners, 22 by Municipal Tuberculosis Clinics, 12 by the District Surgeon on Post Mortem findings, and four were received from various other sources.

Sanatorium Treatment.

Of the European local cases, one was admitted to Springkell Sanatorium and the other was admitted to the King George V. T.B. Hospital at Durban as Municipal cases.

Of the Non-Europeans, two were admitted to Rietfontein as Municipal cases.

Of the imported European cases, one was admitted to Springkell Sanatorium at the responsibility of the Local Authority in whose area he had been residing. One was admitted to Nelspoort Sanatorium as a Municipal case.

Imported Cases.

Fifty persons (16 Europeans and 34 Non-Europeans) were infected before they became Pretoria residents. Of these, three Europeans and 17 Non-Europeans died.

3. SCARLET FEVER.

| | Europeans. | Non-Europeans. |
|------------------------|------------|----------------|
| Local cases | 151 (320) | Nil (5) |
| Imported cases | 19 (24) | Nil (—) |

16 Cases were adults.

53 were children of school-going age.

82 were children under school-going age.

Thirty-six patients were removed to hospital and 115 were home treated.

There were 24 secondary cases.

There was a marked decrease in the incidence of Scarlet Fever.

4. DIPHTHERIA.

| | Europeans. | Non-Europeans. |
|------------------------|------------|----------------|
| Local cases | 52 (54) | 21 (9) |
| Imported cases | 35 (41) | 40 (23) |

The response by parents to the appeal to have their children immunised against diphtheria is becoming more and more satisfactory.

We are continually emphasizing the fact that immunisation is safe and without re-action, especially in the case of children. Inoculation is administered by the Department free of charge. A number of childrens' institutions in Pretoria have taken advantage of this offer.

We are aiming at an immunisation figure which will keep the incidence rate as low as possible.

There were 13 deaths (seven in Europeans, five in Natives and one in an Indian.).

The Non-European cases were 13 in Natives, one in an Eurafrican and seven in Indians, and is an increase of 12 over the previous year.

Forty-one of the cases were children under school-going age, 20 were school-going children and 12 were adults.

Sixty-six of the patients were removed to Hospital and seven were treated at their homes.

There were five secondary cases (two Europeans and three Indians).

An outbreak in the Non-European children's ward at the Pretoria Hospital caused seven cases, of whom three unfortunately died due to serious concurrent illnesses for which they were being hospitalised. Thirteen of the patients stated that they had been immunised before they contracted Diphtheria, but they were not immunised by this Department and the statements could not be checked. None of the cases immunised by us contracted Diphtheria. Two European children and one Native child stated that they had had a previous attack. This again could not be verified.

5. MENINGOCOCCAL MENINGITIS.

| | Europeans. | Non-European. |
|------------------------|------------|---------------|
| Local cases | 2 (2) | 3 (5) |
| Imported cases | 3 (3) | 1 (2) |

There was one European death among the local cases.

6. MALARIA:

| | Europeans. | Non-European. |
|------------------------|------------|---------------|
| Local cases | 1 (6) | — (—) |
| Imported cases | 16 (23) | 18 (26) |

Only one locally infected case was reported during the year. As his home is situated in Pretoria West, near the Pietersburg railway line, it is probable that he contracted the infection from a mosquito which could have been brought in by train from outside the Municipal area.

Of the imported cases, eight European and nine Natives were Pretoria residents. Investigations, however, proved that they were suffering either from recurrent attacks or new infections contracted outside Pretoria.

All the other imported cases were admitted to the Pretoria Hospital from the district for treatment.

For comments on anti-malaria measures see pages 46-47.

7. SMALLPOX:

| | European. | Non-European. |
|------------------------|-----------|---------------|
| Local cases | 3 (2) | 2 (—) |
| Imported cases | — (1) | 1 (—) |

During the year cases of Smallpox occurred in various areas in the Transvaal and also in areas in close proximity to Pretoria. We, however, had only five local cases. This would indicate that the Pretoria residents are fairly well vaccinated as a result of the mass immunisation campaign which was carried out during 1944 and 1945.

The three European cases which occurred were in one family. One of the patients, an elderly lady aged 70, unfortunately died. Two were secondary cases.

The source of infection was a visitor who had spent a week in Pretoria with the family. During the last few days of his stay, he became ill and left for his home where he was diagnosed to be suffering from Smallpox.

The usual precautionary measures were taken. The patients were removed to Rietfontein and the contacts were vaccinated and kept in quarantine. The necessary disinfections were carried out. All the children at the school attended by the children of the infected family were vaccinated.

The patient who died stated that she had been vaccinated in childhood, but no vaccination marks were visible. The other two patients, on religious grounds, had never been vaccinated.

One of the native cases, a female aged 16 years, was reported from Cape Location. No definite source of infection could be traced. She may, however, have been infected at Lady Selbourne Location (outside Pretoria) where cases occurred about the same time.

This patient had never been vaccinated.

The imported case was a native male residing in the eastern suburbs who had returned a few days previously from a visit to his kraal and who had been vaccinated in childhood. The other local native case was a female aged 24 years, who was a contact of the imported case. She showed very doubtful old vaccination marks and stated that she was vaccinated when a child.

The following is a table of the remaining infectious diseases notified during the year:—

| | European. | | Non-European. | |
|---------------------------|-----------|-----------|---------------|-----------|
| | Local. | Imported. | Local. | Imported. |
| Poliomyelitis | 2 | 1 | — | 1 |
| Encephalitis | 3 | — | 1 | — |
| Undulant Fever | 1 | — | — | — |
| Erysipelas | 14 | 5 | — | 2 |
| Puerperal Fever | — | 2 | 2 | 10 |
| Ophthalmia Neonatorum .. | 1 | — | 1 | 2 |
| Gonorrhoeal Ophthalmia .. | — | — | 4 | 3 |
| Trachoma | — | 1 | 1 | 13 |
| Typhus Fever | — | 1 | — | — |
| Leprosy | — | — | — | 1 |
| Anthrax | — | — | — | 1 |
| Relapsing Fever | — | — | — | 6 |

8. PLAGUE: For comments on anti-plague measures see page 47.

SPECIAL DISEASES CLINICS.

Tuberculosis Section.

The Tuberculosis clinics are conducted for Europeans at the Municipal Special Diseases clinic situated in the Pretoria Hospital grounds, for Non-Europeans in rooms adjoining the Out-Patients Department of the Pretoria General Hospital, and at Atteridgeville, in an adapted building.

It will be noted from the adjoining table that there is a marked decrease in the incidence of the disease among Europeans as compared with the figures of the previous year, whereas among the Non-Europeans the incidence has increased.

Regular examinations of all the contacts of these cases are conducted, both from the point of view of detection of early cases and for the prevention of the spread of infection.

All cases are treated, constantly supervised and educated in preventive measures.

Early notification among Europeans enables them to be admitted for Sanatorium treatment. Among Non-Europeans, however, early notification is rare. A persistent cough is of no significance to the average Non-European and a blood stained sputum does not drive him to a doctor, as it would a European. When he does seek assistance, his history is usually that "his trouble commenced a month ago." The majority of cases come to us when the disease is very far advanced, or are notified after death.

Mass immature radiography has been considered especially for Non-Europeans. This was discussed with the Union Health Department and it seems as if that Department might be undertaking some such scheme.

Every effort has been made to prevent the spread of Tuberculosis but the acute shortage of beds still remains. Tuberculosis cases have to wait for many months before they can be accommodated.

Through regular home visiting patients and contacts were repeatedly advised as regards personal hygiene and the necessary disinfectants were supplied to them. Essential foodstuffs, i.e. milk, meat, butter, vegetables, clothing and blankets were given free of charge where required. Through the Christmas Stamp Fund, contacts who have not yet contracted the infection are admitted to the preventorium at Pietermaritzburg.

All children discharged from the Preventorium are visited regularly and a record is kept of their progress.

RETURN OF TUBERCULOSIS PATIENTS FOR THE YEAR JULY 1946—JUNE 1947.

| | European. | | Non-European. | | Total. | |
|---|-----------|---------|---------------|---------|---------|---------|
| | 1946-47 | 1945-46 | 1946-47 | 1945-46 | 1946-47 | 1945-46 |
| Number of new cases coming under treatment during the year | 104 | 169 | 301 | 280 | 450 | 449 |
| Total number of attendances | 1,230 | 2,067 | 2,559 | 1,703 | 3,789 | 3,770 |
| Number of home visits paid by Health Visitors | 2,811 | 3,119 | 6,964 | 4,949 | 9,775 | 8,068 |

The figures for Atteridgeville Clinic are included in the above totals and are as follows:—

| | 1946-47 | 1945-46 |
|--------------------------------|---------|---------|
| Number of attendances | 818 | 292 |
| Number of home visits | 2,287 | 514 |

VENEREAL DISEASES CLINICS.

Staff.

The staff now consists of one full-time Venereologist who is assisted at certain clinics by one of the other Assistant Medical Officers; one full-time venereal diseases sister, assisted by the Tuberculosis sister; a clinic clerk; a clinic orderly; a native female nurse and three native male orderlies.

Accommodation.

European clinics are held in the Special Diseases treatment centre in the General Hospital grounds. The main Non-European clinics are held in a section of the Out-Patients Department of the General Hospital. This accommodation is most inadequate and to relieve the congestion somewhat, the Tuberculosis patients have been separated into a different clinic. Plans have already been drawn up and approved for a new Non-European Clinic to be built on top of the European clinic and it is hoped that tenders will be called for within the next few months. At Atteridgeville the clinics are held in a converted cottage pending the erection of the proposed polyclinic building. A new clinic has been started at Bantule Location and this is held in a converted cottage.

Clinic Hours:

| | |
|--------------------|--|
| Mondays: | 11 a.m. to 1 p.m., and 2 p.m. to 4.30 p.m.—Non-European mixed. |
| Tuesdays: | 8.30 a.m. to 10 a.m.—European Male. 10.30 a.m. to 12.30 p.m.—Non-European mixed (Bantule)—New clinic opened in May, 1947. |
| Wednesdays: | 2 p.m. to 4.30 p.m.—European Female. 9 a.m.—10.30 a.m.—European Female. 4 p.m.—6.30 p.m.—Non-European Male. |
| Thursdays: | 10 a.m.—1 p.m.—Non European mixed (Atteridgeville). 2 p.m.—4.30 p.m.—Non-European mixed. |
| Fridays: | 5 p.m.—6.30 p.m.—European Males. |

In addition to these regular clinics, new cases are seen at any time. The clinic hours are so arranged as to cater for both Europeans and Non-Europeans engaged in shift work.

Consultation Service:

Cases are seen by appointment on behalf of local practitioners. No fees are charged as this is considered as a service to the community.

Assistance to Patients.

As before, free Municipal bus-tickets and free rail warrants (within a radius of 30 miles, continue to be distributed to the poorer patients and prove to be a great help in encouraging regular attendance.

Vulvo-Vaginitis.

A small outbreak of gonococcal vulvo-vaginitis occurred at one of the orphanages early in 1947. The infected children were taken to the Isolation Hospital and the rest of the girls in the institution were all examined, swabbed and kept under observation for some months. Fortunately there was no spread beyond the inmates of the one dormitory and the situation remained under control.

In passing, it may be mentioned that penicillin was used for these children in doses of 100,000 to 500,000 units. The results appeared to be excellent at first, but it was soon found that the same high percentage of relapses (approx. 30%) occurred as was met with in other methods of treatment.

Penicillin.

Limited supplies of penicillin were made available by Union Health. It is being used with very satisfactory results for sulfa-resistant gonorrhoeas at the clinics and it is hoped to introduce it as the routine treatment when supplies become more freely available. Its greatest virtue, from the public health aspect, is the rapidity with which it renders the patients non-contagious.

In certain special cases, syphilis is also being treated with penicillin. This requires hospitalisation for nine days plus a regular follow-up and tests for a minimum period of two years. The immediate results have been satisfactory, but final judgment must be suspended.

Peri-Urban Natives.

Over one-third of the Non-European patients at the clinics come from the peri-urban areas. Because of the fact that they are outside the Municipal boundaries it is impossible to exercise any supervision over them or to follow them up if they default from treatment. It is understandable that these people who have to walk long distances stop attending as soon as their external lesions appear to heal, but the incidence of relapse in these inadequately treated cases is very high and they are responsible for much spread of infection. The only satisfactory solution is obviously to run clinics in the various locations and the attention of the Union Health Authorities has been drawn to this problem.

Propaganda.

Talks on Venereal Diseases were given during the year to various groups such as the Rotary Club, Y.M.C.A., Women's Auxiliary of Toc. H., etc.

REPORT OF THE VENEREOLOGIST ON VENEREAL DISEASES TREATED AT THE SPECIAL DISEASES CLINIC DURING THE YEAR JULY 1946-JUNE, 1947.

Statistics.

| Nature of Disease. | CENTRAL CLINIC. | | | | | | ATTERIDGEVILLE CLINIC. | | | | | | BANTULE CLINIC. | | | | | |
|--|---|-------|---------------|--|--------|---------------|---|-------|---------------|--|-------|---------------|---|-----|---------------|--|-----|---------------|
| | Number of new cases coming under treatment during the year. | | | Number of all out-patient attendances during the year. | | | Number of new cases coming under treatment during the year. | | | Number of all out-patient attendances during the year. | | | Number of new cases coming under treatment during the year. | | | Number of all out-patient attendances during the year. | | |
| | European. | | Non-European. | European. | | Non-European. | Non-European. | | Non-European. | Non-European. | | Non-European. | Non-European. | | Non-European. | Non-European. | | Non-European. |
| | M. | F. | | M. | F. | | M. | F. | | M. | F. | | M. | F. | | M. | F. | |
| Syphilis— | | | | | | | | | | | | | | | | | | |
| (a) Primary or Secondary | 23 | 26 | | 563 | 637 | | 21 | 20 | | 289 | 289 | | 1 | 1 | | 32 | 15 | |
| (b) Tertiary | 13 | 56 | | 261 | 935 | | 15 | 101 | | 325 | 325 | | — | 4 | | 4 | 109 | |
| (c) Of central nervous system | — | — | | — | — | | — | — | | — | — | | — | — | | — | — | |
| (d) Congenital | 8 | 44 | | 149 | 1,232 | | 15 | 20 | | 596 | 932 | | — | 1 | | — | 38 | |
| Gonorrhoea | 35 | 36 | | 230 | 392 | | 8 | 8 | | 57 | 59 | | — | — | | 20 | — | |
| Others | 9 | 130 | | 39 | 288 | | 3 | 8 | | 13 | 22 | | — | 1 | | — | 2 | |
| | 88 | 292 | | 1,242 | 3,484 | | 62 | 150 | | 1,280 | 3,913 | | 1 | 7 | | 56 | 164 | |
| | | | | | | | | | | | | | | | | | | |
| (a) Number of new cases examined | 88 | 292 | | 1,521 | 861 | | 62 | 150 | | 2,847 | 1,600 | | 1 | 7 | | 8 | — | |
| (b) Number found to be free from Venereal Diseases | 31 | 181 | | 205 | 122 | | 21 | 38 | | 719 | 67 | | — | 1 | | 1 | — | |
| (c) Number of persons attending the clinic | — | — | | — | — | | — | — | | — | — | | 22 | 70 | | 92 | — | |
| (d) Number of attendances paid by these people | 1,242 | 3,484 | | 15,520 | 11,640 | | 1,280 | 3,913 | | 30,258 | 3,603 | | 56 | 164 | | 220 | — | |
| (e) Number discharged as cured (other than (b)) | 39 | 77 | | 267 | 102 | | 24 | 39 | | 63 | — | | — | — | | — | — | |
| (f) Number discharged as "defaulters—unable to trace" | — | — | | — | — | | — | — | | — | — | | 1 | — | | 1 | — | |
| (g) Number of "Resident Magistrate" warnings and note "A" sent to defaulters | 66 | 57 | | 432 | 343 | | 146 | 519 | | 665 | 248 | | — | — | | — | — | |
| (h) Number of visits paid by clinic staff to defaulters and contacts | 118 | 513 | | 1,125 | 544 | | 295 | 1,074 | | 1,369 | 1,713 | | 3 | 11 | | 14 | — | |

INFECTIOUS DISEASES HOSPITAL.

This building, situated in the grounds of the Pretoria General Hospital, has accommodation for 70 patients—50 Europeans and 20 Non-Europeans. By making use of enclosed stoeps with canvas blinds, a further 30 patients can be admitted, giving a total of 100 beds.

Methods of control and administration are unchanged from previous years, except that the Pretoria Hospital Board is now responsible for maintenance of buildings and equipment, while the Pretoria City Council is responsible for purchase of new equipment and replacement of any unserviceable or worn-out equipment or furniture.

The following figures summarise briefly the work done in this section for the year 1st July, 1946, to 30th June, 1947:—

| | |
|---|-----|
| Total number of European cases admitted | 554 |
| Total number of Non-European cases admitted | 412 |

In addition to the above, approximately 400 pneumothorax refills were given at the Hospital during the year. These patients, however, are not actually admitted to Hospital.

Details regarding the cases treated are given hereunder:—

EUROPEAN PATIENTS.

ENTERIC FEVER:—56 cases admitted—1 death.

Percentage mortality amongst the cases admitted, 1·8.

Distribution: Pretoria, 17, Hercules 4, other towns and districts 35.

DIPHTHERIA:—78 cases admitted—8 deaths.

Percentage mortality amongst the cases admitted, 10·3.

Ten patients were tracheotomised; three of whom died.

Distribution: Pretoria 49, Hercules 5, other towns and districts 24.

Carriers: 8 Diphtheria carriers were treated, of whom 4 were from Pretoria, 1 from Hercules and 3 from other districts.

SCARLET FEVER:—48 cases admitted—no deaths.

Distribution: Pretoria 34, Hercules 3, other towns and districts 11.

PULMONARY TUBERCULOSIS:—Two types of cases are admitted to the Isolation Hospital, those awaiting a bed at a Sanatorium and those for whom Sanatorium treatment would be of no avail.

30 Cases were admitted—6 deaths.

Percentage mortality amongst the cases admitted, 20.

Distribution: Pretoria 27, Hercules 2, other districts 1. One patient was successfully operated upon for acute appendicitis.

SYPHILIS:—23 cases admitted—no deaths.

Distribution: Pretoria 19, Hercules 1, other towns and districts 3.

GONORRHOEA:—20 cases admitted—no deaths.

Distribution: Pretoria 15, other towns and districts 5. In addition one infant was admitted suffering from Ophthalmia Neonatorum.

VULVO-VAGINITIS:—51 cases admitted.

Distribution: 49 from Pretoria and 2 from the district.

MEASLES:—50 cases admitted—no deaths.

Distribution: Pretoria, 37, Hercules 4, other districts 9.

GERMAN MEASLES:—34 cases admitted—no deaths.

Distribution: 33 were from Pretoria and 1 from outside the Municipal area. The 33 local cases were the result of an outbreak of German Measles among the nurses of the Pretoria General Hospital.

WHOOPING COUGH:—18 cases admitted—2 deaths.

Percentage mortality amongst the cases admitted, 11·1.

Distribution: Pretoria 8, other towns and districts 10.

CEREBRO-SPINAL MENINGITIS:—3 cases admitted—1 death.

Percentage mortality amongst the cases admitted, 33·3.

Distribution: All 3 patients came from outside Pretoria.

ACUTE ANTERIOR POLIOMYELITIS:—3 cases admitted—no deaths.

Distribution: Pretoria 2 and 1 from outside the Municipal area.

OTHER INFECTIONS:—16 cases of Erysipelas, 27 cases of Chickenpox, 4 cases of Murine Typhus, 1 case of Tick-bite fever, 2 cases of Puerperal Sepsis, 13 cases of Mumps and 1 case of Trachoma were admitted. In addition 68 patients admitted were found not to be suffering from an infectious disease and were either discharged or transferred to the appropriate institution. There were no deaths from the above-mentioned diseases.

CLASSIFICATION OF ALL EUROPEAN PATIENTS.

| | |
|-------------------------|------------|
| Pretoria | 341 |
| Hercules | 37 |
| Other Districts | 176 |
| TOTAL | 554 |

NON-EUROPEAN PATIENTS.

ENTERIC FEVER:—87 cases admitted—14 deaths.

Percentage mortality amongst the cases admitted, 16·09.

Patients perforated with two recoveries.

Distribution:—Pretoria 15, Hercules 15, other towns and districts 57.

DIPHTHERIA: 64 cases admitted—12 deaths.

Percentage mortality amongst the cases admitted, 18·7.

Distribution: Pretoria 17, Hercules 19, other towns and districts 28.

Carriers: 11 cases were treated, 3 from Pretoria, 1 from Hercules and 8 from other districts.

PULMONARY TUBERCULOSIS:—46 cases admitted—16 deaths.

Percentage mortality amongst the cases admitted, 34·8.

In addition one infant died of tubercular meningitis.

Distribution: Pretoria 19, Hercules 9, other towns and districts 18.

SYPHILIS:—58 cases admitted—no deaths.

Distribution: Pretoria 21, Hercules, 5, other towns and districts 32.

GONORRHOEA:—18 cases admitted—no deaths.

Distribution: Pretoria 8, Districts 10.

4 Cases of Ophthalmia Neonatorum were also treated, one of whom came from Pretoria and three from other areas.

VULVO-VAGINITIS:—2 cases admitted—no deaths.

Distribution: One from Pretoria and one from the district.

MEASLES:—18 cases admitted—no deaths.

Distribution: Pretoria 8, Hercules 2, other towns and districts 8.

PUERPERAL SEPSIS:—10 cases admitted—no deaths.

Distribution: Pretoria 1, other towns and districts 9.

WHOOPIING COUGH:—9 cases admitted—2 deaths.

Percentage mortality amongst the cases admitted, 22·2.

Distribution: Pretoria 1, Hercules 2, other towns and districts 6.

CEREBRO-SPINAL MENINGITIS:—3 Cases admitted—no deaths.

Distribution: All were from Pretoria.

OTHER INFECTIONS:—24 cases of Chickenpox, 4 cases of Trachoma, 1 case of Erysipelas, 1 case of Anthrax, 2 cases of Mumps, 1 case of Acute Anterior Poliomyelitis, 1 case of Tetanus and 3 cases of Smallpox were admitted.

45 Cases admitted were found not to be suffering from an infectious disease and were treated or transferred to the appropriate institutions.

CLASSIFICATION OF ALL NON-EUROPEAN PATIENTS.

| | |
|-------------------------|------------|
| Pretoria | 133 |
| Hercules | 67 |
| Other Districts | 212 |
| TOTAL | 412 |

Total cases treated in Isolation: European and Non-European, 966, plus 400 Pneumothorax referrals given.

Distribution of all cases:

| | |
|-------------------------|------------|
| Pretoria | 474 |
| Hercules | 104 |
| Other Districts | 388 |
| TOTAL | 966 |

PRETORIA DENTAL CLINIC.

Report for the Year, July 1946—June 1947.

(By the Acting Superintendent, Dr. C. V. Berry.)

General.

Since the last Report the services of the Clinic have been conducted, until the end of October, 1946, with the depleted staff indicated then. In November the services of two full-time officers were secured; and in December the Clinic was further fortunate in obtaining a third full-time officer.

The combined efforts of the three full-time officers, the part-time Assistant Dental Surgeon, and the Acting Superintendent have very materially increased the amount of work done, and enhanced the standard of the services rendered.

The examination of the school children has been resumed; and has been almost completed. The Acting Superintendent has participated in the work as well as the sub-clinics so that a better insight into the prevailing conditions and practices could be obtained. Certain recommendations based on the findings, will be put forward later.

Due acknowledgment must be made for the valuable and efficient services rendered by the operative, nursing and secretarial staffs of the Clinic; and also by the Honorary Visiting Dental Surgeons, and the part-time Assistant Dental Surgeons.

School Children.

Unfortunately all returns from the resumed examinations of school children have not yet been received and in consequence, the statistical records are only partially completed—the school holidays precluding the possibility of securing these in time for this report.

Altogether 49 schools have been visited and at the great majority, the examinations have been completed. 33 Schools with a total of 14,109 children in attendance have sent in returns for 12,259 children examined and classified. 16 more schools making up the total of 49 examined, have yet to send in their reports.

In addition to the above, 15 sub-clinics were held at some of the more distant schools; but these unfortunately represent a very small number of those needed to meet the acute emergency and conservative work revealed by the survey and calling for urgent attention.

The number of children requiring attention in the 33 schools which have sent in reports, is 9,796. Of this number 7,841 are indigent—7,121 of whom require treatment. To these will have to be added those from the other 16 schools where the prevailing conditions are not likely to be much, if any, better.

Four Nursery Schools have also been examined where 111 children were present.

Meerhof, furthermore, has been visited four times when sub-clinics were conducted with highly beneficial effects to these unfortunate children.

The over-all impression gathered by the Acting Superintendent from his part in the general survey correlated with the reports from the three full-time Dental Officers, is that the general need for emergency and conservative treatment alone is enormous; the demand is greatly limited in area and amount, due to ignorance of the value of dental health and dental treatment and also because of the difficulties involved in attending and travelling to the Clinic. The supply to meet the real need is hopelessly inadequate; and to make it in any way comparable, would necessitate increased services and greater facilities for attendance at some centre.

There is one very gratifying aspect of the numerical returns and that is the increase in the amount of conservative work done for the children which—despite the fact that the three full-time officers have not completed a year—is probably the highest for the Clinic.

The total operations performed compared with last year, have been nearly doubled and show a general improvement in the type of service being rendered.

Adults.

These services remain the same, 2,332 patients were admitted for treatment, 6,384 extractions were performed, 317 fillings completed and 602 dentures supplied, 19 of which were for children. The perceptible fall in the number of dentures is due to the effect of the Mechanicians Act enforcing strict hours of work.

Orthodontic Department.

This is progressing slowly owing to inherent difficulties of the work, and to the limited time available of the Consultant. Efforts to expand the service are being made.

Non-Europeans.

These two Clinics have been regularly attended, 2,213 patients having been seen and 3,086 extractions performed.

The Acting Superintendent has visited both these Clinics and submitted recommendations to the Clinic Board for certain increased facilities for operating.

Statistical Returns.

| | Patients. | | Treatments. | | |
|---------------------------------|--------------|---|--------------|---------------|------------|
| | Admitted. | Discharged (Treatment completed). | Fillings. | Extractions. | Dentures. |
| Children . . . | 4,000 | 1,010 | 5,670 | 5,627 | 19 |
| Adults | | | | | |
| (Indigents) . . | 2,241 | 312 | 291 | 6,167 | 559 |
| Adults (Semi- Indigents) . . | 91 | 14 | 26 | 217 | 26 |
| TOTAL . . | 6,332 | 1,336 | 5,987 | 12,011 | 602 |
| Non-Europeans | 2,078 | — | — | 3,086 | — |

CHILD WELFARE ACTIVITIES.

STAFF.

During the year under review several new appointments were made.

A full-time Medical Officer in charge of Child Welfare and Ante-Natal work assumed duty on the 1st August, 1946.

After a lapse of three years a Senior Health Visitor was appointed and she assumed duty in February, 1947.

One of the Health Visitors has now been temporarily appointed as Supervisor of Midwives, she commenced these duties on 2nd January, 1947.

EUROPEAN CHILD WELFARE.

Child Welfare clinics are now being conducted at 18 centres scattered throughout the City. There is a clinic at each centre once a week—at the Central Clinic, the clinic is held twice weekly. During the year three additional clinics were started. A doctor is in attendance at 7 of the clinics. During the year a new suite of rooms was occupied at the Central Clinic. The rapid development of the work is evidenced by the fact that the available accommodation has again become inadequate.

The clinic at Danville is conducted in one of the sub-economic houses which has been put at our entire disposal. This has proved to be a most satisfactory arrangement and the clinic has become very popular amongst the residents. Some of the other clinics are still being conducted under most unsatisfactory conditions, limiting the nature of our services to a considerable extent. Several schemes are, however, under consideration and it is hoped that during the coming year at least two new clinic buildings will be erected.

ATTENDANCES AT CLINICS.

| | First Attendances. | Re- Attendances. | Total Attendances. | Seen by Doctor. |
|-------------------|-----------------------|---------------------|-----------------------|--------------------|
| 1945-46 | 1,223 | 12,100 | 13,390 | 67 |
| 1946-47 | 1,586 | 15,326 | 17,938 | 1,026 |

During the year there was an increased clinic attendance of 4,548. 1,026 of these children were seen by a doctor. The total volume of work has expanded very considerably and has fully justified the additional staff appointments.

Several Nursery Schools and the Crèche have also been visited regularly by the Health Visitors. At the Crèche and one of the Nursery Schools the doctor has been visiting regularly (this work is not reflected in any of the statistics).

At all clinics, Child Welfare as well as Ante-Natal, intensive propaganda is made for breast feeding, as it is felt that it is one of the most important means of reducing Infantile Mortality and Morbidity rates. Results as far as increased breast feeding are concerned are encouraging, but figures are not as yet available.

ATTENDANCES AT CLINICS.

| CLINICS | First Attendances. | | Re-Attendances. | | Total Attendances. | | Seen by Doctor. | |
|---------------------------|--------------------|--------------|-----------------|---------------|--------------------|---------------|-----------------|-----------|
| | 1946-47 | 1945-46 | 1946-47 | 1945-46 | 1946-47 | 1945-46 | 1946-47 | 1945-46 |
| Central (Tuesday) | 91 | 99 | 930 | 914 | 1,021 | 1,013 | 285 | — |
| Central (Friday) | 131 | 103 | 1,273 | 921 | 1,304 | 1,024 | 30 | — |
| Blood Street | 53 | 53 | 663 | 690 | 716 | 743 | 7 | 8 |
| Pretoria West | 145 | 126 | 1,258 | 899 | 1,403 | 1,025 | — | — |
| Proclamation Hill | 61 | 36 | 647 | 418 | 708 | 454 | 92 | 20 |
| Iscor Township | 54 | 47 | 606 | 459 | 660 | 506 | 9 | 2 |
| Gezina | 136 | 95 | 1,320 | 1,077 | 1,456 | 1,172 | 169 | 27 |
| Villieria | 134 | 57 | 1,203 | 532 | 1,337 | 1,260 | 231 | — |
| Wonderboom South | 66 | 72 | 641 | 505 | 707 | 577 | 4 | — |
| Mayville | 189 | 66 | 692 | 623 | 881 | 689 | 53 | — |
| Capital Park | 98 | 66 | 952 | 656 | 1,050 | 722 | 3 | 1 |
| Hatfield | 96 | 101 | 984 | 1,088 | 1,080 | 1,189 | — | — |
| New Muckleneuk | 35 | 59 | 521 | 423 | 556 | 482 | — | — |
| Sunnyside | 120 | 117 | 1,495 | 1,655 | 1,615 | 1,772 | — | — |
| Riviera | 71 | 66 | 605 | 845 | 676 | 911 | 2 | — |
| Salvokop | 23 | 43 | 405 | 358 | 428 | 401 | 1 | — |
| Danville | 38 | 17 | 612 | 37 | 650 | 54 | 131 | — |
| Defence Reserve | 16 | — | 292 | — | 308 | — | — | — |
| Armstrong Berning | 29 | — | 227 | — | 256 | — | 9 | — |
| TOTAL | 1,586 | 1,223 | 15,326 | 12,100 | 16,812 | 14,994 | 1,026 | 67 |

HOME VISITS BY HEALTH VISITORS.

| | First Visits. | Subsequent Visits. | No. of sick children visited. | Total Visits. |
|-------------------|---------------|--------------------|-------------------------------|---------------|
| 1945-1946 | 3,448 | 12,754 | 660 | 12,754 |
| 1946-1947 | 3,887 | 14,375 | 931 | 14,375 |

During the year under review, 1,621 more home visits were paid and 286 more sick children were visited.

INVESTIGATIONS OF DEATHS AND STILLBIRTHS.

| | Deaths under one year. | Deaths over one year but under five years. | Stillbirths. |
|-------------------|------------------------|--|--------------|
| 1946-1947 | 83 | 18 | 34 |
| 1945-1946 | 98 | 24 | 41 |

An additional 49 visits were made but the occupants had either moved or were out.

EUROPEAN ANTE-NATAL CLINICS.

| | Central. | | Proclamation Hill. | | Danville. | | Total. | |
|----------------------|----------|---------|--------------------|---------|-----------|---------|---------|---------|
| | 1945-46 | 1946-47 | 1945-46 | 1946-47 | 1945-46 | 1946-47 | 1945-46 | 1946-47 |
| No. of new cases .. | 226 | 234 | 25 | 29 | — | 6 | 251 | 269 |
| Total attendances .. | 883 | 1,133 | 103 | 197 | — | 41 | 986 | 1,371 |

A weekly Ante-Natal Clinic is conducted at the Central Clinic and fortnightly at Danville and Proclamation Hill. Ante-Natal cases are also seen at the Armstrong Berning Home. There is an appreciable increase in the total attendance. The co-operation of the private midwives has been sought and several of them are now sending cases to these clinics.

We have an arrangement with the Dental Clinic whereby they attend to Ante-Natal cases referred from our Clinic.

IMMUNISATION CLINICS.

A weekly clinic is still conducted every Tuesday at the Health Department.

The following injections are given: Alum Precipitated Toxoid, Combined Whooping Cough and Diphtheria, Prophylactic Whooping Cough, Therapeutic Whooping Cough.

There were 1,013 children immunised against Diphtheria and 450 against Whooping Cough. The total number of all types of injections given is 2,867.

The Principal of one primary school requested us to immunise the whole school. The consent of the Medical Inspector of Schools and the parents were obtained and 213 children were immunised against Diphtheria. This work was done at the school.

At Danville immunisation is done at the Child Welfare Clinic. The response has been most satisfactory. As we have the full support of the local school, school-going children are also done at the clinic during school hours. As this is a fairly isolated and easily controllable community, the aim is to have a fully-immunised child population in the near future. During the past year two cases of diphtheria occurred there. Important statistical data could then possibly be obtained, especially in connection with the value of Whooping Cough Prophylaxis.

Regular injections are also given at the Crèche. All newcomers are immunised at the earliest opportunity.

MIDWIFERY SUPERVISION.

With the appointment of a Health Visitor to supervise Midwives, the control has been tightened up and the standards raised considerably. The Department has also been able to help the private midwives more frequently with some of their difficulties.

The early notification of births by the midwives was strictly enforced as from March, 1947. This has been a real help to the Department, as it is now possible to visit infants as soon as patients are no longer under the care of the midwife, whereas previously there was often an interval of several weeks.

January—June, 1947.

| | |
|---|----|
| No. of Midwifery bags inspected | 76 |
| Special visits to Midwives | 87 |
| Visits to midwifery cases | 8 |
| Visits to Maternity Homes | 6 |

At the end of June, 1947, 32 qualified midwives were listed with this Department. Three unqualified midwives were entitled to practice in restricted areas.

NON-EUROPEAN CHILD WELFARE.

STAFF.

Two European Health Visitors devoted all their time to work amongst Non-Europeans. It is anticipated that a third Health Visitor will be appointed early next year.

In addition, five Non-European Nurses are employed on Child Welfare Work.

The work is divided into three main areas:—

- (1) Atteridgeville.
- (2) Marabastad inclusive of the Coloured and Asiatic Bazaars.
- (3) Bantule.

The clinic premises at Atteridgeville are not large enough to cope with the numbers attending at the Clinics. At the Compound the new clinic is nearing completion. During October we occupied the new clinic, which is part of the Native Administration office at Bantule.

The Non-European clinics are conducted on lines exactly similar to the European clinics, the only difference being that much more foodstuff, especially powdered milk and medicines, are issued free of charge.

ATTENDANCES AT CLINICS.

| | Railway Reserve. | Native. Compound Hospital. | Atteridgeville. | Bantule. | Asiatic. | Eurafrican. |
|---------------------------|------------------|----------------------------|-----------------|----------|----------|-------------|
| First Attendances. | | | | | | |
| 1946-1947 | 15 | 104 | 291 | 199 | 66 | 67 |
| 1945-1946 | 16 | 121 | 189 | 232 | 75 | 70 |
| Subsequent Attendances. | | | | | | |
| 1946-1947 | 675 | 2,041 | 5,953 | 3,944 | 1,281 | 2,039 |
| 1945-1946 | 398 | 2,413 | 4,609 | 3,607 | 1,468 | 1,788 |
| Seen by Doctor at Clinic. | | | | | | |
| 1946-1947 | 69 | 406 | 953 | 429 | 212 | 396 |
| 1945-1946 | — | 143 | 15 | 252 | 102 | 80 |

Eight clinics are conducted weekly by the Health Visitors. At five of these a doctor is also in attendance. A glance at the statistical table will show a marked increase in the attendance at the Native and Coloured clinics. The Indian attendance shows a slight drop.

HOME VISITS.

| | Natives. | Asiatics. | Eurafricans. |
|-------------------------------------|----------|-----------|--------------|
| First visits to newly-born infants— | | | |
| 1946-47 | 738 | 223 | 87 |
| 1945-46 | 781 | 263 | 166 |
| Subsequent visits— | | | |
| 1946-47 | 9,846 | 1,819 | 1,194 |
| 1945-46 | 7,600 | 1,741 | 1,185 |
| Visits to sick children— | | | |
| 1946-47 | 828 | 284 | 230 |
| 1945-46 | 478 | 139 | 122 |
| No. of sick children visited— | | | |
| 1946-47 | 441 | 197 | 180 |
| 1945-46 | 321 | 115 | 110 |
| Nett total visits— | | | |
| 1946-47 | 11,594 | 2,348 | 1,519 |
| 1945-46 | 9,048 | 2,171 | 1,430 |

The nett total of visits paid to all races shows an appreciable rise.

The total number of cases seen by the doctor has increased from 592 to 2,465.

One of the major difficulties encountered in Non-European Child Welfare work is the high incidence of affections due to malnutrition. Protective foods such as proteins, vitamins and mineral salts are most frequently deficient.

It was noticed that the infants did very well whilst fully on the breast, but as soon as additional foods became necessary i.e. at about six months, they started losing weight. As a result, of this the Bantule Feeding Scheme was established. With funds made available by the Native and Asiatic Administration Department, an infant feeding scheme was started at Bantule, where a kitchen is now attached to the clinic building. A properly-prepared vegetable gruel is served to selected infants daily. Vitamin and protein preparations are added and they are also given fresh pasteurised milk. The results have been most encouraging. One woman who had lost six children previously and has only two children alive has been able to raise twins successfully, with this additional balanced diet. As soon as the weight of a child over four months becomes stationary, or shows unsatisfactory weekly gains, and if a fully physical examination reveals no apparent cause, it is referred for daily feeding. In some instances the weight has increased by more than 16 ozs. after the first week. The centre is also used to teach the natives proper feeding habits.

INVESTIGATION OF DEATHS AND STILLBIRTHS.

| | Deaths under one year. | Deaths over one year but under five years. | Stillbirths. |
|---------------------|------------------------|--|--------------|
| Natives.. .. . | 107 | 48 | 34 |
| Asiatics | 11 | 5 | 4 |
| Eurafricans | 10 | 3 | 5 |

NON-EUROPEAN ANTE-NATAL CLINICS.

| | Atteridgeville. | | Compound. | |
|---|-----------------|---------|-----------|---------|
| | 1946-47 | 1945-46 | 1946-47 | 1945-46 |
| New cases | 304 | 194 | 501 | 504 |
| No. of Attendances | 1,493 | 1,103 | 2,310 | 1,864 |
| | 1946-47 | | 1945-46 | |
| No. of Post-Natal Attendances.. .. . | 358 | | 285 | |
| No. of Ante-Natal visits to homes | 2,419 | | 2,168 | |
| No. of Post-Natal visits to homes | 1,395 | | 1,048 | |
| No. of N.A.B. injections | 456 | | — | |
| No. of Bismuth injections.. .. . | 121 | | — | |
| Patients attended by District Midwife | 215 | | 186 | |
| No. of visits during Puerperium | 2,061 | | 1,529 | |

Two Ante-Natal clinics are conducted, one at the Compound and one at Atteridgeville.

These clinics are very well patronised and the attendance figures show a considerable rise.

It is proposed to start a third clinic at Bantule in the near future.

At the Compound the necessary Venereal Disease treatment is given at the Ante-Natal clinic.

Two Non-European midwives are employed on district work. At Atteridgeville the residents are gradually becoming aware of the value of trained assistance at confinements and it will soon be necessary to appoint a third midwife. Complicated cases are admitted to the General Hospital. The available hospital accommodation is, however, hopelessly inadequate. Some cases have to go to the Little Flower Mission Hospital at Lady Selborne for confinements. Lady Selborne is a native township situated some ten miles outside Pretoria and transport by ambulance is a major difficulty.

IMMUNISATION.

The incidence of diphtheria amongst Non-Europeans is decidedly on the increase. Eight cases occurred in the Cape Location and Asiatic Bazaar and three at Atteridgeville. Regular immunisation and vaccination at the Child Welfare clinics is very necessary and this work is well under way at the Native, Indian and Coloured clinics conducted at the Compound. It is hoped soon to extend it to all the clinics where ever a doctor is in attendance.

The children attending the Coloured Crèche have all been immunised, and new admissions are done as soon as possible.

INSPECTION OF NURSING HOMES, CONVALESCENT HOMES AND HOSPITALS.

All Nursing Homes, Convalescent Homes and Hospitals other than the Pretoria General Hospital were inspected on behalf of the Secretary for Health, to whom detailed reports have been submitted.

One additional Convalescent Home was established during the year.

There are at present three Nursing Homes, two Convalescent Homes and two Hospitals in the City. One Hospital (85 beds) and one Nursing Home (12 beds) are purely for maternity cases.

For Non-Europeans the position remains unchanged. There are only twelve beds in the maternity section of the Pretoria General Hospital.

It will be noted from the figures quoted above that there is still a very great need of additional accommodation for midwifery cases for Europeans and particularly Non-Europeans.

As was mentioned in previous reports many confinement cases had to be conducted in over-crowded homes and under adverse conditions.

Those in charge of the Homes and Hospitals have always been most co-operative and eager to bring about such changes and improvements as were recommended.

EXTRACT FROM THE REPORT OF THE PRETORIA NURSERY SCHOOL COMMITTEE FOR THE YEAR ENDED 31st MARCH, 1947.

(By Professor J. C. Bosman, Acting Chairman.)

Representatives:

Pretoria City Council—The Acting Medical Officer of Health.
Councillor T. J. Frates.
Mrs. Leo Basaans.

Pretoria Parents' Association.—Mrs. M. Fouché.
Mrs. J. A. van Schaik.

Pretoria Child Welfare—Mrs. H. Bell-John.

Pretoria Benevolent Society—Mrs. K. Stead.

West End Nursery School Birthday Club—Mrs. L. Milner.

Committee Changes.

Mrs. Lounsbury, who has now finished with her war work, consented to become an active member again and Mr. H. F. Pentz was co-opted to advise the Committee on financial matters.

Enrolment.

| | Present Enrolment. | Good Hope. | West End. |
|--|--------------------|------------|-----------|
| Afrikaans speaking | 34 | 18 | |
| English speaking | 2 | 36 | 27 45 |
| Average enrolment for year | | 35.2 | 44.3 |
| Average attendance for year | | 29.6 | 39.4 |
| Total number admitted since 1/4/46 | | 29 | 41 |
| Left for Government Schools | | 8 | 20 |
| Left for other reasons | | 21 | 21 |
| Waiting list | | 16 | 170 |

Health.

Medical attention as part of the Nursery School programme was given during the whole year. The Honorary Physician of the two schools, Dr. A. Philpson, did her usual careful examination of all children of both schools. At Good Hope she advised that a child be examined at the General Hospital for glandular trouble and that a child at West End be withdrawn for the winter months because of frequent bronchial trouble. Sisters Pretorius, Pienaar and v. d. Merwe visited the schools regularly and did much in their treatment and advice to keep the general health of the children on a satisfactory level. A few cases of mild chicken pox and whooping cough occurred at Good Hope. During September, West End had to close for three days on account of scarlet fever. A child had to have her tonsils removed. The Health Visitors found many cases of bad teeth, and, although the Dental Clinic did all it could, it is felt that this aspect of health should be more liberally catered for. Daily health inspections were conducted in both schools by the principals.

Children's Excursions.

Although the value of excursions is fully realised, it was possible only to arrange for a visit to the Zoo and two visits to the West End Municipal Paddling Pool, the Municipal Transport Department again furnishing special buses at a nominal charge per child.

Parents' Co-operation.

This very essential phase of Nursery Education was satisfactorily maintained at both schools. There is always a chance for discussion with parents who bring and fetch their children. Occasionally parents meet informally as a group, but they often come to lectures and discussions on child development. During the year the following lectures were given:

Good Hope.—Miss Webb—"Food in Winter Months."

Mrs. Laredo—"Why Children are Naughty."

West End.—Miss Trizona—"Feeding and Clothing for Winter Times."

Miss Knowles-Williams—"Suitable Books and Stories for Children."

The staff also visit homes regularly and in this way teachers keep a close contact between school and home.

Community Service.

The schools are still used as training centres for students-in-training at the University of Pretoria. No students from other centres came for experience, but some Normal College students, who were doing school practice nearby, paid the West End school a visit.

Staff.

At Good Hope no change of staff occurred during the year, while at West End, Miss van Alphen was appointed from January 1st in place of Miss Abegg, and Miss Hattingh took the place of Mrs. Joubert from February 1st.

Equipment and Accommodation.

No significant additions were made to accommodation during the year, but necessary repairs were attended to. The sand pit at West End has now been protected against cats and dogs by wire netting; it has also been adequately drained. With voluntary funds that have been available from time to time, suitable toys and play material have been purchased. Every effort is being made to care for the lawns, trees and shrubs.

Finance.

From a financial point of view, the past financial year has been one of anxiety for the Committee. The small balance of £41. 3s. 0d. at the beginning of the year and the small amount of £102 realised by the street collection in April, 1946, forced the Committee to ask for an overdraft already at the end of the first month, so that a monthly deficit was added to the Committee's responsibility. If it had not been for the remarkable contributions from the Birthday Club, as well as for other contributions, the Committee would have been unable to meet its financial obligations to date.

In November, 1946, the Provincial Administration found out that its £10 per caput subsidy was ultra vires. This led to a reduction of the subsidy to one-half of the salaries of the teachers, leaving out of consideration all cost-of-living allowances. And so the Committee had to suffer a direct loss of approximately £160 per year.

For a long time there was uncertainty about the City Council's financial support, but in February, 1947, it was decided to reduce the amount by 12 per cent., and that meant a meaningful decrease of £75 in income.

An added burden to the Committee's anxiety, caused by reduced income and the feeling of uncertainty, is the responsibility of meeting the rising price of provisions and the increased cost of maintaining the two schools. Further, the application of the Unemployment Law of 1946 means an additional outlay of about £30 per year.

The Committee is now in a financial situation that makes it impossible to carry on unless fairly extensive sources of income can be found. The possibility of finding these sources is, however, very small, so that the Committee will either have to discontinue its useful activities, or the City Council and the Provincial Administration will have to increase their contributions very materially in the near future.

The year closes with an overdraft of £207. 17s. 10d. The Provincial Administration has, fortunately for the Committee, responded to its appeal and the Executive Committee has decided to make a special grant of £325 to the Nursery Schools after March 31st, 1947.

The Committee sincerely trusts that the Provincial Administration will, without delay, make such a radical change in its policy of supporting Nursery Schools, that the Committee will have no need to appeal to it again in the future.

Acknowledgements.

The Committee acknowledges, with thanks, generous help from many quarters, as follows:—

Financial Contributions.—Provincial Administration, subsidy; Pretoria City Council, grant-in-aid; West End Nursery School Birthday Club; Pretoria Parents' Association, £15; United Building Society, £5; Pretoria Football Association, £5; Miss Dien Wyers £5; Mr. Hofman for the following donations from: A. Wolf, Ltd., £10. 10s.; H. Evans & Co., £10. 10s.; Sage & Co., £10. 10s.; F. Knoefel, £10; Wm. McIntosh, £10; Hillman Bros., £5. 5s.; Hunt, Leuchars & Hepburn, £5. 5s.; Ballantine, Ltd., £5. 5s.; Tatham & Co., £5. 5s.; Charles Bramley, Esq., £5; Rand Provident Building Society, £2. 2s.; Ons Eerste Volksbank, £3. 3s.

The Committee must again mention the valuable work done by the Birthday Club under the able chairmanship of Mrs. Pentz. Mrs. Pentz also organised the teas and light luncheons at the C.P.S. Hut, Church Square, and it was this self-sacrificing effort, plus the noble assistance of voluntary helpers, specially that of Mrs. Scully, that made it possible for her to hand over to the Committee the substantial sum of £156. 10s. 9d.

Services.

Dr. A. Philipson, medical supervision of both schools; service of District Health Visitors; Pretoria Dental Clinic, examination and treatment of children; Dr. Milner, weekly transport of vegetables; Bray's Laundry, washing 90 blankets; Gerard Finger, mending wheelbarrows; Mr. Hillcoat, repairing electric stove plate; Mr. Tompson, repairing lock and door of native room; the Board of Directors of Iscor and Mr. K. Anderson for repairing macadamised runway; Mr. Nobbie Clark who supervised work on macadamised runway and who was also responsible for numerous odd jobs; Prof. J. C. Bosman, repairing toys; Mr. Repton of the Parks Department, planting trees and lawns and laying out the shrub garden; Prisons Department, trenching above garden; Mr. Buchel, stopcock repairs and extension to water pipe; Mr. Nicolai, drainage of sandpit; Mr. Chadwick, erecting gate; Mr. van Jaarsveldt, use of C.P.S. Hut; Provincial Architect, alterations to C.P.S. Hut; Mr. Hofman, for his ever ready help and advice, the Press; the Honorary Auditor and members of the Committee for their help.

Proof that the Nursery Schools are doing a good work in Pretoria is found not only in the great variety of help listed above, but also in the large number of visitors, who came to see what the schools were doing. Public interest, gifts in kind and financial aid strengthen the hands of voluntary Committees that organise, guide and control such an important social service as Nursery Schools. Without enough money, however, the service is faced with shipwreck. Teachers need security of tenure, as well as certainty of annual increments. At the moment, both of these are lacking. Every year, the burden on the shoulders of voluntary Committees grows heavier, and one can end this year's report in no better way than quoting the last paragraph from Dr. Ruth Arndt's 1946 report: "It is scarcely to be expected that voluntary Committees will be able to carry the growing burden of responsibility indefinitely, if they are to remain dependent upon charity to meet essential running costs."

HEALTH EDUCATION AND PROPAGANDA.

Health education and propaganda are essentials in the promotion of health.

In order that health knowledge may be widely disseminated, every form of education such as Theatre filmlets, health exhibitions, health weeks, attractive posters, lectures and radio broadcasts should be made use of.

Health propaganda is unfortunately very costly and when finances are limited, education must be reduced correspondingly. The Department has, however, during the year under review, carried out a great deal of health educational work. Large posters are prominently displayed in various parts of the City, theatre filmlets are regularly exhibited and a large number of lectures have been given to the public on almost every subject pertaining to the health of a community. It is hoped that more funds will become available in future for new filmlets, if possible in colour, to be produced on a wider range of subjects. Existing filmlets are receiving wider publicity since theatre circuits have been considerably increased in recent years.

MEDICAL EXAMINATIONS CONDUCTED BY MEDICAL OFFICERS IN THE HEALTH DEPARTMENT FOR THE PERIOD 1st JULY, 1946, TO 30th JUNE, 1947.

A total of 816 medical examinations were conducted.

This figure includes medical examinations of persons entering the Municipal Service, special medical examinations under the Workmen's Compensation Act or for Pension Fund purposes or for any other reason.

EXAMINATION OF NATIVES AT THE INFLUX CONTROL AND REGISTRY OFFICE.

The following figures give details in regard to the work done at the Influx Control Office:—

| | |
|---|--------|
| Total number of native males examined | 53,472 |
| Total number vaccinated against smallpox | 12,768 |
| Total number infested with lice | 10,423 |
| (a) Head and body lice | 1,201 |
| (b) Crab lice | 9,222 |
| Total number found to be either temporarily or permanently unfit for employment | 818 |

Reasons for Unfitness for Employment:

| | |
|--|-----|
| (1) Total number suffering from Venereal Disease | 363 |
| (a) Gonorrhoea | 127 |
| (b) Primary Syphilis | 71 |
| (c) Secondary Syphilis | 93 |
| (d) Tertiary Syphilis | 72 |

158 of these cases failed to report at the Municipal Special Diseases Clinic.

(A commentary on this is given later on in this report.)

| | |
|---|----|
| (2) Scabies | 95 |
| (3) Total number found to be suffering from Pulmonary Tuberculosis | 19 |
| A further four patients had healed lesions and were passed as fit for employment. | |
| (4) Leprosy | 3 |
| (5) Tapeworm | 25 |
| (6) Chickenpox | 6 |
| (7) Mumps | 1 |
| (8) Discharging tuberculous glands | 1 |
| (9) Molluscum contagiosum | 1 |
| (10) Acute balanitis and subpreputial warts | 31 |
| (11) Defective vision | 44 |
| (12) Severe crippling | 8 |
| (13) Lymphogranuloma inguinale | 1 |
| (14) Ringworm | 3 |
| (15) Miscellaneous conditions (e.g. pneumonia, malarial relapse, epilepsy, heart disease, etc.) | 97 |

Commentary.

General.—The natives are completely stripped and examined in a room 58 feet by 20 feet which is centrally heated, provided with hooks on which to hang their clothes, benches, and a mirror. Any native who requests to be privately examined has had his request acceded to. One part of the room has been partitioned off for this purpose.

All natives who had never been vaccinated or who had not been successfully vaccinated, as defined in the Public Health Act, were vaccinated before being passed as fit for employment. This ensures that at least all new adult male natives employed in Pretoria are well vaccinated.

Natives infested with head and body lice or crab lice were treated with one application of D.D.T. powder (10%). In the case of head and body lice the treatment is very successful, but only in a very small percentage of those with crab lice was D.D.T. effective.

All those who were excessively dirty on their person, taking into consideration the inadequate ablution facilities they normally have, were compelled to take a hot bath at the Depot.

Any natives temporarily rejected and suffering from conditions amenable to treatment are referred to the hospital if they so desire. In this way diseases which are progressive were treated in time. For instance, every month several cases of trichiasis, a condition which causes untold suffering and which may eventually lead to blindness, were sent up for treatment in good time.

Venereal Diseases.—All cases suffering from venereal diseases were referred to the Municipal Special Diseases Clinic where, up to the present, they have been treated as out-patients. In exceptional circumstances some were admitted to the Isolation Hospital, but the accommodation for such cases is very limited. Those who had venereal disease in a non-communicable form were passed as fit for employment and advised to report for treatment. The others who had the disease in a communicable form were not passed as fit. As they could not all be admitted to the Isolation Hospital a great number of them suffer hardships as a result. Where and how they live, when they have just arrived in the city in search of employment, is a mystery. There is sleeping accommodation available for them at the reception depot. In August, 1946, a request was made to the Union Health Department for approval of the housing, feeding and treatment of these cases in a dormitory set aside for this purpose at the depot. This scheme has not as yet received the sanction of the Union Health Department. Further representations have been made from time to time and it is hoped that something will eventually materialise.

It would appear from the great drop in the number of cases of communicable venereal disease coming up for examination that the poor facilities at present provided have caused natives who suspect that they are infected, not presenting themselves for examination. It is also a cause for falsification of passes.

Once a week a cross-check is made with the Special Diseases Clinic to establish which natives have not yet reported for treatment. If their addresses are known they are traced and forced to attend.

Pulmonary Tuberculosis.

Cases suspected to be suffering from pulmonary tuberculosis were referred direct to hospital for X-ray. Positive open cases were declared 100% unfit for the open labour market and were recommended for invalidity pensions. Owing to shortage of native tuberculosis beds they had to be advised to return to the rural areas and the Native Commissioner was requested to facilitate their return. They were also recommended for permanent exemption from payment of tax. This is by no means the correct way of handling tuberculosics but until the authorities concerned are able to provide adequate hospital accommodation this is the only way by which we are able, in some small measure, to alleviate their hardships.

Propaganda.

Most natives have great difficulty in finding out where to go in case of illness. In an effort to overcome this (since many of them are illiterate) it was decided to post a circular letter, with a time-table of all the health services provided for natives by the municipality to responsible persons, to whom natives usually go for advice. During the course of the year such a letter was forwarded to:—

- (a) Location Superintendents and staff.
- (b) Chief Traffic Officer for distribution amongst Non-European traffic police.
- (c) The Manager, Native and Asiatic Administration Department and staff.
- (d) Officer in charge, for distribution amongst municipal Non-European police.
- (e) All members of Native Advisory Board.
- (f) All principals and teaching staff of Non-European schools.
- (g) All clergymen of African Churches.

with a request that these facts be published as widely as possible.

Employment Bureau.

During December 1946 the Municipal Employment Bureau (administered by the Native and Asiatic Administration Department) was brought into operation. This, apart from its other numerous benefits to both employer and employee, is of great help in placing in employment crippled natives who are still able to do certain types of work but are useless as farm labourers. If a native, upon examination, is found to have a physical defect he is given a note stating the nature of his disability and the possible jobs for which he may be fitted. This note he hands to the responsible officer at the Reception Depot, who then endeavours to find suitable employment for him.

Severely crippled or disabled natives are referred to the Native Commissioner who arranges for them to receive pensions according to their disabilities. Disability pensions have been in existence for about three years and although they are of great assistance to disabled natives, it is still felt that where possible they should be placed in suitable, and if necessary, sheltered employment. It is hoped that this will be done when the Employment Bureau receives the necessary publicity and support from the public.

LOCATION MEDICAL SERVICES.

Native Medical Services Clinics are held at the Compound Hospital in Proes Street, Atteridgeville Location and at Bantule. These clinics are conducted at various times of the day in order that they may be convenient for those seeking medical advice and attention.

The following table reflects the number of visits made at these clinics during the year under review, as compared with those for the previous year. The service at Bantule was only commenced at the beginning of 1947 as will be seen from the table below:

| | Compound Hospital. | | Atteridgeville. | | Bantule. | |
|--------------|--------------------|---------|-----------------|---------|----------|---------|
| | 1946-47 | 1945-46 | 1946-47 | 1945-46 | 1946-47 | 1945-46 |
| July | 136 | 140 | 610 | 291 | — | — |
| August .. . | 114 | 128 | 227 | 346 | — | — |
| September .. | 146 | 158 | 475 | 330 | — | — |
| October .. . | 100 | 178 | 468 | 284 | — | — |
| November .. | 98 | 143 | 520 | 371 | — | — |
| December .. | 87 | 98 | 462 | 283 | — | — |
| January .. . | 116 | 94 | 365 | 291 | 3 | — |
| February .. | 104 | 84 | 294 | 296 | 2 | — |
| March .. . | 107 | 116 | 431 | 335 | 2 | — |
| April .. . | 87 | 153 | 540 | 352 | 35 | — |
| May .. . | 90 | 112 | 412 | 395 | 31 | — |
| June .. . | 72 | 148 | 361 | 273 | 59 | — |
| | 1,257 | 1,552 | 5,165 | 3,847 | 132 | — |

COMPOUND HOSPITAL RETURNS.

The Assistant Medical Officer of Health attends at the Compound Hospital, Proes Street, where out-patient services are provided for Non-Europeans in the service of the City Council. The following are the details of the work carried out there:—

| | 1946-47 | 1945-46 |
|--|---------|---------|
| Number of Natives injured on duty and treated at Compound Hospital .. | 293 | 526 |
| Number of Natives injured on duty and sent to General Hospital | 90 | 50 |
| Number of Natives injured off duty and treated at Compound Hospital .. | 818 | 509 |
| Number of Natives injured off duty and sent to General Hospital | 116 | 86 |
| Number of sick Natives treated at Compound Hospital | 2,045 | 1,895 |
| Number of sick Natives sent to General Hospital | 161 | 124 |
| Total number of Natives seen by Doctor at Compound Hospital | 3,412 | 2,747 |
| Total number of attendances at Compound Hospital | 11,684 | 11,606 |

ABATTOIR AND MEAT SUPPLIES.

The improvement in supplies of slaughter stock noted last year continued during the year under review. There was a slight increase in the number of cattle and an appreciable increase in numbers of sheep (65%), while supplies of pigs declined about 20%.

The following graphs show the number of cattle and sheep (including goats), respectively, killed monthly for the year 1943/44, (the last year preceding the Meat Control Scheme), and for the three years since the Scheme has been in operation, 1944/45, 1945/46, 1946/47 and also the monthly averages.

Graph I.—Cattle. Graph II.—Sheep.

Variation in Supplies.

The most startling feature in both graphs is the enormous monthly variation during the three years under the Control Scheme. This is particularly noticeable in the case of sheep, monthly supplies varying from 1,800 to 13,000. In the case of cattle the maximum variation was between 1,200 to just under 6,000. The effect of this on meat supplies is evident, periods of acute shortage alternating with periods of full supplies and even occasional periods of glut. Mutton, in spite of an increase of 65%, remained in short supply and even at the peak during August never reached the pre-control level.

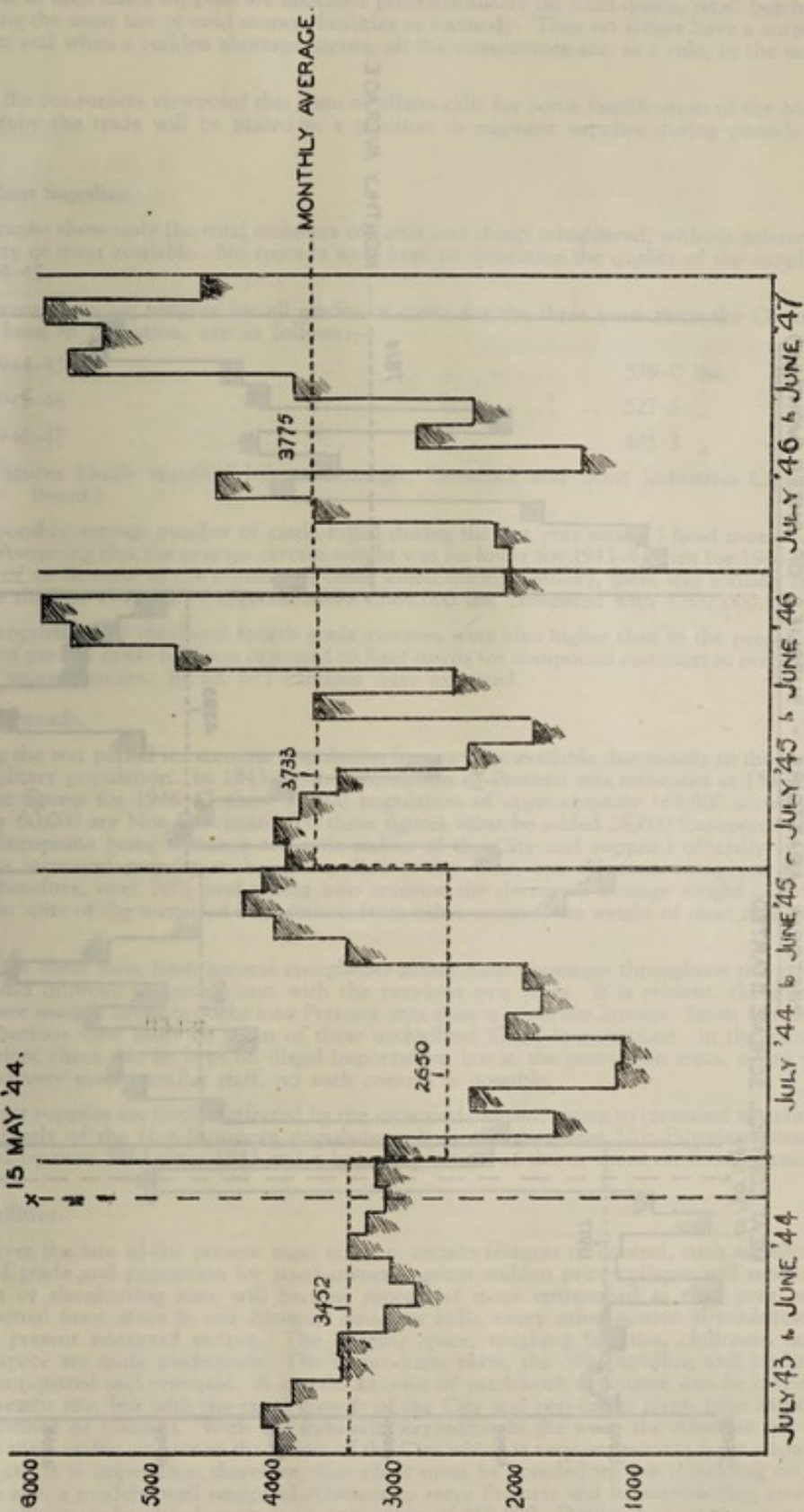
This variation in the flow of stock to the Abattoir is an inherent feature of the Meat Scheme, as it is no longer the meat trader who knows the demand, but the farmer, who does not know and is not concerned, who decides when and where the stock shall be marketed.

Before the Scheme came into operation the meat traders, principally the large wholesalers, could overcome seasonal shortages by buying their requirements outside, if necessary, even at uneconomic prices. That also acted as an inducement to farmers to feed stock for the late winter and early spring prices. At present in spite of graded prices and due to the inflated price of cattle feed, there is not sufficient such inducement. Stock is, generally speaking marketed when it is ready and there is less tendency to keep stock for the higher seasonal prices, as there is no fear of a complete slump of prices in a glutted market.

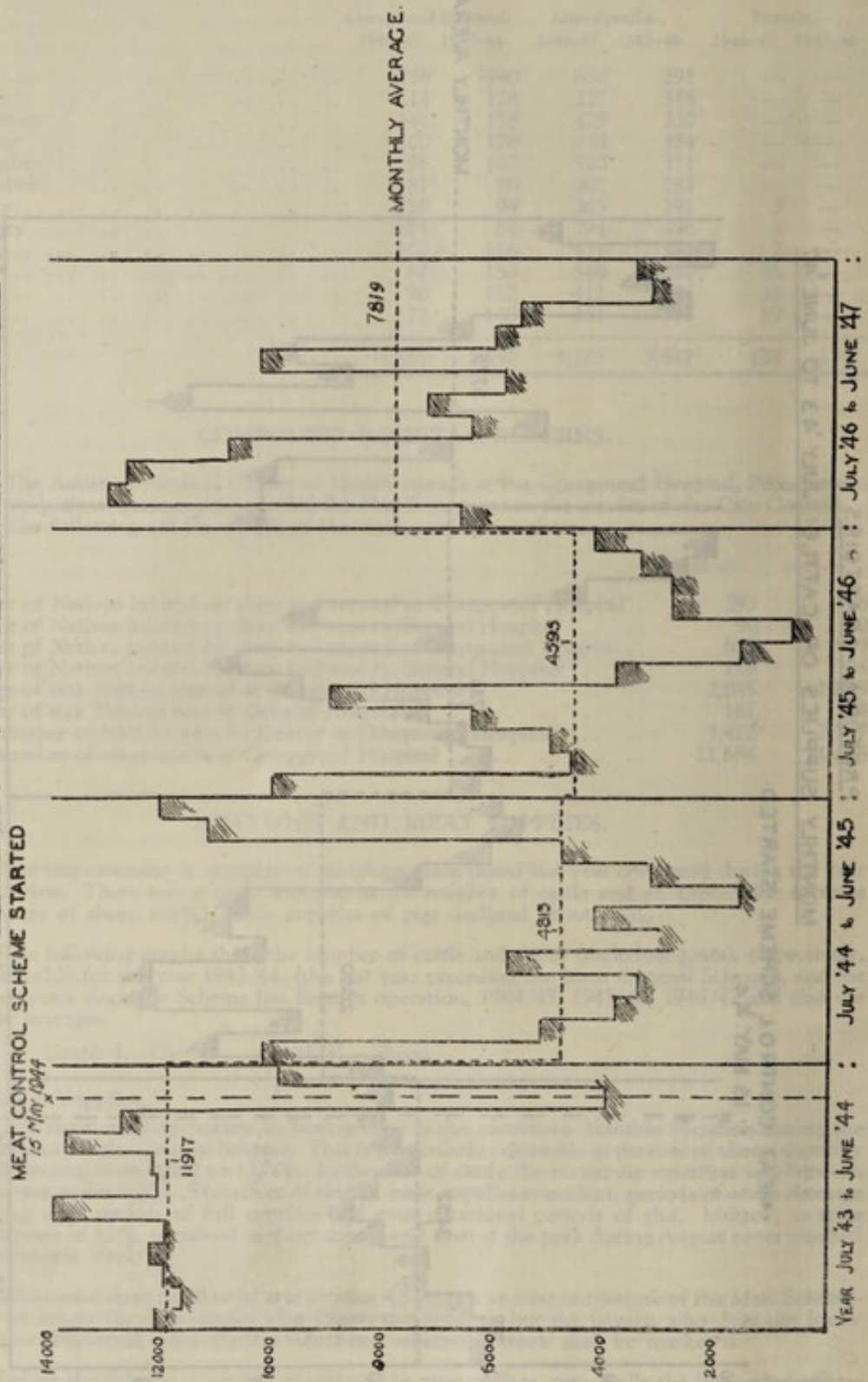
PRETORIA ABATTOIRS

MONTHLY SUPPLIES OF CATTLE: JULY '43 TO JUNE '47

MEAT CONTROL SCHEME STARTED
15 MAY '44.



PRETORIA ABATTOIRS - SUPPLIES OF SHEEP (MONTHLY)



Apart from the monthly variations, there are also even more striking daily and weekly variations, but as each day's supplies are allocated proportionately on fixed quota, retail butchers are not making the same use of cold storage facilities as formerly. They no longer have a surplus meat problem and when a sudden shortage occurs, all the competitors are, as a rule, in the same position.

From the consumers viewpoint this state of affairs calls for some modification of the Meat Scheme whereby the trade will be placed in a position to augment supplies during periods of shortage.

Quality of Meat Supplies.

The graphs show only the total numbers of cattle and sheep slaughtered, without reference to the quantity of meat available. No records were kept to determine the quality of the supplies prior to 1944-45.

The average carcass weights for all grades of cattle for the three years since the Control Scheme has been in operation, are as follows:—

| | |
|-----------------|------------|
| 1944-45 | 539.0 lbs. |
| 1945-46 | 527.5 „ |
| 1946-47 | 485.3 „ |

(Figures kindly supplied by the Manager, Livestock and Meat Industries Control Board.)

The monthly average number of cattle killed during the last year was 323 head more than in 1943-44. Assuming that the average carcass weight was no lower for 1943-44 than for 1944-45, then in spite of an increase in the number of cattle killed during 1946-47, there was actually less beef available than in 1943-44. (Approximately 1,864,000 lbs. compared with 1,832,000.)

The proportions of third and fourth grade carcasses were also higher than in the preceding years. Some of the low grade beef was exported to Reef towns for compound contracts in exchange for first and second grades. In all, 675 carcasses were exported.

Consumer Demands.

During the war period no accurate population figures were available due mostly to the large fluctuating military population. In 1943-44 the population of Pretoria was estimated at 153,000. More accurate figures for 1946-47 show a total population of approximately 163,800 of whom approximately 60,000 are Non-European. To these figures must be added 28,000 Europeans and 75,000 Non-Europeans being within a ten mile radius of the City and supplied officially from Pretoria. The increased population being supplied to-day from our Abattoir compared with 1943-44 is, therefore, over 70% and taking into account the decreased average weight of beef carcasses and in spite of the increased importation from other centres, the weight of meat available was smaller.

Although there have been general complaints about meat shortages throughout the year, the position did improve in comparison with the previous two years. It is evident, therefore, that much more meat is being brought into Pretoria area than is generally known. From a health standpoint a serious view must be taken of these undoubted illegal importations. In the urban area a fairly close check can be kept on illegal importation, but in the peri-urban areas, owing to the extent and very much smaller staff, no such control is possible.

The meat supplies are further affected by the increased demand owing to increased spending power, particularly of the Non-European population. It is estimated that Non-European wages have increased by over 50M since 1943 and a large proportion of this is spent on food, particularly meat.

Abattoir Facilities.

Whatever the fate of the present meat scheme, certain features of control, such as selling by weight and grade and protection for stock-owners against sudden price collapse will remain. Centralization of slaughtering also, will become more and more entrenched as time goes on. Apart from actual floor space in our Abattoir slaughter halls, every other section is inadequate even for the present restricted output. The hanging space, weighing facilities, chillroom and refrigeration space are quite inadequate. The by-products plant, the offal handling and loading facilities are antiquated and cramped. A certain amount of patchwork expansion can be carried out on the present site, but with the rapid growth of the City and peri-urban areas, large capital expenditure cannot be justified. With the industrial expansion in the west, the Abattoir site is on one of the main traffic arteries to the centre of the City which is very undesirable from a town planning aspect. It is imperative, therefore, that plans must be speeded up for rebuilding on a more suitable site, a modern well equipped Abattoir to serve Pretoria and its surrounding areas. The present facilities are barely adequate for a population of 160,000. During the year the average allocation of meat was about 75% and nearly 38% of the beef and over 6% of the mutton issued was imported from other centres. Together with the peri-urban areas for which provision must also be made, the present population is well over 260,000.

ANNUAL STATISTICS.

Animals Slaughtered.

| | Oxen. | Cows. | Bulls. | Calves. | Sheep. | Goats. | Pigs. | Total. |
|------------------------------|--------|-------|--------|---------|--------|---------|---------|---------|
| | 39,993 | 5,310 | 60 | 4,026 | 93,179 | 650 | 20,473 | 163,630 |
| | | | | | | 1946-47 | 1945-46 | |
| Total Cattle.. | | | | | | 45,303 | 44,802 | |
| Sheep and Goats.. | | | | | | 93,828 | 56,676 | |
| Calves .. | | | | | | 4,026 | 3,428 | |
| Pigs .. | | | | | | 20,473 | 25,626 | |
| Total Animals Slaughtered .. | | | | | | 163,630 | 130,523 | |

Carcases, Organs, etc. Condemned.

| | Carcases. | Quarters. | Livers. | Lungs. | | | |
|-----------------------|-----------|------------------------|----------|----------|----------|-----------|-------------|
| Cattle | 946 | 28 (208·842 tons beef) | 5,551 | 542 | | | |
| Calves | 131 | — (2·54 tons veal) | — | — | | | |
| Sheep and Goats | 80 | 15 (1·153 tons mutton) | 8,577 | 564 | | | |
| Pigs | 1,285 | 4 (50·515 tons pork) | 5 | — | | | |
| | | | | | | | |
| | Plucks. | Heads. | Tongues. | Heartts. | Kidneys. | Tripes. | Intestines. |
| Cattle | 387 | 164 | 95 | 25 | 33 | 12 | 14 |
| Calves | — | — | — | — | — | — | — |
| Sheep and Goats | 639 | — | — | — | — | — | 17,288 |
| Pigs | 258 | 325 | 223 | — | — | — | — |
| | | | | | | | |
| | | | | Tails. | | Visceras. | |
| Cattle | | | | 16 | | 3,917 | |

Imported Meat Examined.

| | Carcases. | Beef Quarters. | Sheep. | Pigs. | Calves. |
|--------------|-----------|--------------------|--------|-------|---------|
| | 17,231 | 81 | 6,197 | 30 | — |
| Condemned .. | 2 | 6 qrs. 436 lbs. | — | 1 | — |

Detained for Cold Storage Treatment: 14 Carcases. 6 Quarters.

Percentage of Carcases condemned for all diseases as follows:—

| | 1945-46. | 1946-47 |
|-------------------|----------|---------|
| Cattle .. | 1·984% | 2·088% |
| Calves .. | 2·304% | 3·253% |
| Sheep and Goats.. | 0·128% | 0·085% |
| Pigs .. | 8·861% | 6·271% |

Diseases.

Tuberculosis amongst cattle, calves and pigs:—

| | | |
|-------------------------------|--------|---------|
| Cattle affected (89 cases) .. | 0·196% | (0·252) |
| condemned .. | 0·108% | (0·170) |
| localised cases .. | 0·088% | (0·066) |
| Calves affected (1 case) .. | 0·025% | |
| Pigs affected (421 cases) .. | 2·056% | (2·356) |
| condemned .. | 0·448% | (0·651) |
| localised cases .. | 1·608% | (1·751) |

Cysticercosis amongst cattle, calves and pigs:—

| | | |
|----------------------------------|--------|---------|
| Cattle affected (3,152 cases) .. | 6·953% | (6·403) |
| condemned .. | 1·068% | (1·127) |
| detained .. | 5·885% | (5·276) |
| Pigs affected (1,492 cases) .. | 7·287% | (7·882) |
| condemned .. | 5·529% | |
| detained .. | 1·758% | |

| | Cattle. | Calves. | Sheep. | Goats. | Pigs. |
|--|--------------|---------|--------|--------|--------|
| Actinomycosis | 66 Localised | — | — | — | 1 |
| Abscesses | 1 Qr. | — | 2 | — | — |
| Bruising | 19 Qrs. | — | 1 Qr. | — | — |
| Caseous Lymphadenitis | — | — | 37 | — | — |
| Defective Bleeding | 23 | — | 6 Qrs. | — | — |
| Defective Bleeding and Measles | 1 | — | 6 | — | — |
| Decomposition | 641 lbs. | — | — | — | — |
| Emaciation | 181 | 21 | 10 | 34 | — |
| Emaciation and Tuberculosis .. | 1 | — | — | — | — |
| Emphysema | 9 | — | — | — | — |
| Extensive Bruising | 4 Qrs. | — | — | — | — |
| Extensive Bruising and defective bleeding | 35 | — | — | — | 1 |
| Extensive Erythema | 4 Qrs. | — | — | — | 4 Qrs. |
| Enteritis | 1 | — | — | — | — |
| Follicular Mange | — | — | — | — | 1 |
| Fevered | — | — | — | — | 2 |
| Gangrene | — | — | — | — | 3 |
| Hepatitis | 1 | — | — | — | — |
| Immaturity | 23 | — | — | — | 2 |
| Jaundice | 1 | — | — | — | — |
| Joint Ill | 6 | 30 | — | — | — |
| Malignant Tumours | 3 | 1 | 4 | — | 2 |
| Moribund | 1 | — | — | — | — |
| Multiple Abscesses | 2 | — | — | — | — |
| Multiple Abscesses and Tumours | 1 | — | 3 | — | — |
| Multiple Abscesses and Bruising | 5 | 2 | 3 | — | 4 |
| Navel-ill | 1 | — | — | — | — |
| Orchitis | — | 65 | — | — | — |
| Pleurisy | — | — | — | — | 4 |
| Pleurisy and Onchocerca | 3 | — | — | — | — |
| Peritonitis | 48 lbs. | — | — | — | — |
| Pleurisy and Peritonitis | 23 | 1 | — | — | 2 |
| Pyæmia | 59 | — | — | — | — |
| Septic Mastitis | 4 | 2 | — | — | — |
| Septic Metritis | 6 | — | — | — | 1 |
| Septic Pericarditis | 3 | — | — | — | — |
| Septic Pleurisy | 2 | — | 1 | — | — |
| Septic Pneumonia | 1 | — | — | — | — |
| Septic Pneumonia and Pleurisy | 17 | 5 | 3 | 1 | 4 |
| Uraemia | 1 | — | — | — | — |
| | 412 | 130 | 69 | 11 | 61 |
| | 8 Qrs. | | | | 4 Qrs. |

Inspection of Butcher Shops.

All butcher shops were regularly inspected as a follow-up inspection and also a check on meat being imported and sold without first being submitted for inspection and stamping at the City Abattoir.

Condemnations.

Bruising.—Records were kept of the weight of carcasses and portions condemned; in all, over 208 tons of beef and over 50 tons of pork were condemned. While the bulk of this loss of food was due to disease, in the case of beef a considerable amount was caused by bruising which was to a large extent avoidable. Severe bruising entailing large scale condemnation is due to two main causes, horn injuries and poor condition of the animals.

However both farmers may be to dehorn Afrikaner and Native type cattle, on account of appearance or for draught purposes, intensive propaganda and, if necessary, compulsion should be applied to ensure dehorning. It is rare even among horned cattle to find extensive bruising in well-nourished cattle. The emaciated animals are always attacked and frequently trampled in trucks. Such animals, if it is at all necessary to send them for slaughter, should be trucked separately.

Tuberculosis.—The incidence of tuberculosis was appreciably lower for both cattle and pigs than the preceding year. The lower number of cases seen may have been caused by the fact that losses are to a greater extent now being borne by the stock-owner, particularly in the case of pigs, where no compensation is paid. The improved prices for pork since the introduction of the meat scheme has also encouraged better methods of breeding and feeding. In the case of cattle, full compensation for carcasses condemned for tuberculosis is paid, except for cows where no compensation is paid.

Cysticercosis.—The incidence of this disease was slightly higher in cattle and slightly lower in pigs than the previous year. Unless farmers are made to feel the monetary losses from this disease more severely than at present, drastic measures are not likely to be applied on farms in order to diminish the incidence of this disease. Under the present system of compensation, the monetary loss to the stock-owner is less than 1%.

Abattoir and Livestock Market Revenue.

The livestock market revenue dropped appreciably during the year, mainly due to the cancellation of the veterinary inspection fees, which amounted to approximately £1,250 during the previous year. Under abattoir revenue, Council decided for reasons of policy to cancel the Public Slaughter fees which brought in £3,280 for the previous year. Over and above this, expenditure increased by approximately £2,000. Revenue was increased in the following manner:—

| | |
|---|-------|
| (a) Increased chillroom and tripery rentals | £550 |
| (b) Increased yield from inspection fees as a result of increased supplies of slaughter stock | 2,000 |
| (c) Increased income from by-products | 2,600 |

The comparative figures are as follows:—

| | 1945-46. | | | 1946-47. | | |
|--------------------------|----------------|-----------|----------|----------------|-----------|----------|
| Livestock Market | £5,398 | 5 | 5 | £3,550 | 1 | 0 |
| Abattoir | £31,418 | 11 | 4 | £33,415 | 18 | 1 |
| TOTAL | £36,816 | 16 | 9 | £36,965 | 19 | 1 |

DAIRIES AND MILK CONTROL.

During the period July, 1946, to June, 1947, 226 dairy licenses were issued for dairy premises concerned with the fluid milk trade in the Pretoria Municipal area. Of this number 153 licences were issued to dairy farmers, that is, solely producers outside the area to introduce and deliver to dairies and milk depots in the City, while 73 were licences issued to dairies and depots concerned with the sale and distribution of milk. Of the latter number, 62 were distributors licences while 11 were producer-distributor's licences for premises eight of which are in the urban area and three within 20 miles from the City. Eight producer-distributors, who between them handle approximately 400 gallons of milk daily, still exist in the suburbs.

Application for licences for 24 new producers and producer-distributors premises were approved, 18 existing producers licences were surrendered, the renewal of four existing producers licences were refused, one producer-distributor's licence was surrendered, which means an increase of one licence of the number issued for the previous year.

The total daily gallonage consumed in the City is estimated at 16,200 gallons. 2,600 gallons of pasteurized milk are still being introduced daily into Pretoria from Johannesburg. Of this amount 2,500 gallons are introduced by local dairymen under permit issued by this Department and 100 gallons are introduced by school authorities to school premises. These schools are situated inside the City, but on Provincial Administrations property, and there is this strange legislation in South Africa which does not give the local authority the right of entry and control over such premises.

Although the children are nearly all Pretoria residents and leave the school premises after school hours for their homes, this Department has no control over the milk issued to them whilst they are at school. This matter was reported to the Union Health Department more than a year ago and the Secretary for Health is still negotiating with the provinces in order to have it rectified as he realises that it is essential that the local authority concerned controls such milk supplies.

Four hundred gallons are derived from producer-distributors and the main supply namely 13,200 gallons derived from licensed rural producers. The dairy farms are situated as follows:—

| | |
|---------------------------------------|------------|
| Within 20 miles from the City | 78 |
| Within 20-30 miles | 39 |
| Beyond 30 miles | 36 |
| TOTAL | 153 |

It is estimated that there are approximately 11,900 milk cows kept at the dairies where milk is produced. 1,195 Persons are employed at these dairies, of whom 211 are European and 984 non-Europeans. Of the total amount of milk produced on dairy farms and by producer-

distributors, 7,600 gallons are delivered to three dairies where all the milk is pasteurized, while 6,000 gallons are still being sold as raw milk. The estimated total gallonage of pasteurized milk consumed daily in the Municipal area is approximately 10,200 gallons which is 62.9 per cent. of the total daily milk supply of the City.

Control of Dairies.

The premises of milk distributors in the Municipal area were inspected regularly. Advice was given and action taken where necessary to ensure the hygienic handling of milk. The number of visits paid to milk depôts and milk shops by the Health Inspectors during the year was 1,428. The routine inspections of dairy premises on farms and the urban producer-distributors premises was carried out by the Council's two Veterinary Officers and three full-time dairy inspectors. This staff controls the hygiene of milk production and advises dairy farmers in regard to the construction of premises and methods of milk production. 2,143 inspections of dairy farms were carried out. 644 Unsatisfactory conditions were dealt with on the spot with the farmers concerned at the time of inspection and 105 notices were served in connection with health contraventions. Following on reports of unsatisfactory bacteriological or chemical analysis, of milk samples taken letters and notices were addressed to dairymen detailing the Department's requirements and wherever necessary these were followed up by inspections and advice.

During the year 22,273 milk samples, 154 ice cream samples, ten water samples taken at farm dairies and four fresh cream samples were tested. Details of the number of samples taken for the various tests are as follows:—

1. Bacteriological examination.
 - (a) Plate counts 401 milk samples, ten water samples and 53 ice cream samples.
 - (b) Breed smear counts 16,347 milk samples.
 - (c) Mastitis examination 1,068 milk samples.
 - (d) Presumptive coliform tests 2,313 milk samples.
2. Chemical analysis 391 milk samples and four fresh cream samples.
3. Disc sediment tests for visible dirt 641 milk samples.
4. Phosphatase tests for pasteurized milk 1,112 milk samples.

The following are the results of the various tests conducted:—

1. Bacteriological Examination.

- (a) *Plate Counts.*—The Municipal standard under the Dairy By-laws allows not more than 200,000 micro-organisms per millilitre and no *B. coli* in .01 millilitre for fresh milk and in the case of ice cream the standard adopted is the same. The plate count method is still the official method used for determining the bacterial content of milk and the quality is judged in terms of the above standard.

Milk.

| | |
|--|-----|
| Number of samples taken | 401 |
| Number which conformed to the legal standard | 286 |
| Number which contained excess micro-organisms (warnings issued) | 67 |
| Number which contained excess micro-organisms (prosecuted) | 5 |
| Number which contained excess <i>B. coli</i> (warnings issued) | 23 |
| Number which contained excess <i>B. coli</i> (prosecuted) | Nil |
| Number which contained excess micro-organisms and <i>B. coli</i> (warnings issued) | 13 |
| Number which contained excess micro-organisms and <i>B. coli</i> (prosecuted) | 7 |
| Total number of warnings issued | 103 |
| Total number of prosecutions | 12 |

Ice Cream.

| | |
|---|----|
| Number of samples taken | 53 |
| Number satisfactory | 38 |
| Number unsatisfactory (warnings issued) | 14 |
| Number unsatisfactory (prosecuted) | 1 |

Water.

Ten water samples were taken at dairies on farms where the water supplies were suspected to be unsuitable. All these samples proved to be unsuitable, the owners were advised and subsequently suitable water supplies were provided in all cases.

- (b) *Breed Smear Counts*.—16,347 Milk samples were examined microscopically during the year and are classified as follows according to the bacterial counts:—

| | |
|--------------------------|-------|
| Very good | 9,319 |
| Good | 1,476 |
| Fair | 2,564 |
| Not satisfactory | 2,988 |

(NOTE.—This classification is on purely arbitrary standards used as a yard stick by the Department. There are no "standards" laid down in South Africa for breed clump counts.)

- (c) *Mastitis Examination*.—1,068 Milk samples taken from individual cows at dairies were microscopically examined for Mastitis and the owners advised of the results. During the year the examination of milk samples of all the cows in four herds was undertaken. This was repeated at intervals. Advice was given to farmers and treatment undertaken. In this manner the disease has been completely eradicated in one herd, and in the other herds examined results have been very promising.
- (d) *Presumptive Coliform Tests*.—2,313 Samples of pasteurized milk were tested for the presence of presumptive coliform organisms in one millilitre. Of this number 1,432 samples were negative, and 881 were positive.

2. *Chemical Analysis*.—(Samples taken under Food, Drugs and Disinfectants Act No. 13 of 1929.)

Milk.

| | |
|---|-----|
| Number of samples taken | 391 |
| Satisfactory | 93 |
| Unsatisfactory: | |
| Deficient in fat and solids not fat | 7 |
| Deficient in milk fat | 10 |
| Deficient in solids not fat | 255 |
| Bad: | |
| Deficient in fat and solids not fat | 9 |
| Deficient in milk fat | 8 |
| Deficient in solids not fat | 2 |
| Adulterated | 10 |
| Prosecutions and convictions | 29 |

Of 391 milk samples submitted for chemical analysis 93 or 23·8 per cent. conformed with the legal standard of 3 per cent. butterfat and 8·5 per cent. solids-not-fat. 298 or 76·2 per cent. were not up to standard. Twenty-nine of the latter number of 7·4 per cent. of the total number of samples taken were regarded as so far below the required standard that prosecutions were instituted. 255 Of the remaining 269 were practically all only slightly below the standard for solids-not-fat only.

These figures and the figures for previous years are very striking. Very little is known of the reasons why in South Africa generally the solids-not-fat content of milk falls below the average of other countries. The dairy farmer is faced with a problem, which under present conditions, appears difficult to eliminate.

Fresh Cream.

Four fresh cream samples submitted for analysis were all up to the legal standard.

3. *Disc Sediment Tests for Visible Dirt.*

| | |
|----------------------------------|-----|
| Number of samples taken | 641 |
| Number satisfactory | 330 |
| Unsatisfactory: Warnings | 214 |
| Bad: Severe warnings | 60 |
| Final warnings | 33 |
| Prosecutions | 4 |

4. *Phosphatase Tests for Pasteurized Milk.*

| | |
|---|-------|
| Number of samples tested | 1,112 |
| Number satisfactorily pasteurized | 955 |
| Number slightly under pasteurized | 92 |
| Number grossly under pasteurized | 65 |

Samples of pasteurized milk were taken daily throughout the year at the dairies where milk is pasteurized for phosphatase and presumptive coliform tests. Whenever unsatisfactory results were obtained, immediate steps were taken to ascertain the cause and to ensure proper pasteurization.

TYPHOID TESTING OF DAIRY EMPLOYEES.

The typhoid testing of dairy personnel is still being conducted under the City Council's voluntary scheme. 677 Persons employed in dairies were tested for the typhoid fever carrier state. During the previous year 657 tests were undertaken. 55 Tests of which seven were for European and 48 for non-European, were positive for the Vi agglutination test and the persons concerned have been excluded from employment in the dairy or any other food handling trade. 5,235 Dairy employees have been tested since the inception of the typhoid testing scheme.

ANIMAL POUNDS AND DIPPING TANKS.

Three animal pounds, two of which are in the suburbs and one in the central area and two dipping tanks in the suburbs, are controlled by the Health Department. Details of the animals impounded, animals dipped and the fees collected are as follows:—

| | Number of Animals Impounded. | Pound Fees and Sales. | Dipping Fees. | Number of animals Dipped. |
|---------------------------------------|------------------------------------|--------------------------|------------------|------------------------------|
| Hatfield Pound and Dipping Tank | 77 | £25 16 9 | £6 6 5 | 587 |
| West End Pound | 1,021 | 206 15 3 | — | — |
| Mayville Pound and Dipping Tank.. .. | 921 | 122 12 4 | 6 12 8 | 563 |
| TOTAL | 2,019 | £355 4 4 | £12 19 1 | 1,150 |

RECORD OF WORK OF HEALTH INSPECTORS.

During the year the staff had difficulty in coping with the increased volume of work in an endeavour to maintain a sufficiently high standard of hygiene throughout the City. Difficulties have also been experienced in obtaining the services of a sufficient number of experienced Inspectors. On two occasions during the year we invited applications for positions of First Grade Health Inspectors, and on both occasions there were very few candidates, and most of those who did apply were not in possession of the required qualifications.

It has been noticed that numerous other local authorities have also advertised for Health Inspectors and in the majority of instances the salaries offered in relation to the qualifications required were higher than in Pretoria. The position in Pretoria is that it is becoming a stepping stone for Junior Inspectors and that, after gaining a little experience they resign to take up similar employment in other towns on a higher salary grade. This continuous change of staff seriously affects the efficient working of the Department. In order to fall in line with other major local authorities the existing grading scheme should be revised.

Because of the large number of inexperienced Inspectors on the present staff and the rapid rate of increase in the work, it was thought advisable to increase the staff of some of the specialised sections, viz., Food Control, Pest Control and the Slum Section, by attaching additional experienced District Inspectors to each section. This assists the District Inspectors in gaining experience more rapidly from guidance and more direct supervision of seniors.

There still exists one vacancy on the Inspectorial Staff, and for efficient working of the Department additional staff will be required in the near future. The work of the Department has been hindered, in that it has been found difficult to enforce improvements to many premises owing to shortage of houses and building materials and because of the difficulty in obtaining labour. Despite all this, the Department has been able to maintain satisfactory hygienic conditions throughout the City.

Some of the activities of the Inspectorial staff during the period under review are set out as follows:—

| | |
|--|--------|
| Total inspections made | 53,702 |
| Nuisances dealt with | 15,597 |
| Nuisances abated. (This includes unabated nuisances carried over from previous year) | 12,292 |
| Complaints dealt with | 2,768 |
| Licences approved | 2,809 |
| Licences refused | 156 |
| Samples of water taken | 135 |
| Samples of foodstuffs taken | 230 |
| Visits of enquiry re infectious diseases | 2,212 |

Nuisances Detected and Referred to other Departments:

| | |
|---|-----|
| 1. To the City Engineer | 446 |
| 2. To the Manager, Native and Asiatic Administration Department | 151 |
| 3. To the Chief Licence Officer | 95 |
| 4. To the Director of Parks | 29 |
| 5. To the City Electrical Engineer | 16 |
| 6. To the Chief Traffic Officer | 16 |
| 7. To the Firemaster | 2 |
| 8. To the Town Clerk | 1 |
| 9. To the Housing Manageress | 1 |

Prosecutions:

Prosecutions of contraventions of the Food, Drugs and Disinfectants Act and the Municipal By-laws were undertaken and 98 convictions obtained. Fines amounting to £321 10s. 0d. were imposed.

PEST CONTROL.

In February, 1947, the Inspectorial Staff of the Department was reorganised with the result that this section received two additional Inspectors. Most matters appertaining to the control of pests are attended to by this section. The additional staff has been of great assistance to the Pest Control Inspector in charge, making it possible for him to concentrate on the more important side of the work, leaving complaints and certain routine inspections to be dealt with by the two additional inspectors as well as the District Inspectors.

ANTI-MALARIA CONTROL.

Anti-mosquito measures were continued throughout the year, particular attention being paid to the drainage of swampy areas, removal of grass and the straightening and grading of existing spruets and water courses, in order to eliminate as far as possible all breeding grounds. Seepage water is continually draining into certain sections of spruets, where it tends to stagnate

in small pools, as there is not sufficient volume to cause a flow. Cattle and other animals frequently tramp through these water courses, and in this manner ideal breeding places for one of the vectors of malaria are provided. It is therefore considered essential that the canalisation of the larger spruils be undertaken at the earliest opportunity, in order to minimise the ever-increasing threat of malaria from the north.

Inadequate control of irrigation dams owned by market gardeners led to numerous complaints of mosquito nuisances from persons in the vicinity. The owners were approached with the request that they pay a small fee to the Council for its staff to clear the sides of the dams of weeds and provide for regular spraying with anti-larval oil during the summer months. It is gratifying to report that the majority of owners have agreed to this.

During the summer season, one European case of locally contracted malaria was notified. A survey for the Anophelene vector was made in the vicinity but no trace could be found.

No Anophelene (malaria vector) adult mosquitos were discovered in surveys conducted during the year. There were, however, some Anophelene larvae found in the Innesdale area.

RODENT ERADICATION.

The destruction of rodents on Municipal premises by means of trapping, poison baits and gassing has been continued throughout the year.

Owing to shortage of staff rodent destruction on private premises has been discontinued, except where it was considered essential.

A greater reduction of rodents in the City could be accomplished if more staff were appointed and their services made available to owners or occupiers of private and business premises, on payment of a reasonable fee to cover cost of labour and material. This, of course, would require regulations for control purposes re charges, etc.

A great deal of difficulty has been experienced in the past in connection with rodent infestation of adjoining buildings when demolition of premises is in progress. Through the kind co-operation of the Building Controller and Union Health Department it has now been arranged that no persons shall be permitted to demolish a building until a rodent-free certificate, which is issued by this Department to the Building Controller, has been submitted by him.

Strict control is kept over the erection of new grain and food stores as well as old establishments, in order to ensure that the rodent regulations are complied with.

Throughout the year many new rat poisons and traps were tested, and the Department is continually carrying out experiments in connection with rodent eradication.

OTHER PESTS.

Cockroaches.—D.D.T. solution has been used with success against cockroaches on municipal premises.

Ticks.—D.D.T. powder, Gammexane and a 5 per cent. solution of Phenol in paraffin have all been found to be useful in dealing with ticks.

Ants.—Ant infestation of the City Hall was successfully dealt with by the application of D.D.T. powder. In other cases Gammexane proved more effective as an anticide.

Bugs.—After lengthy deliberation and experimentation, the Department has been successful in instituting D.D.T. solution for treating bug-infested municipal premises; in fact hydrocyanic acid is hardly ever used at all.

EXPERIMENTS.

Flower containers at the cemeteries have afforded breeding places for mosquitos for many years and it has been difficult to deal effectively with this problem.

Very successful experiments were made by using cubes of Plaster of Paris soaked in D.D.T. solution. One pellet is added to the water in a normal size vase. This destroyed larvae for periods up to six weeks and it had no detrimental effect on the lasting quality of the flowers. It has been arranged with the Superintendent of Cemeteries that such pellets will be placed in the vases during the summer months at regular intervals.

The following experiments were also carried out:—

- (1) D.D.T. solution and sawdust in bottles, for anti-larval control in swampy areas.
- (2) D.D.T. solution in Malariol proved successful as an anti-larval spray.
- (3) D.D.T. Aerosol Bombs were very effective in adult catching stations.

FLIES.

Anti-fly measures were carried out throughout the year. Extensive propaganda was made through the Press and the public was asked to co-operate in the destruction of flies and the removal of possible breeding places from their own premises.

Fly swatters were supplied free to any member of the public who called for them at the Health Department.

A great deal of difficulty was experienced at the Mayville Nursery compost pits, where arsenite of soda baits were used with success. Compost pits generally, unless perfectly controlled, are likely to afford breeding places for flies. As a result of this the Council has agreed that the Director of Parks should centralise all his compost pits at one site at the Sewage Outfall Works. The site has already been selected in consultation with the Director of Parks and the Municipal Chemist and Analyst, and it is hoped that the pits will soon be completed.

FOODS (SUPERVISION OF).

(a) During the year the Department expanded further by the formation of a separate section for the inspection of food factories, stores and all premises where foodstuffs are prepared, stored and kept for sale. These include the following types of licensed premises:—

| | |
|--------------------------|-------------------------|
| Bakers and Confectioners | Food Purveyors |
| Butcheries | Fishmongers |
| Restaurants | Fruiterers |
| Hotels | Mineral Water Factories |
| Tearooms | Asiatic Tearooms |
| Native Eating Houses | Poulterers |

(b) Daily inspections of all produce on the early morning Municipal Market were carried out and the following quantities of vegetables and fruit were condemned:—

| | |
|------------------------------------|----------------|
| Baskets | 152 |
| Trays | 405 |
| Bags | 1,475½ |
| Sugar Bags | 57 |
| Pockets | 5,759 |
| Punnets | 508 |
| Crates | 126 |
| Boxes | 8,139 |
| Total number of containers | <u>16,631½</u> |

INSPECTION OF LIVE AND DRESSED POULTRY AND GAME ON THE PRODUCE MARKET.

(1) Live Poultry:

| | |
|------------------------------|--------|
| Number examined | 99,084 |
| Number condemned | 528 |
| Percentage condemned | 0.53 |

(2) Dressed Poultry:

| | |
|------------------------------|-------|
| Number examined | 8,204 |
| Number condemned | 501 |
| Percentage condemned | 6.10 |

(3) Game:

Buck—

| | |
|------------------------------|-------|
| Number examined | 1,205 |
| Number condemned | 126 |
| Percentage condemned | 10.45 |

Guinea Fowl—

| | |
|------------------------------|-------|
| Number examined | 1,252 |
| Number condemned | 212 |
| Percentage condemned | 16.93 |

Guinea Pigs and Rabbits:

| | |
|------------------------------|-------|
| Number examined | 189 |
| Number condemned | 42 |
| Percentage condemned | 22.22 |

(c) The following unsound foodstuffs were condemned:—

| | |
|--|--------|
| (i) Tins, bottles and cartons foodstuffs | 29,172 |
| (ii) Bags Coffee | 187 |
| (iii) Fish and Prawns lbs. wt. | 10,257 |

The following samples were taken for bacteriological and chemical examination, which include routine samples of water taken from the City's water supply (Rietvlei dam) and the municipal swimming baths:—

CHEMICAL.

| Number of Samples Taken. | Nature of Article. | Satisfactory. | Unsatisfactory. |
|--------------------------|--------------------------|---------------|-----------------|
| 1 | Tomato Sauce | — | 1 |
| 33 | Sausages | 28 | 5 |
| 36 | Minced Meat | 34 | 2 |
| 2 | Skim Milk Cheese | 2 | — |
| 6 | Cream Cheese | 6 | — |
| 5 | Boermeal | 5 | — |
| 1 | Rice | 1 | — |
| 1 | Mealie Meal | 1 | — |
| 12 | Coffee | 6 | 6 |
| 49 | Ice Cream | 32 | 17 |
| 1 | Milk | — | 1 |
| 7 | Sugar | 7 | — |
| 10 | Bread | 10 | — |
| 4 | Cream | 4 | — |
| 4 | Honey | 4 | — |
| 3 | Dripping | 3 | — |
| <u>175</u> | | <u>143</u> | <u>32</u> |

BACTERIAL.

| Number of Samples Taken. | Nature of Article. | Satisfactory. | Unsatisfactory. |
|--------------------------|--------------------|---------------|-----------------|
| 54 | Ice Cream | 39 | 15 |
| 1 | Ice | 1 | — |
| 135 | Water | 115 | 20 |
| <u>190</u> | | <u>155</u> | <u>35</u> |

The above figures show a considerable increase over the number of samples taken in previous years.

(d) The Staff of this section at present consists of three health Inspectors, who are assisted by the District Health Inspectors [except for duties referred to in paragraphs (b) and (c)]. In order to carry out the inspection of all foodstuffs more effectively it will be necessary to increase the staff of this section.

LICENSED PREMISES.

| | City. | Location. |
|---|-------|-----------|
| Bakers and Confectioners | 25 | 4 |
| Butchers | 73 | 13 |
| Restaurants | 103 | 8 |
| Hotels | 17 | — |
| Tea Rooms | 57 | 16 |
| Native Eating Houses | 8 | 4 |
| Provision Dealers | 191 | 126 |
| Fishmongers | 8 | — |
| Fresh Produce Dealers (market sheds 55) | 211 | 83 |
| Bioscope Tea Rooms | 2 | — |
| Hawkers and Pedlars | 84 | 129 |
| Mineral Water Factories | 3 | — |
| Grain Millers | 4 | — |
| Boarding and Lodging Houses | 356 | — |
| Launderers and Wash Houses | 7 | 10 |
| Public Halls and Theatres | 17 | 3 |
| Asiatic Tea Rooms | 1 | — |
| Billard Rooms | 2 | 2 |
| Poulterers | 12 | — |
| Second-hand Dealers | 20 | 1 |

SANITARY AND RUBBISH SERVICES.

Removal services are compulsory and are carried out daily or bi-weekly, according to requirements. At the close of the year 30th June, 1947, the number of rubbish removal services being carried out was:—

| | |
|--|--------|
| City and Suburbs and Locations | 28,422 |
|--|--------|

Records as now kept are inclusive of Waterkloof, Menlo Park and Locations. An average of 16,006 cubic yards of refuse were removed by Regular and Special Service per month.

CONSERVANCY SYSTEM.

Night soil pail services rendered:—

City and Suburbs and Locations 10,258

Records as now kept are inclusive of Waterkloof, Menlo Park and Locations. An Average of 283,450 gallons of sterco were removed per month.

VACUUM TANK REMOVAL SERVICES.

The vacuum tank services being carried out as at 30th June, 1947, were as follows:—

City and Suburbs 252

An average of 453,825 gallons of sterco were removed from vacuum tanks per month. These figures are also inclusive of Waterkloof and Menlo Park.

WATER SUPPLIES.

The demand for water has grown in accordance with the development of Pretoria and the following figures indicate the increased consumption:—

| | | |
|-----------|---------|-----------------------------|
| 1929-1930 | .. .. . | 4.21 million gallons daily. |
| 1934-1935 | .. .. . | 7.4 " " " |
| 1939-1940 | .. .. . | 8.78 " " " |
| 1945-1946 | .. .. . | 13.8 " " " |
| 1946-1947 | .. .. . | 14.2 " " " |

The Council has five sources of supply, three direct from dolomitic springs from which 11½ million gallons per day is drawn. The balance is made up of water drawn from the dam on the farm Rietvlei.

All water from this supply is treated by sedimentation and filtration methods, with subsequent chlorination. The City Council expects to augment the water supply shortly by receiving an additional two million gallons per day from the Rand Water Board.

The supply from this source could be considerably increased if it became necessary.

SEWAGE WORKS REPORT.

Table I gives the following particulars:—

- Daily average sewage flow.
- Filter dosage for 6 ft. and 12 ft. deep filters.
- Screenings removed from 1-inch bar screens—disposed of by burial.
- Grit removed daily from grit channels, also from screen chambers, sumps and meter channels—disposed of by dumping.
- Stream water measured over the Daspoort Weir, consisting of the Aapies Stream, Steenhoven and Skinner Spruits, plus filter bed effluent.
- Ratio of dilution of filter bed effluent to stream water.
- Rainfall as measured at the Sewage Works.

Sewage Flow:

The daily average sewage flow, compared with that of the previous year, shows an increase of 13 per cent. Of significance is the fact that the dry weather flow in May and June exceeded 6 million gallons per day, which is the capacity of the purification plant as now completed. Provision should therefore be made for further extensions, if the plant is to be operated satisfactorily and efficiently.

The ratio of dilution of purified effluent to stream water was 1:0.9 for the year, and the lowest monthly ration was 1:0.21 for May. Both these figures are the lowest on record.

Sewage Analysis:

The analytical results for the old units, i.e. numbers 1-4, 7 and 8, all with 6 ft. deep filters, are given in tables II and III. The last treatment unit to be constructed, had not been completed by June, 1947, and for this reason the plant carried a fair overload during the year under review. Although the quality of the effluent was not equal to the standard aimed at, the effluent was nevertheless well purified and 100 per cent. stable throughout the year.

The new 12 ft. deep filters are being used for investigation on two-stage filtration with and without alternation. As it will take several years to complete all the experiments, the results obtained will be submitted at the end of the investigation.

Sludge Digestion:

The primary and secondary Dorr digestors were put into commission in February, 1947. Each tank holds one million gallons of sludge and the contents of the primary digestors are heated to 90°F. by means of six heating coils inside the tank. The circulating water is heated to approximately 130°F. in a boiler fired with sludge gas.

During the year 3,810 cubic yards of digested sludge were removed from the drying beds.

TABLE I.

| Month. | Sewage Flow. | Filter Dosage—Gallons/Cu. Yard/Day. | | | Screenings. | Grit. | Davenport Weir. | Ratio of Dilution Effluent to Stream Water. | Rainfall at Sewage Works Inches. |
|-----------------|--------------|-------------------------------------|---|--|-------------|-------|-----------------|---|----------------------------------|
| | | Units 1—4. 6 Foot filters. | EAST WORKS. Units 5—6, 12 Foot filters. | WEST WORKS. Units 7—8, 6 Foot filters. | | | | | |
| 1946. | | | | | | | | | |
| July | 5,000,000 | 115 | 205 | 86 | 19.5 | 7.6 | 7,745,000 | 1 : 0.55 | Nil |
| August | 5,000,000 | 115 | 205 | 86 | 16.7 | 7.4 | 6,951,000 | 1 : 0.39 | Nil |
| September .. | 5,250,000 | 124 | 221 | 79 | 18.4 | 7.15 | 7,099,000 | 1 : 0.35 | Nil |
| October | 5,732,000 | 126 | 248 | 96 | 13.6 | 7.0 | 10,399,000 | 1 : 0.82 | 1.40 |
| November .. | 6,147,000 | 132 | 242 | 132 | 17.2 | 5.8 | 12,980,000 | 1 : 1.11 | 2.73 |
| December .. | 6,253,000 | 132 | 217 | 164 | 14.9 | 5.1 | 17,008,000 | 1 : 1.72 | 5.58 |
| 1947. | | | | | | | | | |
| January | 6,133,000 | 125 | 217 | 167 | 15.0 | 4.2 | 13,416,000 | 1 : 1.19 | 3.87 |
| February | 6,300,000 | 126 | 224 | 172 | 15.4 | 4.6 | 17,272,000 | 1 : 1.74 | 4.40 |
| March | 6,665,000 | 137 | 220 | 194 | 15.3 | 4.1 | 18,429,000 | 1 : 1.76 | 5.54 |
| April | 6,526,000 | 133 | 226 | 180 | 16.9 | 3.4 | 9,078,000 | 1 : 0.39 | 1.08 |
| May | 6,086,000 | 129 | 210 | 162 | 18.2 | 3.4 | 7,337,000 | 1 : 0.21 | Nil |
| June | 6,083,000 | 128 | 214 | 159 | 17.2 | 3.7 | 7,860,000 | 1 : 0.29 | 0.33 |
| Year 1946-47 .. | 5,931,000 | 127 | 221 | 140 | 16.5 | 5.3 | 11,215,000 | 1 : 0.89 | 24.93 |

TABLE II.—MONTHLY SEWAGE ANALYSES.

[illegible]

TABLE II.—MONTHLY SEWAGE ANALYSES (Contd.).
UNITS 1-4.

RESULTS IN PARTS PER 100,000.

| | 1946. | | | | | | | 1947 | | | | | | Average. |
|--|-------|------|-------|------|------|------|------|------|-------|-------|------|------|------|----------|
| | July. | Aug. | Sept. | Oct. | Nov. | Dec. | Jan. | Feb. | March | April | May | June | | |
| FILTER BED EFFLUENT—SETTLED ONE HOUR: | | | | | | | | | | | | | | |
| Suspended Solids | 3.1 | 2.25 | 2.5 | 2.2 | 2.4 | 1.7 | 1.9 | 1.5 | 1.6 | 1.9 | 2.1 | 2.3 | 2.1 | |
| Ammoniacal Nitrogen | 1.30 | 1.75 | 1.13 | 1.13 | 1.00 | 1.00 | 0.65 | 0.70 | 1.30 | 1.40 | 1.50 | 1.75 | 1.22 | |
| Albumenoid Nitrogen | 0.18 | 0.20 | 0.17 | 0.12 | 0.16 | 0.14 | 0.11 | 0.10 | 0.14 | 0.15 | 0.13 | 0.19 | 0.15 | |
| Oxygen consumed from N/80 Permanganate in 4 hours at 80°F... | 1.01 | 0.94 | 1.00 | 0.89 | 0.90 | 0.86 | 0.83 | 0.74 | 0.93 | 1.02 | 0.98 | 1.09 | 0.93 | |
| "Strength" | 17 | 19 | 16 | 15 | 15 | 14 | 12 | 11 | 16 | 18 | 17 | 20 | 16 | |
| Biochemical Oxygen Demand—5 Days' Test | 3.02 | 1.49 | 1.75 | 1.48 | 1.39 | 1.21 | 1.38 | 1.47 | 1.61 | 1.96 | 3.14 | 2.68 | 1.88 | |
| Relative Stability per cent. | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | |

TABLE II.—PURIFICATION THROUGH FILTERS.—UNITS 1-4.

| Results in parts per 100,000. | | 1946. | | | | | | | | | | | | 1947 | | | |
|--|---------------------------------|-------|------|-------|------|------|------|------|------|-------|-------|------|------|----------|--|--|--|
| | | July. | Aug. | Sept. | Oct. | Nov. | Dec. | Jan. | Feb. | March | April | May | June | Average. | | | |
| Filter Dosage during Sampling: Galls. per cub. yd. per day | | 120 | 119 | 115 | 120 | 131 | 137 | 120 | 127 | 127 | 135 | 127 | 131 | 126 | | | |
| Mean Temperature at Sewage Works during Sampling: °F. | | 53 | 51 | 64 | 65 | 76 | 79 | 78 | 73 | 75 | 69 | 58 | 51 | 66 | | | |
| Albumenoid Nitrogen | Settled Sewage | 0.75 | 0.85 | 0.80 | 0.60 | 0.75 | 0.65 | 0.65 | 0.65 | 0.75 | 0.85 | 0.70 | 0.70 | 0.70 | | | |
| | Filter Bed Effluent | 0.36 | 0.28 | 0.48 | 0.20 | 0.30 | 0.28 | 0.25 | 0.25 | 0.30 | 0.30 | 0.33 | 0.34 | 0.31 | | | |
| | Purification per cent. | 52 | 67 | 40 | 67 | 60 | 57 | 62 | 62 | 60 | 65 | 53 | 51 | 56 | | | |
| | Effluent Settled 1 Hour | 0.18 | 0.20 | 0.17 | 0.12 | 0.16 | 0.14 | 0.11 | 0.10 | 0.14 | 0.15 | 0.13 | 0.19 | 0.15 | | | |
| Purification per cent. | | 76 | 76 | 79 | 80 | 79 | 79 | 83 | 85 | 81 | 82 | 81 | 73 | 79 | | | |
| Oxygen consumed from N/80 | Settled Sewage | 3.80 | 4.35 | 4.15 | 4.05 | 3.95 | 3.90 | 3.95 | 3.60 | 3.80 | 4.10 | 4.05 | 4.25 | 4.00 | | | |
| | Filter Bed Effluent | 1.70 | 1.37 | 1.92 | 1.52 | 1.62 | 1.58 | 1.35 | 1.41 | 1.44 | 1.67 | 1.92 | 2.00 | 1.63 | | | |
| | Purification per cent. | 55 | 68 | 54 | 62 | 59 | 60 | 66 | 61 | 62 | 59 | 53 | 53 | 59 | | | |
| | Effluent Settled 1 hour | 1.01 | 0.94 | 1.00 | 0.89 | 0.90 | 0.86 | 0.83 | 0.74 | 0.93 | 1.02 | 0.98 | 1.09 | 0.93 | | | |
| Purification per cent. | | 73 | 78 | 76 | 78 | 77 | 78 | 79 | 80 | 76 | 75 | 76 | 74 | 77 | | | |
| "Strength" | Settled Sewage | 65 | 66 | 69 | 63 | 67 | 68 | 66 | 56 | 63 | 67 | 68 | 68 | 66 | | | |
| | Filter Bed Effluent | 26 | 24 | 27 | 22 | 23 | 22 | 18 | 19 | 23 | 26 | 28 | 31 | 24 | | | |
| | Purification per cent. | 60 | 64 | 61 | 65 | 66 | 68 | 73 | 66 | 63 | 61 | 59 | 54 | 64 | | | |
| | Effluent Settled 1 hour | 17 | 19 | 16 | 15 | 15 | 14 | 12 | 11 | 16 | 18 | 17 | 20 | 16 | | | |
| Purification per cent. | | 74 | 71 | 77 | 76 | 78 | 79 | 82 | 80 | 75 | 73 | 75 | 71 | 76 | | | |
| Biochemical Oxygen Demand 5 Days Test | Settled Sewage | 25.2 | 24.5 | 26.8 | 27.2 | 23.3 | 21.7 | 28.9 | 26.8 | 25.3 | 22.9 | 35.8 | 30.5 | 26.6 | | | |
| | Filter Bed Effluent | 5.31 | 3.64 | 4.81 | 3.59 | 3.56 | 4.40 | 2.89 | 3.75 | 3.69 | 3.73 | 5.97 | 6.22 | 4.30 | | | |
| | Purification per cent. | 79 | 85 | 82 | 87 | 85 | 80 | 90 | 86 | 86 | 84 | 83 | 80 | 84 | | | |
| | Effluent Settled 1 hour | 3.02 | 1.49 | 17.5 | 1.48 | 1.39 | 1.21 | 1.38 | 1.47 | 1.61 | 1.96 | 3.14 | 2.68 | 1.88 | | | |
| Purification per cent. | | 88 | 94 | 94 | 95 | 94 | 95 | 95 | 94 | 94 | 91 | 91 | 91 | 93 | | | |

TABLE III.—MONTHLY SEWAGE ANALYSES.

UNITS 7 AND 8.

RESULTS OF PARTS PER 100,000.

| | 1946. | | | | | | | 1947 | | | | | | |
|--|-------|-------|-------|-------|-------|-------|--------|-------|--------|-------|--------|--------|----------|--|
| | July. | Aug. | Sept. | Oct. | Nov. | Dec. | Jan. | Feb. | March | April | May | June | Average. | |
| RAW SEWAGE: | | | | | | | | | | | | | | |
| Settleable Solids: c.cs. per litre Imhoff | 13.0 | 15.0 | 11.0 | 10.5 | 9.0 | 9.5 | 8.5 | 8.0 | 8.5 | 7.5 | 9.5 | 9.0 | 10.0 | |
| Cone—one hour | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | |
| Chlorine in Chlorides | 6.4 | 6.4 | 7.4 | 7.0 | 4.1 | 4.2 | 5.2 | 5.6 | 7.3 | 6.5 | 6.7 | 5.7 | 6.4 | |
| pH... | 7.7 | 7.6 | 7.75 | 7.5 | 7.6 | 7.6 | 7.4 | 7.55 | 7.65 | 7.4 | 7.65 | 7.75 | 7.6 | |
| Ammoniacal Nitrogen | 5.5 | 4.5 | 5.0 | 4.0 | 3.5 | 3.5 | 3.25 | 5.0 | 3.5 | 6.0 | 5.5 | 5.0 | 4.5 | |
| Albumenoid Nitrogen | 1.1 | 0.8 | 1.9 | 0.9 | 0.9 | 1.10 | 1.0 | 1.2 | 0.8 | 1.1 | 1.1 | 1.0 | 1.1 | |
| Oxygen consumed from N/80 Permanganate in 4 hours at 80°F... | 5.92 | 6.24 | 5.44 | 6.40 | 4.90 | 5.36 | 4.64 | 6.00 | 5.52 | 5.28 | 5.20 | 5.44 | 5.45 | |
| "Strength" .. | 92 | 89 | 87 | 89 | 71 | 77 | 70 | 90 | 77 | 87 | 84 | 84 | 83 | |
| Biochemical Oxygen Demand—5 Days' Test | 53.5 | 49.8 | 39.3 | 44.0 | 35.7 | 33.9 | 27.7 | 32.9 | 30.2 | 32.3 | 34.0 | 44.7 | 38.2 | |
| Raw Sewage Flow during Sampling: | | | | | | | | | | | | | | |
| Thousands of Gallons | 918 | 826 | 867 | 1,209 | 1,301 | 2,173 | 1,774 | 1,710 | 1,920 | 1,808 | 1,657 | 1,614 | 1,481 | |
| Day .. | Tues. | Tues. | Tues. | Tues. | Tues. | Tues. | Thurs. | Tues. | Thurs. | Tues. | Thurs. | Thurs. | | |
| SETTLED SEWAGE: | | | | | | | | | | | | | | |
| Settleable Solids: c.cs. per litre Imhoff | 0.4 | 0.4 | 0.2 | 0.15 | 0.4 | 0.85 | 0.3 | 0.2 | 0.3 | 0.3 | 0.35 | 0.5 | 0.4 | |
| Cone—one hour | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | |
| Removal of Settleable Solids | 97.0 | 97.0 | 98.0 | 98.0 | 96.0 | 91.0 | 96.0 | 97.5 | 96.5 | 96.0 | 96.0 | 94.5 | 96.0 | |
| Chlorine in Chlorides | 5.8 | 6.3 | 6.2 | 6.2 | 5.1 | 5.4 | 5.8 | 6.0 | 6.9 | 6.4 | 7.1 | 6.9 | 6.2 | |
| pH... | 7.7 | 7.8 | 7.8 | 7.7 | 7.75 | 7.7 | 7.65 | 7.75 | 7.85 | 7.65 | 7.7 | 7.8 | 7.7 | |
| Ammoniacal Nitrogen | 4.5 | 3.5 | 4.5 | 3.75 | 3.25 | 3.50 | 3.0 | 3.75 | 3.25 | 4.25 | 4.5 | 4.0 | 3.8 | |
| Albumenoid Nitrogen | 0.6 | 0.6 | 0.65 | 0.5 | 0.4 | 0.5 | 0.5 | 0.5 | 0.45 | 0.5 | 0.55 | 0.55 | 0.5 | |
| Oxygen consumed from N/80 Permanganate in 4 hours at 80°F... | 3.2 | 3.85 | 3.25 | 3.10 | 2.70 | 3.05 | 2.40 | 3.05 | 3.20 | 2.80 | 3.10 | 3.10 | 3.08 | |
| "Strength" .. | 56 | 58 | 57 | 51 | 44 | 50 | 43 | 51 | 50 | 50 | 55 | 54 | 52 | |
| Biochemical Oxygen Demand—5 Days' Test | 21.8 | 24.8 | 21.7 | 20.0 | 16.9 | 20.3 | 13.8 | 23.5 | 19.1 | 19.2 | 18.7 | 31.2 | 20.9 | |

TABLE III.—PURIFICATION THROUGH FILTERS.
UNITS 7 AND 8.

| Results in parts per 100,000. | | 1946. | | | | | | | | | | | | 1947. | | | |
|---|---|-------|------|-------|------|------|------|------|------|--------|--------|------|-------|----------|--|--|--|
| | | July. | Aug. | Sept. | Oct. | Nov. | Dec. | Jan. | Feb. | March. | April. | May. | June. | Average. | | | |
| Filter Dosage during Sampling: Galls. per cub. yd. per day | | 86 | 78 | 86 | 120 | 124 | 207 | 169 | 164 | 183 | 172 | 158 | 154 | 142 | | | |
| Mean Temperature at Sewage Works during Sampling: °F. | | 53 | 58 | 65 | 72 | 72 | 77 | 72 | 72 | 70 | 59 | 53 | 47 | 64 | | | |
| Albumenoid Nitrogen | Settled Sewage | 0.6 | 0.6 | 0.65 | 0.5 | 0.4 | 0.5 | 0.5 | 0.5 | 0.45 | 0.50 | 0.55 | 0.55 | 0.5 | | | |
| | Filter Bed Effluent | 0.32 | 0.28 | 0.20 | 0.2 | 0.25 | 0.25 | 0.25 | 0.23 | 0.28 | 0.33 | 0.30 | 0.33 | 0.25 | | | |
| | Purification per cent. | 47 | 53 | 69 | 60 | 38 | 50 | 50 | 54 | 38 | 34 | 45 | 40 | 50 | | | |
| | Effluent Settled 1 hour Purification per cent. | 0.14 | 0.13 | 0.17 | 0.10 | 0.11 | 0.12 | 0.11 | 0.11 | 0.12 | 0.14 | 0.14 | 0.17 | 0.13 | | | |
| Oxygen consumed from N/80 Permanganate in 4 hours at 80°F. | Settled Sewage | 3.2 | 3.85 | 3.25 | 3.10 | 2.70 | 3.05 | 2.40 | 3.05 | 3.20 | 2.80 | 3.10 | 3.20 | 3.08 | | | |
| | Filter Bed Effluent | 1.47 | 1.56 | 1.05 | 0.93 | 1.19 | 1.47 | 1.04 | 1.16 | 1.55 | 1.53 | 1.56 | 1.80 | 1.28 | | | |
| | Purification per cent. | 54 | 60 | 68 | 70 | 56 | 52 | 57 | 62 | 52 | 45 | 50 | 44 | 58 | | | |
| | Effluent Settled 1 hour Purification per cent. | 0.82 | 0.85 | 0.69 | 0.62 | 0.62 | 0.91 | 0.61 | 0.73 | 0.88 | 0.80 | 0.83 | 0.96 | 0.76 | | | |
| "Strength" | Settled Effluent | 56 | 58 | 57 | 51 | 44 | 50 | 43 | 51 | 50 | 50 | 55 | 54 | 52 | | | |
| | Filter Bed Effluent | 22 | 23 | 14 | 12 | 16 | 22 | 15 | 17 | 23 | 23 | 24 | 34 | 20 | | | |
| | Purification per cent. | 61 | 60 | 75 | 77 | 64 | 56 | 65 | 67 | 54 | 54 | 56 | 37 | 62 | | | |
| | Effluent Settled 1 hour Purification per cent. | 14 | 14 | 10 | 8 | 9 | 14 | 9 | 12 | 14 | 14 | 16 | 24 | 13 | | | |
| Biochemical Oxygen Demand 5 Days' Test | Settled Sewage | 21.8 | 24.8 | 21.7 | 20.0 | 16.9 | 20.3 | 13.8 | 23.5 | 19.1 | 19.2 | 18.7 | 31.2 | 20.9 | | | |
| | Filter Bed Effluent | 3.93 | 4.82 | 2.14 | 2.11 | 2.56 | 3.86 | 2.39 | 2.64 | 4.05 | 4.57 | 4.54 | 6.94 | 3.71 | | | |
| | Purification per cent. | 82 | 81 | 90 | 90 | 85 | 81 | 83 | 89 | 79 | 76 | 76 | 78 | 82 | | | |
| | Effluent Settled 1 Hour Purification per cent. | 2.01 | 2.50 | 1.46 | 0.75 | 1.06 | 1.78 | 0.97 | 1.63 | 1.61 | 1.79 | 2.19 | 3.43 | 1.77 | | | |
| | | 91 | 90 | 93 | 96 | 94 | 91 | 93 | 93 | 92 | 90 | 88 | 89 | 91 | | | |

REPORT ON SLUMS CLEARANCE UNDERTAKEN BY PRETORIA HEALTH DEPARTMENT FOR THE YEAR ENDING 30th JUNE, 1947.

During the war years no slum elimination programme was undertaken owing to the acute shortage of building materials and housing accommodation. This has caused a deterioration of what could be termed a tolerant standard of slum conditions in this city.

With the return of ex-volunteers into civilian life, there is an increased demand on already over-taxed housing accommodation, and through sheer necessity unsatisfactory outbuildings, garages, stables, native rooms, storerooms and tents are being occupied as dwellings. This has increased the difficulties of the Department and has made it necessary to embark upon a modified scheme of minor slum elimination without causing any undue hardship.

This scheme has been undertaken in collaboration with the development of the Danville housing scheme. With very few exceptions applications for sub-economic houses have been approved solely on the basis of unhealthy housing conditions. Pretoria has never been considered a city with a large percentage of slum dwellings. During the war years, however, hardly any slums were eliminated owing to the acute shortage of building materials and housing accommodation. This caused the development of new slums and very little abatement of old nuisances. Families who were living under unhealthy conditions have been rehoused and steps taken under the Slums Regulations to prevent re-occupation of the vacated premises. This control has proved most effective but in spite of it there is still a very large number of unsatisfactory outbuildings, garages and stables being occupied throughout the city. This is because there has not been a proportionate increase in the number of residences erected when compared with the increase in the general population.

Active slum elimination through the medium of Slums Courts has not been undertaken, but by mutual consent with the owners of certain slum properties, 29 dwellings have been demolished upon vacation by the tenants.

During the year under review, only one slum rescission order was made in respect of premises which were declared a slum several years ago.

Recent negotiations with the Union Department of Defence have resulted in a scheme whereby certain surplus military camps or bungalows will be converted by the Council into small housing schemes. This will be of considerable help in solving the city's housing problems. Under arrangement already concluded, approximately 75 families will shortly be re-housed and further negotiations may result in this number being greatly increased.

Important slum problems still confront the city in regard to the non-European communities in spite of the extensions to Atteridgeville Location which have greatly assisted in easing the position. Conditions in Bantule and the remaining portion of Marabastad are still unsatisfactory. No organised housing schemes have as yet been formulated for the Coloured or Asiatic communities. This must receive attention otherwise the areas allocated to them at present and the conditions under which they live will deteriorate with possible adverse effects on the health of the community as a whole.

The acute housing shortage, the difficulty in obtaining labour for building new houses, the expense of construction and the scarcity of materials generally are factors which render slum elimination almost impossible, and unless these difficulties are overcome there will be a great increase in the number of slum dwellings, and the whole problem will be aggravated.

The following is a record of the work undertaken by this section during the past year:—

DEMOLITIONS.

Number of declared slums demolished: 4 dwellings comprising 13 apartments.

Number of undeclared slums demolished: 25 dwellings comprising 159 apartments.

Number of families affected by demolitions: 56 families comprising 223 persons.

JULY, 1946, TO 30TH JUNE, 1947.

| Period. Period. | Area. Area | No. of cases dealt with during period. | No. of cases brought before Housing Sub-Committee for re-housing. | | | | Rehoused during period on Public Health grounds. | | | | FURTHER ACTION. | | | | Number of premises listed for action under Slums Regula- tions. |
|--------------------|---------------|--|--|----------|----------|----------|--|----------|----------|----------|--------------------------------------|--|---|--|---|
| | | | Approved. | | Refused. | | Fams. | | Persons. | | Letters Sent. | | Referred to District Inspector for attention. | | |
| | | | Fams. | Persons. | Fams. | Persons. | Fams. | Persons. | Fams. | Persons. | Pro- hibiting Occu- pation. | Pro- hibiting Over- crowding. | Referred to other Depts. | Number of premises listed for action under Slums Act. | |
| 1946. | | | | | | | | | | | | | | | |
| July .. | | 41 | 27 | 132 | 14 | 73 | 20 | 92 | 7 | 15 | 4 | 8 | 1 | 5 | 3 |
| August .. | | 2 | — | — | 2 | 8 | 13 | 54 | 6 | 1 | 4 | 1 | — | — | 1 |
| September .. | | 67 | 45 | 195 | — | — | 10 | 64 | 2 | — | — | — | — | — | — |
| October .. | | 78 | 57 | 241 | 22 | 83 | 10 | 45 | 30 | 10 | 3 | — | — | 13 | 2 |
| November .. | | — | — | — | 21 | 84 | 20 | 88 | 9 | 7 | 3 | 1 | — | 9 | — |
| December .. | | — | — | — | — | — | 20 | 93 | 10 | 32 | 8 | — | — | — | — |
| 1947. | | | | | | | | | | | | | | | |
| January .. | | 44 | 32 | 138 | 12 | 52 | — | — | 15 | 14 | 9 | 9 | — | 7 | 1 |
| February .. | | — | — | — | — | — | 18 | 77 | — | — | — | — | — | — | — |
| March .. | | — | — | — | — | — | 6 | 31 | — | — | — | — | — | — | — |
| April .. | | 4 | 4 | 30 | — | — | 3 | 14 | — | — | — | — | — | — | — |
| May .. | | — | — | — | — | — | 3 | 15 | 2 | 2 | — | — | — | — | — |
| June .. | | — | — | — | — | — | 6 | 26 | — | — | — | — | — | — | — |
| TOTAL .. | | 236 | 165 | 736 | 71 | 300 | 129 | 599 | 81 | 81 | 31 | 20 | 34 | 7 | 7 |

SUB-ECONOMIC HOUSING.

European Rehousing and Rehabilitation:

The Council's sub-economic housing schemes comprise the following:—

| Area. | Scheme. | No. of Houses. | | | Total. |
|---------------------------|---------|----------------|------------|------------|------------|
| | | Type A. | Type E. | Type F. | |
| Pretoria West | I | — | 14 | — | 14 |
| New Muckleneuk | I | — | 11 | — | 11 |
| | II | 2 | 7 | 6 | 15 |
| | III | 3 | 10 | 7 | 20 |
| Innesdale | II | 5 | 16 | 14 | 35 |
| | III | 4 | 15 | 11 | 30 |
| Proclamation Hill | II | 8 | 22 | 20 | 50 |
| | III | 10 | 73 | 67 | 150 |
| Danville | IV | — | 150 | 36 | 186 |
| TOTAL | | 32 | 318 | 161 | 511 |

The four schemes in Pretoria are made up as follows:—

Scheme I — 25 houses built in 1930-1931.

“ II — 100 “ “ “ 1936-1937.

“ III — 200 “ “ “ 1938-1939.

“ IV — 200 “ “ “ 1945-1947.

Types of Houses in each Scheme:

Scheme I.—All houses consist of livingroom, two bedrooms, kitchen and bathroom.

Schemes II and III.—In these two schemes there are three different types, namely:—

Type A — 1-bedroomed house.

“ E — 2- “ “

“ F — 3- “ “

Each house has a livingroom, kitchen, bathroom and a storeroom.

Scheme IV.—The houses already constructed under this scheme consist of 3 bedrooms, livingroom, kitchen, pantry, bathroom and storeroom. The next 300, now in the course of construction, and nearly ready for occupation, will be of one-bedroomed and four-bedroomed types. All the houses have built-in cupboards in the bedrooms.

The rents vary as follows:—

Detached. Semi-detached.

Scheme I — per month £2 15 0 £2 5 0

This rent includes sewerage or sanitary services, rubbish removal services, water up to 4s. per month and electricity up to 5s. per month.

Type A. Type E. Type F.

Schemes II and III — per month.. .. £2 18 6 £3 4 6 £3 9 6

This rent also includes sewerage or sanitary services, rubbish removal services, water up to 4s. per month and electricity up to 5s. per month.

Scheme IV.—The rentals for this scheme are determined on a “differential rental system”. In respect of these houses, the Council has adopted a standard maximum rent of £4 17s. 6d. per month which includes sewerage, sanitary and rubbish removal services, water up to 4s. and electricity up to 5s. per month. There is a rebate of 3s. 9d. per month for every 15s. by which the family income is less than £19 10s. 0d. per month. There is a further rebate of 5s. monthly for every child under 16 years of age. When income exceeds £25 per month no rebates are granted. The minimum rent of 15s. 6d. per month under this scheme covers the cost of essential services only. This low rental is generally only for pensioners and families who have lost the breadwinner or, occasionally where unemployment consequent upon long periods of ill-health, has depleted the family budget.

The following table shows at a glance the different rents payable according to the income of the family and the number of dependants:—

CHILDREN.

| INCOME. | 14 | 13 | 12 | 11 | 10 | 9 | 8 | 7 | 6 | 5 | 4 | 3 | 2 | 1 | 0 |
|-------------|----|----|----|----|----|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | | | | | |
| £ 4 10 0.. | | | | | | | | | | | | | | | |
| £ 5 5 0.. | | | | | | | | | | | | | | | |
| £ 6 15 0.. | | | | | | | | | | | | | | | |
| £ 7 10 0.. | | | | | | | | | | | | | | | |
| £ 8 5 0.. | | | | | | | | | | | | | | | |
| £ 9 0 0.. | | | | | | | | | | | | | | | |
| £ 9 15 0.. | | | | | | | | | | | | | | | |
| £ 10 10 0.. | | | | | | | | | | | | | | | |
| £ 11 5 0.. | | | | | | | | | | | | | | | |
| £ 12 0 0.. | | | | | | | | | | | | | | | |
| £ 13 10 0.. | | | | | | | | | | | | | | | |
| £ 14 5 0.. | | | | | | | | | | | | | | | |
| £ 15 15 0.. | | | | | | | | | | | | | | | |
| £ 16 10 0.. | | | | | | | | | | | | | | | |
| £ 17 5 0.. | | | | | | | | | | | | | | | |
| £ 18 0 0.. | | | | | | | | | | | | | | | |
| £ 18 15 0.. | | | | | | | | | | | | | | | |
| £ 19 10 0.. | | | | | | | | | | | | | | | |

DIFFERENTIAL RENTS PAYABLE IN
RELATION TO INCOME AND
NUMBER OF CHILDREN.

Sale of Sub-economic Houses to Tenants:

During the year it was decided to ask the Provincial Administration and National Housing Board to permit tenants who had reached an Economic income level to be allowed to purchase houses at Danville. Forty houses have been kept aside for this purpose, and of these twelve 3-bedroomed houses and one 2-bedroomed house have already been provisionally sold.

These houses are sold at approximately £1,000 each. Payments are made at the rate of £7 per month. Although sold by hire-purchase agreement, these houses remain under the control of the Housing Manager.

Allocation of Houses to Tenants:

Because of circumstances prevailing during the year, applicants were not rehoused in the order of the date of application; the policy was to remove applicants from conditions dangerous or injurious to health, or where a serious social problem arose. Most of the tenants formerly resided in garages, rooms in yards or in premises which were grossly overcrowded.

One hundred and fifty-nine applicants were placed in sub-economic houses during the year. This number would have been greater had not building operations been suspended by the shortage of certain building materials. It is hoped to house a further 300 applicants during the coming year.

The City Council of Pretoria has applied to the National Housing Board for a loan to build another 500 sub-economic houses at Danville and a further loan to erect 100 less costly economic houses.

Two Health Inspectors work in close co-operation with the Sub-economic Housing staff and, wherever possible, the re-occupation of unhygienic structures is prevented.

Selection of Tenants:

All applicants were visited in their homes, when particular note was taken of the conditions under which they lived, the size of the family and their personal character, with a view to deciding whether or not special supervision would be required when rehoused.

Incomes of applicants and any of their children in employment were carefully checked with the respective employers. Incomes exceeding £25 per month were considered to be economic. Only one-third of the income of a minor child was included in the family earnings.

The incomes of apprentices who were in the first two years of their apprenticeship were not regarded as part of the family income, owing to the expenditure incurred in having to attend school and purchasing books and other necessary equipment.

There are three types of applicants who, it is considered, should be given priority when rehousing the low wage-earner, namely:—

- (a) Children of tenants who have married. These young people have had the benefit of living in a decent little house for some years and one should be able to continue to assist them to build up their future.
- (b) The young married couple who are in receipt of a small income necessitating them living in slums or under other undesirable conditions but who should be assisted and taught how to run a home of which to be proud. In some typical cases it is necessary to teach them how to live within their income.
- (c) The couple paying too high a rental (occasionally as much as two-thirds of their income) which, in some cases, may give rise to many social problems as well as to stealing, forgery or some other criminal tendency.

It must be remembered that those persons falling under the groups mentioned above are bringing up a future generation and should, therefore, receive every assistance.

Welfare Work:

The provision of a sub-economic house is only the first step in the rehabilitation of a family. As has been mentioned earlier in this report, many families live in over-crowded conditions, in garages and rooms in backyards. In many instances adult children were sharing a room with their parents. Many married couples were living with relations, which frequently resulted in friction between the various members of the family.

A number of children were being placed in orphanages for no other reason than the lack of a home; for the size of its population, South Africa has far too many children living in institutions. To these children natural home life is either lost or is unknown and, as is too often the case, civic and national pride means little to them. In fact, except in a few cases, when they grow up there is no ingrained sense of responsibility as a parent or citizen.

The financial and social problems of a family have to be dealt with and the parents encouraged to better their home conditions. Frequently men must be taught their responsibility towards their home and children, whilst the women folk have to be taught how to take care of their children and manage on a small income. Where a breadwinner had suffered from a long illness or had deserted his home, arrangements were made to feed and clothe his family until such time as he returned to work or a pension had been obtained through the Department of Social Welfare.

The Sub-Economic Housing Department administered the incomes of several families. In such cases everything that was necessary in the home was purchased with the concurrence of the man and his wife who, by so doing, have learned how money should be spent. This money is usually administered either on the instructions of a magistrate of the Childrens' Court or because a tenant is hopelessly in debt and seeks advice. When a tenant is in debt, the Department makes arrangements with his creditors for the payment of all monies due, and his income is administered until they are fully settled.

The procuring of goods by tenants under the Hire-Purchase Agreement is a major problem, and the tendency is that the poorer the family the more it purchases in this way. If only necessities were bought it would be understandable, but many of them purchase showcases and large radio-grams, which are unnecessary and beyond their means.

Student Housing Manageresses:

The training of student Housing Manageresses, all of whom are university graduates, was continued during the year. All these trainees are subsidised by the Union Health Department and by the City Council employing them. They must receive training in at least two different centres before becoming fully qualified; at present such facilities have been established at Cape Town, East London and Pretoria.

Pretoria's Sub-Economic Housing Scheme, though small, has produced wonderful results. Men who began life as labourers have become artisans, some have even become professional men. Children of some of the tenants are attending the University or Normal College in order to further their education.

Much propaganda for the further education of the children of tenants was carried out by the Sub-economic Housing staff and advice freely given as to what loans, bursaries, etc., were available. During vacations, work was found for those young people who wished to proceed with further study. Emoluments received assisted them to purchase their own clothing or books or other equipment.

The Department has co-operated very closely with all bodies concerned in the welfare of the public, and this co-operation has proved of immense value both to those bodies as well as to the Department.

NON-EUROPEAN HOUSING.

A. BANTU.

1. The number of Natives resident in the Pretoria Urban Area, as at the end of June, 1947, is as follows:—

| | |
|---|---------------|
| (a) Resident in Compounds, Barracks, Hostels and Licensed Native Housing | 16,849 |
| (b) Domestic Servants resident on employers premises | 24,696 |
| (c) Resident in Hospitals, Asylums and other Institutions (approx.) | 750 |
| (d) Resident in Native Locations and Villages | 16,054 |
| TOTAL | 58,349 |

2. MUNICIPAL NATIVE LOCATIONS:

- (a) Atteridgeville:

| | |
|---|-------|
| (i) Number of stands | 4,477 |
| (ii) Number of dwellings | 1,179 |
| (iii) Total population | 8,301 |
| (iv) Average number of persons per dwelling | 7.04 |

- (b) Bantule:

| | |
|---|------------|
| (i) Number of Stands: | |
| New Location | 50 |
| Municipal Houses | 248 |
| Hove's Ground (Native Village) | 140 |
| Hove's Ground West (Native Village) | 10 |
| Cottages for Municipal Employees | 3 |
| TOTAL | 451 |

(ii) Number of Dwellings:

| | |
|---|------------|
| New Location | 50 |
| Municipal Houses | 248 |
| Hove's Ground (Native Village) | 140 |
| Hove's Ground West (Native Village) | 10 |
| Cottages for Municipal Employees | 3 |
| TOTAL | 451 |

(iii) Total Population:

| | |
|---|--------------|
| New Location | 526 |
| Municipal Houses | 2,361 |
| Hove's Ground (Native Village) | 2,843 |
| Hove's Ground West (Native Village) | 154 |
| Cottages for Municipal Employees | 19 |
| TOTAL | 5,903 |

(iv) Average Number of Persons per Dwelling:

| | |
|--|------|
| New Location | 10.5 |
| Municipal Houses | 9.2 |
| Hove's Ground (Native Villages) | 20.3 |
| Hove's Ground West (Native Villages) | 15.4 |
| Cottages for Municipal Employees | 6.1 |

(c) Remainder of Marabas Village:

| | |
|---|-------|
| (i) Number of stands left | 128 |
| (ii) Number of dwellings | 128 |
| (iii) Total population | 1,850 |
| (iv) Average number of persons per dwelling | 10.3 |

B. CAPE COLOURED:

Total population of Cape Coloureds in the urban area of Pretoria, about 3,064.

(a) Cape Location:

| | |
|---|-------|
| (i) Number of stands | 191 |
| (ii) Number of dwellings | 191 |
| (iii) Total population | 1,954 |
| (iv) Average number of persons per dwelling | 10.4 |

C. ASIATIC POPULATION:

Total population of Asiatics in the urban area of Pretoria, about 4,340.

Asiatic Bazaar:

| | |
|---|-------|
| (i) Number of stands | 343 |
| (ii) Number of dwellings | 262 |
| (iii) Total population (approx.) | 2,930 |
| (iv) Average number of persons per dwelling | 11.1 |

D. EASTERN LOCATION:

The farm Vlakfontein has been surveyed and the planning of the first unit of 1,000 stands has virtually been completed. The experimental huts in connection with the housing scheme, will be inspected by Council in August, and if approved of, immediate steps will be taken to build 1,000 housing units at Vlakfontein. The housing scheme will be an adaptation from the traditional Bantu village.

E. REGISTERING, INFLUX CONTROL AND TOWN INSPECTION:

During the financial year 1st July, 1946, to 30th June, 1947, 28,565 new service contracts were issued and 19,680 Natives discharged from their employment were re-registered by this office. The total amount collected in registration fees amounted to £24,081 6s. 0d.

23,702 Permits to seek work were issued to Natives entering the urban area from outside, and 9,363 Natives were refused entry into this urban area.

The town inspectors paid 1,098 visits to licensed premises. 469 Premises were visited in response to complaints. 2,626 "Cease housing" notices were issued. 899 Premises were re-inspected. 12,668 General visits to premises were undertaken and 3,684 warnings were issued to various employers for failing to register their employees.

F. SOCIAL WELFARE AND RECREATION:

1. General:

The work of this section of the Department was carried on in the same manner as stated in the previous report. Film shows have been introduced with the object of cultivating among non-Europeans the idea and desire of healthy living and recreation. Special attention is now being paid to the recreation of children. The Transvaal Education Department has permitted us to take charge of the sports and recreation of the different non-European schools in the urban area and we are now organising and supervising the games, sports and recreation of a large number of children.

2. Social Welfare:

With the co-operation of various welfare organisations, welfare work has been done among all sections of the community. We wish to place on record our sincere appreciation to the Child Welfare Society, S.A. Social Services, Social Welfare Department, Native Affairs Department and many other bodies and individuals for their ready assistance at all times.

3. Recreation:

There are five Municipal soccer fields (two of which are in Groenkloof for domestic servants), one rugby field, one field for tribal dancing and three tennis courts, apart from the South African Railways and Iscor fields, to serve the Native population of the urban area. The Indian and Coloured communities each have a soccer field and two tennis courts. All these playing fields accommodate over a thousand participants in soccer, rugby, tennis, hockey, tribal dancing, etc., every week. Apart from the participants, many spectators gather at these centres, especially on Sundays. A plan for more recreation centres and for the illumination of certain fields in the evening has been adopted by the Council. Many more non-Europeans will then be able to take part in healthy recreation.

As has already been mentioned, much more attention is now being paid to the recreation of children. The organisers and the responsible committees of the non-European Boys' and Girls' Clubs continuously strive to induce the children to spend their leisure hours in the evenings fruitfully by providing recreational facilities and instruction in sports and physical training.

The position of the Amalaitas, who have always been a difficult group, has remained practically unchanged during the past year, but it is expected that with the extension of recreational facilities they will gradually be weaned away from their organisation.

4. Servants' Registry:

This office is functioning satisfactorily. There is an acute shortage of domestic servants, mainly due to the fact that much higher wages are being paid to industrial and other workers.

5. Unemployment Insurance Office:

The City Council is administering the Unemployment Insurance Act on behalf of the Central Government. Since its inception in April, this office has placed several hundreds of Natives in employment.

Table No. 1.
BIRTHS (ALL RACES) FOR THE YEAR ENDED 30th JUNE, 1947.

| | EUROPEAN. | | | | NATIVE. | | | | ASIATIC. | | | | EUR-AFRICAN. | | | |
|--------------------------|-------------|--------|---------------|--------|---------------|--------|---------------|--------|-------------|--------|---------------|--------|---------------|--------|---------------|--------|
| | Legitimate. | | Illegitimate. | | Legitimate. | | Illegitimate. | | Legitimate. | | Illegitimate. | | Legitimate. | | Illegitimate. | |
| | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female |
| 1946. | | | | | | | | | | | | | | | | |
| July .. | 109 | 100 | — | — | 2 | 4 | 5 | 1 | 3 | 2 | — | — | 1 | — | — | — |
| August .. | 108 | 131 | 1 | — | 7 | 7 | 5 | 11 | 4 | 13 | — | — | 3 | 1 | — | — |
| September .. | 152 | 149 | 1 | 1 | 10 | 17 | 10 | 14 | 12 | 9 | — | — | 3 | — | 1 | 1 |
| October .. | 159 | 141 | 2 | 1 | 9 | 15 | 18 | 12 | 16 | 7 | 1 | — | 5 | 3 | 3 | 3 |
| November .. | 100 | 133 | 1 | — | 5 | 6 | 6 | 16 | 2 | 4 | — | — | — | 3 | 1 | 2 |
| December .. | 100 | 111 | 1 | 1 | 10 | 8 | 10 | 8 | 7 | 10 | — | — | 2 | — | — | — |
| 1947. | | | | | | | | | | | | | | | | |
| January .. | 163 | 167 | 1 | 2 | 9 | 6 | 11 | 10 | 7 | 13 | — | — | 5 | 2 | 1 | 1 |
| February .. | 119 | 118 | — | 2 | 16 | 15 | 12 | 10 | 5 | 9 | — | — | — | — | — | — |
| March .. | 123 | 131 | 3 | 2 | 2 | 3 | 11 | 9 | 4 | 10 | 1 | — | — | 2 | 2 | — |
| April .. | 143 | 108 | 2 | 2 | 7 | 8 | 10 | 21 | 3 | 7 | — | — | 2 | 1 | 3 | — |
| May .. | 151 | 139 | 3 | 3 | — | — | 6 | 5 | 8 | 8 | — | — | 1 | 4 | 1 | — |
| June .. | 165 | 151 | 2 | 3 | 17 | 20 | 12 | 19 | 15 | 20 | — | — | 3 | 1 | — | 1 |
| TOTALS.. | 1,592 | 1,579 | 17 | 17 | 94 | 109 | 116 | 136 | 86 | 112 | 2 | 1 | 25 | 17 | 12 | 8 |
| BIRTHS TO NON-RESIDENTS. | | | | | | | | | | | | | | | | |
| | EUROPEAN. | | | | NON-EUROPEAN. | | | | EUROPEAN. | | | | NON-EUROPEAN. | | | |
| | Legitimate. | | Illegitimate. | | Legitimate. | | Illegitimate. | | Male. | | Female. | | Male. | | Female. | |
| | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female |
| 1946. | | | | | | | | | | | | | | | | |
| July .. | .. | .. | .. | .. | .. | .. | .. | .. | — | — | — | — | — | — | 3 | 1 |
| August .. | .. | .. | .. | .. | .. | .. | .. | .. | — | — | — | — | 13 | 7 | 3 | 7 |
| September .. | .. | .. | .. | .. | .. | .. | .. | .. | 1 | 1 | — | — | 5 | 3 | 3 | 3 |
| October .. | .. | .. | .. | .. | .. | .. | .. | .. | 1 | 1 | — | — | 8 | 3 | 3 | 3 |
| November .. | .. | .. | .. | .. | .. | .. | .. | .. | 5 | 2 | 3 | 1 | 9 | 2 | 2 | 2 |
| December .. | .. | .. | .. | .. | .. | .. | .. | .. | 1 | — | 1 | — | 1 | 3 | 3 | 3 |
| 1947. | | | | | | | | | | | | | | | | |
| January .. | .. | .. | .. | .. | .. | .. | .. | .. | 2 | 3 | 6 | — | 13 | 14 | — | — |
| February .. | .. | .. | .. | .. | .. | .. | .. | .. | — | — | 2 | 2 | 6 | 4 | — | — |
| March .. | .. | .. | .. | .. | .. | .. | .. | .. | 1 | 2 | 1 | — | 32 | 7 | — | — |
| April .. | .. | .. | .. | .. | .. | .. | .. | .. | — | 2 | 4 | — | 5 | 5 | — | — |
| May .. | .. | .. | .. | .. | .. | .. | .. | .. | 4 | 3 | 1 | — | 47 | 7 | — | — |
| June .. | .. | .. | .. | .. | .. | .. | .. | .. | 4 | 1 | 4 | — | 42 | 6 | — | — |
| TOTALS .. | .. | .. | .. | .. | .. | .. | .. | .. | 20 | 14 | 25 | 18 | 393 | 386 | 78 | 62 |

STILLBIRTHS (LOCAL-RESIDENTS).

Table No. 2.
DEATH OF EUROPEAN CHILDREN UNDER 5 YEARS OF AGE FOR THE YEAR ENDED 30th JUNE, 1947.

| | 24 Hours and under. | | Over 24 hours to 1 week. | | Over 1 month. | | Over 1 month to 3 months. | | Over 3 months to 6 months. | | Over 6 months to 12 months. | | Total infantile mortality to 2 years. | | Over 2 years to 4 years. | | Over 4 years to 5 years. | | Total under 5 years. | |
|--|---------------------|----|--------------------------|----|---------------|----|---------------------------|----|----------------------------|----|-----------------------------|----|---------------------------------------|----|--------------------------|----|--------------------------|----|----------------------|----|
| | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. |
| Diphtheria | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — |
| Tuberculosis (all forms) | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — |
| Malnutrition | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — |
| Disease of the Blood .. | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — |
| Encephalitis | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — |
| Meningitis (non-Meningococcal) .. | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — |
| Epilepsy | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — |
| Convulsions in Children under five | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — |
| Disease of circulatory System | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — |
| Broncho-Pneumonia .. | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — |
| Lobar Pneumonia | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — |
| Pneumonia (unspecified) .. | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — |
| Asthma | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — |
| Diarrhoea and Enteritis .. | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — |
| Intestinal Obstruction .. | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — |
| Congenital Malformation of Heart | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — |
| Congenital Malformation | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — |
| Prematurity | 14 | 8 | 6 | 2 | 1 | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — |
| Injury at Birth | 3 | — | 5 | 1 | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — |
| Other Diseases of Early Infancy | 3 | 1 | 3 | 2 | 1 | 1 | — | — | — | — | — | — | — | — | — | — | — | — | — | — |
| Accident | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — |
| TOTAL MALES .. 20 | 17 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 8 | 3 | 5 | 1 | — | — | 66 | 35 |
| TOTAL FEMALES .. | 9 | 6 | 2 | 3 | 4 | 4 | 2 | 2 | 2 | 2 | 2 | 2 | 26 | 5 | 1 | — | — | — | — | — |

BIRTHS (VIT BYCES) FOR THE YEAR ENDED 30th JUNE 1947

Table No. 3.
DEATHS OF NON-EUROPEAN CHILDREN UNDER 5 YEARS OF AGE FOR THE YEAR ENDED 30th JUNE, 1947.

| | 24 Hours and under. | | Over 24 Hours to 1 week. | | Over 1 week to 1 month. | | Over 1 month to 3 months. | | Over 3 months to 6 months. | | Over 6 months to 12 months. | | Total infantile mortality. | | 1 Year to 2 years. | | Over 2 years to 3 years. | | Over 3 years to 4 years. | | Over 4 years to 5 years. | | Total under 5 years. | |
|------------------------------------|---------------------|-----------|--------------------------|-----------|-------------------------|----------|---------------------------|-----------|----------------------------|-----------|-----------------------------|----------|----------------------------|-----------|--------------------|----------|--------------------------|----------|--------------------------|-----------|--------------------------|----------|----------------------|----------|
| | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. |
| NATIVE. | | | | | | | | | | | | | | | | | | | | | | | | |
| Whooping Cough .. | — | — | — | — | — | — | — | — | — | — | 1 | — | 1 | — | — | — | — | — | — | — | — | — | 1 | — |
| Diphtheria .. | — | — | — | — | — | — | — | — | — | — | — | — | — | — | 1 | 1 | — | — | — | — | — | — | 1 | — |
| Tuberculosis (All Forms) .. | — | — | — | — | — | — | 1 | — | 1 | 1 | 2 | 1 | 4 | 2 | 3 | 1 | — | 1 | 1 | — | — | — | 8 | 4 |
| Congenital Syphilis .. | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | 1 | — |
| Measles .. | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | 1 | — | — | — | — | — | 1 | — |
| Encephalitis .. | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | 1 | — |
| Malnutrition .. | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | 2 | — | — | — | — | — | — | — | 1 |
| Meningitis (Non-Meningococcal) .. | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | 3 |
| Acute Bronchitis .. | — | — | — | — | — | — | — | — | — | — | — | 1 | — | 1 | — | — | 1 | — | — | — | — | — | 1 | 2 |
| Broncho Pneumonia .. | — | — | — | — | — | — | 1 | 5 | 6 | 2 | 5 | 4 | 13 | 12 | 3 | 10 | 2 | — | — | — | — | — | 18 | 22 |
| Lobar Pneumonia .. | — | — | — | — | — | — | — | — | — | — | 1 | 3 | 1 | 3 | 2 | — | — | — | — | — | — | — | 3 | 3 |
| Pneumonia (unspecified) .. | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | 1 |
| Diarrhoea and Enteritis .. | — | — | — | — | — | — | 1 | 1 | 3 | 1 | 4 | 6 | 9 | 8 | 2 | 5 | 1 | — | — | — | — | — | 12 | 14 |
| Nephritis .. | — | — | — | — | — | — | — | — | — | — | 1 | — | 1 | — | — | — | — | — | — | — | — | — | 1 | 1 |
| Congenital Malformation .. | — | — | 1 | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — |
| Congenital Debility .. | — | 1 | — | — | — | — | — | — | — | — | — | — | 1 | — | — | — | — | — | — | — | — | — | 1 | — |
| Prematurity .. | 4 | 10 | 3 | 4 | 5 | 2 | 1 | — | — | — | — | — | 13 | 16 | — | 1 | — | — | — | — | — | — | — | 2 |
| Injury at Birth .. | 1 | — | 1 | 3 | — | — | — | — | — | — | — | — | 2 | 3 | — | — | — | — | — | — | — | — | 13 | 16 |
| Other Diseases of Early Infancy .. | 3 | 1 | 2 | 2 | 1 | 1 | — | — | — | — | — | — | 6 | 4 | — | — | — | — | — | — | — | — | 2 | 3 |
| Accident .. | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | 6 | 4 |
| Open Verdict .. | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | 1 | — | — | — | — | — | — | — | 2 |
| Unknown Cause .. | — | — | — | 1 | — | — | — | — | 1 | — | — | — | 1 | 1 | — | — | — | — | — | — | — | — | 1 | 1 |
| TOTAL MALES .. | 8 | 7 | 9 | 10 | 5 | 4 | 11 | 15 | 54 | 12 | 6 | 1 | 73 | 22 | 22 | 6 | 1 | 2 | 4 | 82 | 1 | 1 | 1 | 1 |
| TOTAL FEMALES .. | 12 | 10 | 9 | 10 | 5 | 6 | 11 | 15 | 53 | 12 | 6 | 1 | 73 | 22 | 22 | 6 | 1 | 2 | 4 | 82 | 1 | 1 | 1 | 1 |

Table No. 8.
DEATHS IN INSTITUTIONS OF PERSONS NOT RESIDENT IN PRETORIA FOR THE YEAR ENDED 30th JUNE, 1947.

| | | 0-1 Year. | | 1-5 Years. | | 5-10 Years. | | 10-20 Years. | | 20-40 Years. | | Over 40 Years. | | Total Europeans. | | Total Non- Europeans. | |
|--------------------------------------|----|--------------|----|---------------|----|----------------|----|-----------------|----|-----------------|----|-------------------|----|---------------------|-----|-----------------------------|----|
| | | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. |
| PRETORIA AND OTHER HOSPITALS. | | | | | | | | | | | | | | | | | |
| European | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. |
| Non-European | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. |
| | | 30 | 18 | 6 | 7 | 3 | 2 | 4 | 2 | 20 | 10 | 86 | 40 | 149 | 79 | — | — |
| | | 37 | 23 | 26 | 16 | 13 | 5 | 18 | 16 | 87 | 35 | 109 | 37 | — | 290 | 132 | — |
| MENTAL HOSPITAL. | | | | | | | | | | | | | | | | | |
| European | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. |
| Non-European | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. |
| | | — | — | — | — | — | — | — | — | 7 | 6 | 27 | 16 | 34 | 22 | — | — |
| | | 1 | — | — | — | — | — | — | — | 7 | 5 | 16 | 6 | — | 24 | 11 | — |
| LEPER ASYLUM. | | | | | | | | | | | | | | | | | |
| European | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. |
| Non-European | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. |
| | | 5 | 1 | — | — | — | — | 1 | 1 | 1 | — | 2 | 1 | 4 | 2 | — | — |
| | | .. | .. | .. | .. | .. | .. | 3 | 5 | 16 | 8 | 24 | 9 | — | 48 | 23 | — |
| PRISONS. | | | | | | | | | | | | | | | | | |
| European | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. |
| Non-European | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. |
| | | — | 1 | — | — | — | — | 2 | — | 20 | 2 | 8 | — | — | — | 30 | 3 |
| VISITORS. | | | | | | | | | | | | | | | | | |
| European | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. |
| Non-European | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. |
| | | 3 | — | 1 | — | 2 | — | — | — | 3 | 1 | 3 | 1 | 6 | — | — | — |
| | | .. | .. | .. | .. | .. | .. | .. | .. | 6 | 2 | 3 | 2 | — | 15 | 4 | — |
| TOTAL EUROPEANS.. | | | | | | | | | | | | | | | | | |
| TOTAL NON-EUROPEANS .. | | | | | | | | | | | | | | | | | |
| | | 30 | 18 | 6 | 7 | 3 | 2 | 5 | 3 | 28 | 19 | 116 | 60 | 188 | 109 | — | — |
| | | 46 | 25 | 27 | 16 | 15 | 5 | 23 | 21 | 136 | 52 | 160 | 54 | — | 407 | 173 | — |

Table No. 10.
NOTIFICATION OF INFECTIOUS DISEASES: IMPORTED CASES: ALL RACES, FOR THE YEAR ENDED 30th JUNE, 1947.

| | 0-1 Year. | | 1-5 Years. | | 5-10 Years. | | 10-20 Years. | | 20-40 Years. | | Over 40 Years. | | Totals. | |
|---------------------------|-----------|----|------------|----|-------------|----|--------------|----|--------------|----|----------------|----|---------|----|
| | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. |
| EUROPEANS. | | | | | | | | | | | | | | |
| Typhoid Fever.. | .. | 1 | .. | 2 | 4 | 1 | 4 | 12 | 13 | 5 | 1 | 3 | 22 | 24 |
| Typhus Fever.. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | 1 |
| Malaria .. | .. | .. | .. | .. | 1 | 1 | 2 | 1 | 6 | 2 | 1 | 2 | 10 | 6 |
| Scarlet Fever .. | .. | .. | .. | 1 | 4 | 5 | 4 | 2 | 2 | 2 | .. | .. | 9 | 10 |
| Diphtheria .. | .. | .. | .. | 11 | 3 | 2 | 3 | .. | 3 | 1 | 1 | 1 | 20 | 15 |
| Erysipelas.. | .. | .. | .. | .. | .. | .. | .. | .. | 1 | 1 | 1 | 2 | 2 | 3 |
| Poliomyelitis .. | .. | .. | .. | .. | .. | .. | 1 | .. | .. | .. | .. | .. | 1 | .. |
| Cerebro-Spinal Meningitis | .. | 1 | .. | .. | .. | .. | 2 | .. | .. | .. | .. | .. | 3 | .. |
| Tuberculosis .. | .. | 1 | .. | 1 | .. | .. | .. | .. | 14 | 2 | 9 | 2 | 25 | 5 |
| Trachoma.. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | 1 | .. | 1 | .. |
| Puerperal Fever .. | .. | .. | .. | .. | .. | .. | .. | 1 | .. | 1 | .. | .. | .. | 2 |
| NON-EUROPEANS. | | | | | | | | | | | | | | |
| Typhoid Fever.. | .. | .. | .. | 4 | 7 | .. | 12 | 13 | 27 | 16 | 3 | .. | 53 | 40 |
| Malaria .. | .. | .. | .. | .. | .. | .. | 3 | .. | 10 | 1 | 4 | .. | 17 | 1 |
| Smallpox .. | .. | .. | .. | .. | .. | .. | .. | .. | 2 | 1 | .. | .. | 2 | 1 |
| Diphtheria .. | .. | .. | 5 | 8 | 6 | 4 | .. | 8 | 1 | 3 | .. | .. | 19 | 21 |
| Leprosy .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | 1 | .. |
| Erysipelas.. | .. | .. | .. | .. | .. | .. | .. | .. | 2 | .. | .. | .. | 2 | .. |
| Poliomyelitis .. | .. | .. | .. | 1 | .. | .. | .. | 1 | .. | .. | .. | .. | 1 | .. |
| Cerebro-Spinal Meningitis | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | 1 | .. |
| Anthrax .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. |
| Tuberculosis .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | 1 | .. | 1 | .. |
| Ophthalmia Neonatorum | .. | .. | 4 | 6 | 9 | 2 | 15 | 6 | 58 | 25 | 38 | 3 | 126 | 53 |
| Trachoma.. | .. | 1 | .. | .. | 1 | 3 | 3 | 2 | 3 | .. | .. | 1 | 1 | 1 |
| Puerperal Fever .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | 10 | .. | .. | 7 | 6 |
| Gonorrhoeal Ophthalmia | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | 1 | 10 |
| Relapsing Fever .. | .. | .. | .. | .. | 1 | .. | 1 | .. | .. | .. | .. | .. | 1 | 2 |
| | .. | .. | .. | .. | .. | .. | .. | .. | 5 | .. | .. | .. | 6 | .. |

Table No. 11.
DISTRICT DISTRIBUTION OF NOTIFIED INFECTIOUS DISEASES FOR THE YEAR ENDED 30th JUNE, 1947.

| DISTRICT. | RACE. | | Cerebro-spinal Fever. | Gonorrhoeal Ophthalmia. | Tuberculosis. | Puerperal Fever. | Infective Encephalitis. | Typhoid Fever. | Ophthalmia Neonatorum. | Malaria. | Diphtheria. | Scarlet Fever. | Erysipelas. | Polionmyelitis. | Trachoma. | Smallpox. | Malta Fever. |
|---|----------|----|--------------------------|----------------------------|---------------|------------------|----------------------------|----------------|---------------------------|----------|-------------|----------------|-------------|-----------------|-----------|-----------|--------------|
| | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | F. |
| Central Area— | European | — | — | — | 5 | — | — | 1 | — | — | 4 | 3 | 7 | — | — | — | — |
| Pretoria West | Non-Eur. | — | — | 1 | 1 | — | — | 1 | — | — | 1 | — | — | — | — | — | — |
| | European | — | — | — | 1 | — | — | — | 1 | — | 2 | 8 | 14 | — | — | — | — |
| | Non-Eur. | — | — | — | — | — | — | — | — | — | — | — | — | 1 | — | — | — |
| Leper and Mental Hospitals, Prison and Defence Reserves | European | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — |
| | Non-Eur. | — | — | 2 | — | — | — | — | — | — | — | — | — | — | — | — | — |
| Roberts Heights— | European | — | — | — | — | — | — | — | — | — | — | — | 2 | — | — | — | — |
| | Non-Eur. | — | — | 3 | — | — | — | — | — | — | — | — | — | — | — | — | — |
| Eastern Suburbs— | European | 1 | — | — | 1 | — | 1 | 2 | — | — | 8 | 15 | 28 | 1 | — | 3 | 1 |
| | Non-Eur. | — | — | 2 | 1 | — | — | — | — | — | 3 | 6 | — | — | — | 1 | — |
| Salvokop— | European | — | — | — | — | — | — | — | — | — | — | 1 | 2 | — | — | — | — |
| | Non-Eur. | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — |
| Northern Suburbs— | European | — | — | 2 | — | — | — | 5 | 1 | — | 9 | 10 | 30 | — | — | — | — |
| | Non-Eur. | 1 | — | 2 | 1 | — | — | 1 | 1 | — | — | — | — | — | — | — | — |
| Marabas— | Non-Eur. | — | — | 9 | 4 | — | — | — | — | — | — | — | — | — | — | — | — |
| Bantule— | Non-Eur. | — | — | 9 | 11 | — | — | — | — | — | — | — | — | — | — | — | — |
| Atteridgeville— | Non-Eur. | — | 2 | 2 | 6 | — | — | — | — | — | 1 | — | — | — | 1 | — | — |
| Asiatic Bazaar— | Non-Eur. | — | — | 9 | — | — | — | 1 | — | — | 2 | — | — | — | — | — | — |
| Cape Location— | Non-Eur. | — | — | 1 | 3 | — | — | — | — | — | 2 | — | — | — | — | — | — |
| Municipal Compound and Hostel— | Non-Eur. | 1 | — | 9 | 5 | — | — | 1 | — | — | — | — | — | — | — | 1 | — |

Table No. 12.

INCIDENCE OF INFECTIOUS DISEASES FOR THE YEAR ENDED 30th JUNE, 1947.

| | | | Typhoid Fever. | Typhus Fever. | Malta Fever. | Malaria. | Smallpox. | Scarlet Fever. | Diphtheria. | Leprosy. | Erysipelas. | Polionmyelitis. | Infective Encephalitis. | Men. Meningitis. | Anthrax. | Tuberculosis. | Ophth. Neonarm. | Lead Poisoning. | Trachoma. | Puerperal Fever. | Gonorrh. Ophthal. | Relapsing Fever. |
|------------|--------------|----------|----------------|---------------|--------------|----------|-----------|----------------|-------------|----------|-------------|-----------------|-------------------------|------------------|----------|---------------|-----------------|-----------------|-----------|------------------|-------------------|------------------|
| July— | | | | | | | | | | | | | | | | | | | | | | |
| | European | Resident | 1 | — | — | — | — | 15 | 4 | — | 2 | — | — | 1 | — | 1 | — | — | — | — | — | — |
| | | Imported | 2 | — | — | — | — | — | 3 | — | — | — | — | — | — | 6 | — | — | — | — | 1 | — |
| | Non-European | Resident | — | — | — | — | — | — | — | — | — | — | — | — | — | 6 | — | — | — | — | 1 | — |
| | | Imported | 6 | — | — | — | — | — | — | — | — | — | — | — | — | 8 | — | — | 1 | 1 | 1 | — |
| August— | | | | | | | | | | | | | | | | | | | | | | |
| | European | Resident | 1 | — | — | — | — | 15 | 1 | — | 2 | — | — | — | — | 2 | — | — | — | — | — | — |
| | | Imported | 2 | — | — | 1 | — | 3 | 1 | — | — | — | — | — | — | — | — | — | — | — | — | — |
| | Non-European | Resident | — | — | — | — | — | — | — | — | — | — | — | — | — | 12 | 1 | — | — | — | — | — |
| | | Imported | 7 | — | — | 2 | — | — | 1 | — | — | — | — | 1 | 1 | 36 | — | — | — | — | — | — |
| September— | | | | | | | | | | | | | | | | | | | | | | |
| | European | Resident | — | — | — | — | — | 4 | 3 | — | 2 | — | — | 1 | — | — | — | — | — | — | — | — |
| | | Imported | 3 | — | — | 1 | — | 2 | 2 | — | 2 | — | — | — | — | 5 | — | — | — | — | — | — |
| | Non-European | Resident | — | — | — | — | — | — | — | — | — | — | — | — | — | 4 | — | — | — | — | — | — |
| | | Imported | 5 | — | — | — | — | — | 3 | — | — | — | — | — | — | 21 | — | — | 1 | 1 | — | 1 |
| October— | | | | | | | | | | | | | | | | | | | | | | |
| | European | Resident | — | — | — | — | — | 10 | 8 | — | 4 | — | 1 | — | — | 3 | — | — | — | — | — | — |
| | | Imported | 2 | — | — | 2 | — | 2 | 3 | — | — | — | — | — | — | 4 | — | — | 1 | — | — | — |
| | Non-European | Resident | — | — | — | — | — | — | — | — | — | — | — | 1 | — | 14 | — | — | — | — | 2 | — |
| | | Imported | 3 | — | — | — | — | — | — | — | — | — | — | — | — | 22 | — | — | 2 | 3 | 1 | — |
| November— | | | | | | | | | | | | | | | | | | | | | | |
| | European | Resident | 1 | — | — | — | 3 | 18 | 2 | — | 2 | — | — | — | — | 2 | — | — | — | — | — | — |
| | | Imported | 6 | — | — | 1 | — | 1 | 3 | — | 1 | — | — | — | — | 2 | — | — | — | — | — | — |
| | Non-European | Resident | 1 | — | — | — | — | — | — | — | — | — | — | 1 | — | 4 | — | — | — | — | 1 | — |
| | | Imported | 3 | — | — | — | — | — | — | 1 | 1 | — | — | — | — | 16 | — | — | 4 | — | — | — |
| December— | | | | | | | | | | | | | | | | | | | | | | |
| | European | Resident | 1 | — | — | — | — | 16 | 2 | — | — | — | — | — | — | 1 | — | — | — | — | — | — |
| | | Imported | 2 | — | — | 3 | — | 1 | 1 | — | — | — | — | — | — | 1 | — | — | — | — | — | — |
| | Non-European | Resident | 1 | — | — | — | — | — | 1 | — | — | — | — | — | — | 4 | — | — | — | — | — | — |
| | | Imported | 11 | — | — | 1 | — | — | 1 | — | — | — | — | — | — | 13 | — | — | — | — | — | — |
| January— | | | | | | | | | | | | | | | | | | | | | | |
| | European | Resident | 1 | — | — | — | — | 6 | — | — | — | — | — | — | — | 1 | 1 | — | — | — | — | — |
| | | Imported | 6 | — | — | 2 | — | 2 | 1 | — | — | — | — | — | — | 2 | — | — | — | — | — | — |
| | Non-European | Resident | 3 | — | — | — | — | — | 2 | — | — | — | — | — | — | 12 | — | — | — | — | — | — |
| | | Imported | 15 | — | — | — | — | — | 1 | — | — | — | — | — | — | 7 | — | — | — | — | — | 3 |
| February— | | | | | | | | | | | | | | | | | | | | | | |
| | European | Resident | 1 | — | — | — | — | 13 | 1 | — | — | — | — | — | — | 3 | — | — | — | — | — | — |
| | | Imported | 5 | 1 | — | — | — | 1 | 4 | — | — | — | — | — | — | 2 | — | — | — | — | — | — |
| | Non-European | Resident | — | — | — | — | — | — | 1 | — | — | — | — | — | — | 6 | — | — | — | 1 | 1 | — |
| | | Imported | 7 | — | — | 3 | — | — | 4 | — | — | — | — | — | — | 15 | 1 | — | 2 | 2 | — | 1 |
| March— | | | | | | | | | | | | | | | | | | | | | | |
| | European | Resident | 2 | — | 1 | 1 | — | 12 | 6 | — | 1 | 2 | 1 | — | — | — | — | — | — | — | — | — |
| | | Imported | 7 | — | — | 1 | — | 3 | 1 | — | 1 | — | — | — | — | 1 | — | — | — | 1 | — | — |
| | Non-European | Resident | 1 | — | — | — | — | — | 8 | — | — | — | 1 | — | — | 10 | — | — | — | — | — | — |
| | | Imported | 16 | — | — | 6 | 1 | — | 9 | — | 1 | 1 | — | — | — | 12 | 1 | — | — | — | — | — |
| April— | | | | | | | | | | | | | | | | | | | | | | |
| | European | Resident | 2 | — | — | — | — | 15 | 8 | — | 1 | — | — | — | — | 1 | — | — | — | — | — | — |
| | | Imported | 8 | — | — | 3 | — | 2 | 5 | — | — | 1 | — | — | — | 3 | — | — | — | — | — | — |
| | Non-European | Resident | 1 | — | — | — | — | — | 2 | — | — | — | — | — | — | 9 | — | — | — | — | — | — |
| | | Imported | 8 | — | — | 3 | 1 | — | 10 | — | — | — | — | — | — | 7 | — | — | 2 | 1 | — | — |
| May— | | | | | | | | | | | | | | | | | | | | | | |
| | European | Resident | 1 | — | — | — | — | 10 | 8 | — | — | — | 1 | — | — | — | — | — | — | — | — | — |
| | | Imported | 2 | — | — | 2 | — | 2 | 7 | — | — | — | — | 2 | — | 2 | — | — | — | — | — | — |
| | Non-European | Resident | 1 | — | — | — | — | — | 6 | — | — | — | — | — | — | 7 | — | — | 1 | — | — | — |
| | | Imported | 6 | — | — | 2 | 1 | — | 6 | — | — | — | — | 1 | — | 9 | — | — | — | 1 | — | — |
| June— | | | | | | | | | | | | | | | | | | | | | | |
| | European | Resident | — | — | — | — | — | 17 | 9 | — | — | — | — | — | — | — | — | — | — | — | — | — |
| | | Imported | 1 | — | — | — | — | — | 4 | — | 1 | — | — | 1 | — | 2 | — | — | — | — | — | — |
| | Non-European | Resident | — | — | — | — | 2 | — | 1 | — | — | — | — | 1 | — | 3 | — | — | — | — | — | — |
| | | Imported | 6 | — | — | 1 | — | — | 4 | — | — | — | — | — | — | 13 | — | — | 1 | 1 | 1 | 1 |



