CONGRESS AT CARDIFF.

CONFERENCE OF SANITARY INSPECTORS.

ADDRESS

By G. H. ANDERSON,

Chairman Central Executive Council, Sanitary Inspectors' Association,

PRESIDENT OF THE CONFERENCE.

(MEMBER.)

IN the first place I desire to express my sincere thanks to the Council of The Royal Sanitary Institute for extending to me the privilege of presiding over this important meeting of sanitarians assembled to-day in Cardiff. The honour is greatly enhanced by the fact that it comes during my term of office as Chairman of the Executive Council of the Sanitary Inspectors' Association.

I think you will agree that the Council of The Royal Sanitary Institute deserves great praise from the public in general, and sanitarians in particular, for arranging these annual health congresses in various parts of Great Britain and Ireland. They are the best possible means of stimulating public opinion, they also invite the criticism and co-operation of all those who are interested in carrying out the numerous Acts for improving the conditions of the people.

I will not dilate upon any set subject lest my remarks may overlap in some degree the papers that are about to be submitted. My remarks will rather be general, and I trust that our deliberations may, by the interchange of ideas, prove beneficial to us as sanitarians, to the municipalities by whom we are employed, and to the general public whom we serve.

Since September, 1906, my thoughts have frequently turned to the paper contributed by Mr. W. W. West, at the congress of sanitary inspectors held in Blackpool. At the outset I desire to say that I for one responded to his call for a revival of the old crusade with cleanliness as our standard, and I would now press on you to return to it, and, whilst fighting for it, to give your whole and undivided allegiance to

that motto. We claim that we are the apostles of cleanliness, our mission is to seek out and purify what is foul in our various districts, and ever to remember when acting as public officers that the greatest good will result from our work, when we are able to successfully combat ignorance and vested interest, by proving the reasonableness of our requirements.

I do not for one moment desire to minimise the necessity for scientific research as to the absolute origin of disease; by all means let this proceed, and let us hope for further knowledge. Nevertheless, if the searching for the unknown is to become a fetish, if it is to overshadow the value of what we actually know, then I fearlessly say that it were better that the search proceeded no further, and that we should depend upon the proved value of cleanliness alone.

Much has been said as to what is the duty of a sanitary inspector, and what is that of a medical officer of health. I would venture at once to suggest that in the great work of improving the health of the people, that the *man and the germ*, as representing the soil and the seed, shall be left to the medical officer of health, and to us should be committed the environment of the man. Intimate indeed is the connection between our work, and the resultant harvest will entirely depend upon the careful blending and utilisation of our joint efforts.

Scientific research as to the germ and its action upon the body deals with matter possessing innate and differentiating force, and cannot therefore ever be brought to the accuracy of astronomical or chemical science. Hence it is essential that the environment should, as far as possible, render this force incapable of extending injury.

It is impossible to dogmatise as to germ action, or as to the results of germ action on individuals, the most that can be done is to state its results on a proportion of those under its influence, and we sanitary inspectors are not specially trained to follow all the theories built around this subject which proves so fascinating to the public.

But the lessons of the past lie ready to our hand. Cleanliness is next to godliness, and prevention is better than cure. Where the sun shines the doctor cannot get a living, so we must not be led away by the fascination of the unknown and attempt to obtain useless credit by dabbling in the mysteries of, say, tuberculous germs in milk. Ours the prosaic and lowly task of securing *cleanliness*, of the udder, of the milk pail, the floors, the walls, the pond. Our labours may often be forgotten, but the harvest will be found in an inevitable improvement in the public health.

Professor de Chaumont years ago claimed that if overcrowding was non-existent our death-rate would be reduced by *one-fourth*. The abate-

ment of overcrowding is certainly our work, and a result such as is foreshadowed dwarfs the possibilities of even the removal of phthisis by the extirpation of its germ, for even this fearful disease is only responsible for *one-ninth* of the total deaths.

In the first Presidential Address delivered by Sir Benjamin Ward Richardson to the Sanitary Inspectors' Association he laid great stress upon the unique value of cleanliness, and said that if by some magic spell England could wake up to-morrow clean, she would wake up pure in spirit and godly in the comprehension of goodliness. Cleanliness covers the whole field of sanitary labour, it is the beginning, it is the end. Practised in its entirety it would banish disease from the world, and Sir Benjamin claimed that all methods for preventing disease without cleanliness were mere sounding brass and tinkling cymbals, nothing else touches the death-rate.

The present Principal Medical Officer of the Local Government Board, Dr. Arthur Newsholme, in speaking of the duties and the difficulties experienced by sanitary inspectors, said it was their duty to watch and track in detail all conditions which make for disease. Many of their duties were irksome, and might appear even paltry in their detail, but whilst they were acting as home missionaries to the poor and helpless, in so far as they increased their cleanliness and self-respect, their influence on the community could not be overlooked.

I have tried to give due importance to that prosaic side of sanitation cleanliness, and I ask you not to allow the red herring trail of bacteriological science to be drawn across your path. Our work will still be required when all germs have been localised and duly allotted to their special functions, their life history defined and well understood.

The enormous improvement in public health that has taken place, the stupendous result in life saving and health promoting that has been accomplished by sanitary inspectors, cannot be better expressed than in the words of Sir Edward Chadwick, when, after giving us a series of statistics, he said that though his facts were high and dry, yet they would form a good basis to build upon long after he had ceased to be. They would suggest to us the grandeur, the importance, and even the solemnity of our work.

Though some would call the removal of some of the most offensive causes of death and disease *menial work*, yet it was work that conveyed a practical lesson to the world, of the methods whereby the happiness, the brightness, the comfort and strength of the world were secured. We might accept it from him, as one who had seen eighty-six summers, that ours was

as good a work as the sun ever shone on, and that long before another eighty-six summers had passed away it would be recognised as work deserving of the fullest recognition and the most befitting rewards, if it continued to be carried out in the spirit, as in the letter, faithfully, vigorously, hopefully and manfully.

Surely we may here bring our minds to bear upon the practical side of sanitation, the details of the structure of the houses the people live in, the cleanliness of the floors of the beds on which the people sleep (the dangers of which have been so vividly denounced by Mr. Peter Fyfe), the purity of the food they eat, the condition of the dairy, the slaughter house, the butcher's shop, the travelling van, the canal boat, the means of preventing the fouling of the atmosphere by smoke, and the hundred and one matters upon attention to which depends the public health, well knowing that if the immediate environment of the people be clean, the germ has little chance of finding a resting place.

But in our strenuous efforts to obtain the conditions necessary for the proper environment of the people, we must necessarily frequently fall foul of those stumbling-blocks to progress, ignorance, vested interests, and the so-called liberty of the subject, and we may be persecuted by one or other of them. Surely this is sufficient reason why we should have adequate protection by a proper tenure of office whilst fighting such giants.

Dr. Arthur Newsholme has himself told us that insecurity of tenure of office is a grievous difficulty in the path of some inspectors. The duties of a sanitary inspector are such as almost necessarily bring him into antagonism with those amongst his employers who are owners of house property, and especially does this occur in districts where insanitary conditions are rife. The fact also that the inspector is liable to risks connected with periodic re-election handicaps his work, and renders it extremely difficult for him to discharge his duties in a fearless and fully satisfactory manner.

Perhaps there is a better time now approaching, for maybe the eminently practical President of the Local Government Board, Mr. John Burns (from whom sanitary inspectors have expected so much, and have received so little) may be brought to appreciate the value of our work, and support us in our laudable endeavours to improve the conditions under which the people live.

Most of us will agree that there is ample scope for women in the administration of public health work. There are numerous duties which they are particularly fitted to discharge and do so with infinite credit to themselves and advantage to the service. Visiting the houses of the

poorer classes and pointing out the advantages of order, cleanliness and ventilation in their homes; instructing young mothers with regard to feeding and rearing children; inspecting houses let in lodgings and tenement houses; enforcing cleanliness and preventing overcrowding; investigating the causes of the deaths of children (with the object of diminishing the altogether too high infantile mortality); inspecting workshops where women are employed; visiting the houses of outworkers; and carrying out the duties entailed by the Midwives Act and Births Act, are all duties which can be discharged with distinct advantage by the health visitor, without encroaching upon or overlapping the duties to be performed by the sanitary inspector.

I think that the legislature never contemplated that women should be designated sanitary inspectors. The London boroughs are mainly responsible for this innovation, for in order to obtain the grants sanctioned by the Local Government Board to the salaries of sanitary inspectors, women have from time to time been appointed as such, the various authorities well knowing that women were physically unable to discharge all the duties.

It is unreasonable to expect a woman to become an expert in drain laying and testing, designing and superintending structural alterations, reconstructing sanitary conveniences, condemning defective plumbers' and builders' work, inspecting canal boats, slaughter houses, offensive trades, lodging houses, etc., yet these are every day duties that fall to the lot of the sanitary inspector.

I am glad to see that The Royal Sanitary Institute has at length recognised this fact, and has instituted a special examination for women health visitors. Might we not recommend them to go a step further, and endeavour to obtain from the Local Government Board the same concession regarding salaries as at present allowed for sanitary inspectors. If this were done, women would in future be appointed as health visitors and would discharge the duties for which nature has endowed them, and much of the vexatious overlapping of duties that at present exists would disappear, and the work would be performed in perfect harmony.

I was very much surprised a few months ago to find a sanitary inspector in one of our large cities advocating that women workers in sanitary departments should receive the same salary as sanitary inspectors. He also congratulated them upon their independence in working for their own living in preference to marrying simply for the purpose of obtaining a home.

With regard to salary I certainly think that it would be unreasonable

to pay women the same rate of wages as men, for the responsibilities of the former cannot be compared with the latter. Man invariably marries, and takes a woman to share his joys and sorrows; as a natural consequence, children follow who have to be reared, clothed and educated.

I would respectfully suggest that it is the duty of a woman to marry, or how is our race to be maintained? If they evade this responsibility they must necessarily enter into competition with men for all appointments for which nature has endowed them. Their wants being few, and only having lodgings to provide instead of maintaining a home, rearing and educating a family, and the manifold expenses incidental thereto, it necessarily follows that men would be seriously handicapped, should such advice be generally acted upon.

Of course there will always be some women who from one cause or another do not marry, and for these a profession or vocation becomes necessary, but let us encourage the belief that a woman's glory should be her home, her husband, and her children.

In conclusion let me again impress upon you the advantage to be gained by all sanitary inspectors being enrolled under one banner, and becoming active members of the Incorporated Sanitary Inspectors' Association.

This Association was formed a quarter of a century ago for the promotion and interchange amongst its members of both practical and theoretical sanitary science, and the knowledge of the rights, liabilities and duties of sanitary inspectors.

During the twenty-five years of its existence the death-rate has fallen considerably, and it is only fair to claim that we have contributed in no small degree to this desirable state of affairs.

Our Association numbers about 1,400 members, in ten centres. Each centre conducts its own business in its particular district. We are also affiliated with the Sanitary Inspectors' Association of Scotland.

At the present moment we are associated with the National Association of Local Government Officers, with the object of bringing forward a Bill to secure superannuation for all Local Government officers.

As to tenure of office, the Association, in conjunction with the British Medical Association, has before Parliament a Bill with the object of securing this, and we are resolved to press it forward by every legitimate means in our power.