

Government and Social Conditions in Scotland

1845-1919

edited by Ian Levitt, PH.D



EDINBURGH

printed for the Scottish History Society by

BLACKWOOD, PILLANS & WILSON

1988

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Scottish History Society

1988

ISBN 0 906245 09 5

Printed in Great Britain



PREFACE

A work of this kind, drawing on material from a wide variety of sources, could not have been possible without the active help and encouragement of many people. To name any individual is perhaps rather invidious, but I would like to draw special attention to the assistance given by the archivists, librarians and administrative officers of those authorities whose records I consulted. I would hope that this volume would in turn assist a wider understanding of what their archives and libraries can provide: they offer much for the history of Scotland. I must, however, record my special thanks to Dr John Strawhorn, who kindly searched out and obtained Dr Littlejohn's report on Ayr (1892).

I am greatly indebted to the following for their kind permission to use material from their archives and records:

The Keeper of Records, the Scottish Record Office
The Trustees of the National Library of Scotland
The Archivist, Strathclyde Regional Council
The Archivist, Ayr District Archives
The Archivist, Edinburgh District Council
The Archivist, Central Regional Council
The Archivist, Tayside Regional Council
Midlothian District Council
Fife Regional Council
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The Librarian, Renfrew District Library
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Her Grace The Duchess of Buccleuch

I should like to thank Dr T.I. Rae, the Society's Hon. Publications Secretary, for his assistance in preparing the text for publication. Without his advice, patience and good humour the volume would have been considerably delayed. Special thanks must also be given to Plymouth Polytechnic who granted me a fellowship term in order that the work might begin, and provided facilities for the preparation of the text. At the same time, I must also record my thanks to the Department of Sociology, Edinburgh University, who kindly provided me with accommodation during my term in Scotland.

IAN LEVITT

Plymouth
May, 1988

*A generous contribution from the
Carnegie Trust for the Universities of Scotland
towards the cost of producing this volume
is gratefully acknowledged by the
Council of the Society*

ABBREVIATIONS AND SOURCES

Abbreviations

ADA	Ayr District Archives
EDA	Edinburgh District Archives
NLS	National Library of Scotland
SRA	Strathclyde Regional Archives
SRO	Scottish Record Office
AD	Advocate's Department Papers
DD	Development Department Papers
GD	Gifts and Deposits
HH	Home and Health Department Papers
BS MB	Board of Supervision Minute Book
BS PHMB	Board of Supervision Public Health Minute Book
BS PHMB(CH)	Board of Supervision Public Health Minute Book, Chairman's
CPHM	Combination Poorhouse Minutes
PBM	Parochial Board Minutes
PBM(LA)	Parochial Board Minutes (Local Authority)
PBM(LW)	Parochial Board Minutes (Landward)
PBM(PH)	Parochial Board Minutes (Poorhouse)
PCM	Parish Council Minutes
PCMB	Police Commissioners Minute Book
PP	Parliamentary Papers
TCM	Town Council Minutes
TCM(LA)	Town Council Minutes (Local Authority)
TCM(PC)	Town Council Minutes (Police Commissioners)
TCM(PH)	Town Council Minutes (Public Health)

Sources for Biographical Notes

Arbroath Herald
British Medical Journal
Burke's Landed Gentry
Burke's Peerage
Debrett
Dundee Courier and Advertiser
County and Municipal Record
Edinburgh Medical Journal
Glasgow Herald
Lancet
National Dictionary of Biography
Poor Law Magazine
Scots Pictorial
Scotsman
West Lothian Courier
Who's Who
The Medical Directory
The Sanitary Journal of Scotland

Lothian Papers	SRO
McNeill Papers	SRO
Rosebery Papers	NLS
Dewar, T.F.,	<i>With the Scottish Yeomanry.</i> (Arbroath, 1901)
Dewar, T.F.,	<i>On the Sanitation of Armies . . . in the Field.</i> (Arbroath, 1905)
Dewar, T.F.,	<i>Medical Vignettes.</i> (Glasgow, 1928)
Eddington, A.,	<i>Contemporary Biographies.</i> (Edinburgh, 1904)
Gaskell, E.,	<i>Leaders of the Lothians.</i> (London, 1912)
Grant, F.J. (ed.),	<i>The Faculty of Advocates in Scotland, 1532-1943.</i> (Edinburgh, 1944)
Groome, F.H.,	<i>Ordnance Gazetteer of Scotland.</i> (Edinburgh, 1882)
Knight, W.,	<i>Some 19th Century Scotsmen.</i> (Edinburgh, 1906)
Lawson, J.P.,	<i>History of Scottish Episcopalian Church.</i> (Edinburgh, 1843)
Loder, J.D.V.,	<i>Colonsay and Oronsay.</i> (Edinburgh, 1935)
MacAlister, F.S.,	<i>Memoir of Sir John McNeill.</i> (London, 1910)
Russell, J.B.,	<i>Public Health Administration in Glasgow.</i> (Glasgow, 1905)
<i>Scottish Biographies.</i>	(Glasgow, 1938)
Skelton, J.,	<i>Benjamin Disraeli, The Past and the Future.</i> (Edinburgh, 1868)
Skelton, J.,	<i>Mary Stuart.</i> (Paris, 1893)
Skelton, J.,	<i>Table Talk.</i> (Edinburgh, 1895)

INTRODUCTION

WHEN THE BOARD OF SUPERVISION for the Relief of the Poor was created in 1845 it represented an important departure in the ordinary administration of Scotland. Never before had Scotland seen central control of its welfare system, nor, since the Jacobite Rebellion, had the British government allowed a principal public department north of the Border. Although the Board, apart from its chairman, Sir John McNeill, was part-time, it heralded the beginning of modern Scottish Government. From 1845 onwards there was always a Scottish institution able, and indeed with a statutory responsibility, to monitor the condition of the poor and ensure their needs were met. This responsibility was added to by the 1867 Public Health Act; the Board also supervised 'nuisance' removal, the regulation of common lodging houses and the control of epidemic disease. It was a wide remit which meant that after 1867 the Board had a duty to monitor sanitary conditions and ensure some modicum of public health.

The Board was never a political creature. In fact, constitutionally it had been created a sub-department of the Home Office, a sub-department status that remained when the newly established Scottish Office assumed the Home Office's powers in 1885. Before 1885 there is little evidence that the Home Office, or Parliament for that matter, took much interest in its work. For its first twenty-five years, the Board was mentioned just four times in the Commons and on two of these, the M.P. concerned seemed confused as to what it did. This lack of Government and Parliamentary interest meant the Board was left much to itself. Although the Board invariably looked to see what the English Local Government Board was suggesting before it issued any new public health circular, Scottish health and welfare administration remained remarkably free from the hum-drum of British politics.¹

¹ Evidence of Walker, to *Royal Commission on Housing*. C.4409-1. (P.P. Vol. XXXI 1884-5) p.8.

In an age of a burgeoning democracy, especially after the 1885 Franchise Act, such a scheme of administration was bound not to last. Some Liberal criticism about its unelected constitution in the 1870s resurfaced in the early 1880's, but it was not until the Earl of Wemyss objected to the tone of one of its Public Health circulars in 1891 ('Your lordships may wish to know what the Board of Supervision means. It means bureaucracy and it lives at 127 George St'), that any real Parliamentary disquiet over what it did, or how it implemented policy emerged.²

The Board reconstituted as a Local Government Board in 1894, with three full-time members, a chairman, an advocate and a doctor with a public health qualification, and under the Presidency of the Scottish Secretary represented the political response. After that the new Board became an administrative department of the Scottish Office, with all important policy decisions referred to the Scottish Secretary. The Government's attitude towards contemporary social conditions had therefore become political, and gradually over the next twenty years the Board's role in combatting poverty, the inadequacies of public health and the chronic housing situation began to dominate Scottish Parliamentary discussion. At the same time a succession of Acts, dealing with public health, the medical inspection of schoolchildren, the notification of infant births, child life protection, and national insurance for unemployment and sickness, were passed. Similarly four important Royal Commissions, into the physical training of schoolchildren, the treatment of mental illness, the Poor Laws, and housing, were established. In the wake of all this activity a new formulation of the Government's responsibility towards welfare emerged, one which eventually led to the Board's abolition and its replacement with a larger, and constitutionally a more interventionist, Board of Health.

Although much has been written about conditions in 19th century Scotland, and indeed about the general development of

² *Hansard* 356 (Third Series) p.1238, 4.8.91. The Earl of Camperdown in the same debate complained of its 'epistolary style'. See also *ibid.* 230 pp.504-35, 27.5.76; *ibid.* 283 p.609, 15.3.83.

welfare policy, to date there has been surprisingly little detailed analysis or comment on the role of the Boards, or of its members, or of its staff.³ The extracts in this volume are therefore an attempt to redress that imbalance and put what others have said in a different context. They have been selected to address three issues. First, to provide an assessment of the nature of domestic Scottish Government and how it changed. Second, to illustrate its view of the Scottish people, their lives, habits and customs. Third, to indicate how it came to terms with the problems, in health, welfare and housing, of a fast growing industrial economy.

Material for the volume has been sought from a variety of sources and archives. They include: Board minutes; Board letters; reports completed by its medical and outdoor officers; reports completed at the request of the Board by the parish or local authority; and finally other material relating to their work. Each extract has been prefaced with a short explanation indicating its relevance and, where appropriate, its consequence.

Much of what the Boards did, of course, was a matter of administrative routine, for instance following up complaints of inadequate poor relief, receiving financial and other statistical returns, advising local authorities on applications for Government loans; and its minutes and annual reports faithfully record this activity. Nevertheless, when local administration did break down, or was otherwise felt to be inadequate, the Board felt obliged to comment more fully on what had occurred, and the extracts reproduced here, apart from chapter one, are essentially

³ Some recent works include, Adams, I.H., *The Making of Urban Scotland*. (London, 1978); Checkland, E.O., *Philanthropy in Victorian Scotland*. (Edinburgh, 1980); Checkland, E.O., and Lamb, M. (eds.), *Health Care as Social History*. (Aberdeen, 1982); Checkland, S. and E.O., *Industry and Ethos*. (London, 1984); Flinn, M.W. (ed.), *Scottish Population History from the Seventeenth Century to the 1930s*. (Cambridge, 1977); Gordon, G. and Dick, B., (eds.) *Scottish Urban History*. (Aberdeen, 1983); Gordon, G. (ed.), *Perspectives of a Scottish City*. (Aberdeen, 1985); Levitt, I. and Smout, C., *The State of the Scottish Working Class in 1843*. (Edinburgh, 1979); Smout, T. C., *A History of the Scottish People, 1830-1950*. (London, 1986); Tait, H.P., *A Doctor and Two Policemen*. (Edinburgh, 1975); Treble, J.H., *Urban Poverty in Britain, 1830-1914*. (London, 1979). Only Paterson, A., 'The New Poor Law in Scotland after 1845', in Fraser, D. (ed.), *The New Poor Law in the Nineteenth Century, 1780-1918*. (London, 1976) specifically provides any detailed assessment. Ferguson, T., *The Dawn of Scottish Social Welfare*. (Edinburgh, 1944) and *Scottish Social Welfare, 1864-1914*. (Edinburgh, 1958) goes through much of the Boards' published material, but provides little critical comment.

a record of these. They provide a unique opportunity to see Government operating at the boundaries of public life, when it felt the necessity to intervene and either reprimand a local authority, or recommend a particular course of action.

It should be noted that the only consistent central record to survive has been the published annual reports of the Board of Supervision and the Local Government Board, and the Board of Supervision's minute book. To obtain further detail of their activities it has been necessary to use other sources, principally of parochial boards, parish and burgh councils. The practice of engrossing letters and reports from the Board in these minutes varied and regretfully some interesting material could not be followed up. (The normal practice of both Boards was to return outdoor officer reports to the parish or local authority, drawing attention to whatever aspect of its work the officer felt required some action.) Occasionally Board reports were reprinted in newspapers and other journals and in the evidence of its officers to Parliamentary inquiries, and these too have been used. Some of the extracts, such as Dr Littlejohn's report on Ayr's lodging houses, the Hunter case in Dundee and Dr Dittmar's report on Hamilton, are the only remaining examples of their type.

The extracts largely cover urban-industrial Scotland. It was in this area and the problems it faced with housing, poverty and public health, rather than in the Highlands or the rural south, that underlay much of contemporary social legislation, and which at the beginning of the 20th century caused a reformulation of the State's attitude to public welfare. A good representation of extracts from across central Scotland has been sought, though the Boards seemed more ready to hold inquiries around Edinburgh.

The extracts have also been selected to reflect the totality of the Boards' work. Hence, the volume represents not just a record of what occurred, but also what type of minutes, regulations, letters and reports were written by the Boards and their staff. (Board of Supervision minutes were written by the Chairman, letters and circulars usually by the Secretary.) A number of extracts also include local reaction to what they said, or requested. These have been included to indicate more fully their impact on local

administration. Similarly a number of extracts, such as Barclay's evidence to the Vagrancy Committee, although not strictly speaking Board minutes or reports, have been included. These, it is felt, provide additional information on their work.

The volume has been divided into a number of chapters arranged around six topics. These are in some respects artificial, for instance the issue of vagrancy was seen by the Boards as both one of pauperism and public health, and impure water affected both the quality of housing and the extent of infectious disease. But allowing for some overlap, presenting the extracts in this way enables a sharper insight on one of the critical concerns of the early 20th century; how far the State recognised promoting 'the health of the people' as of 'paramount importance'.⁴

The Appendix provides detail of the Boards' constitution, a list of their members and principal staff, a table of the number of special inquiries they commissioned and a short biography of those members and staff whose work has been included.

The remainder of this introduction provides an overview of the principal acts that affected their work and of the development of policy.

The Nature of Government. The Board of Supervision had been established as a result of the 1844 Royal Commission on the Poor Law.⁵ This Commission had painted an appalling picture of how Scotland treated its poor. In many areas, especially in the South-West and the North, the Poor Law was virtually non-existent. Allowances, where they existed, were often a pittance and were assumed to supplement begging and charity.

The principal intention of the resulting 1845 Poor Law (Scotland) Amendment Act was therefore the 'better administration' of parochial affairs. A centralised Board with power to regulate parish activity, it was thought, would ensure a more uniform and adequate system. Nevertheless, the Board, in supervising local activity, faced two severe handicaps. First, it

⁴ Address of Robert Munro, Secretary for Scotland, to inaugural meeting of the Scottish Board of Health, 18.7.19, in *Scotsman*, 19.7.19.

⁵ Report of the Royal Commission on the Poor Law (Scotland). (P.P. Vols. XX-XXV 1844).

was given only four clerks to handle whatever paperwork (for example, parish returns, pauper appeals, Board circulars) was necessary. Second, if there was a need to investigate any complaint of alleged parish misdemeanour, then it had to be conducted either through correspondence, or by establishing an inquiry. For the latter, the Board could use its own members, its staff, or, with Home Office approval, appoint outside commissioners.⁶ The problem that this brought can be seen in the first extract (p.1); occasional inquiries were not systematic enough to ensure the Act was properly implemented.

The appointment of the first Visiting Inspector in 1852 therefore marked an important turning point in Scottish government, the first time an Edinburgh Office had the ordinary means regularly to monitor and advise local government. (He was renamed 'Officer' in 1861.) On what basis the Board should supervise parishes soon became a key issue in central-local relationships and the remainder of this chapter deals principally with the gradual increase in the Board's powers to regulate, approve and control what they, and later the local authorities, could do.

In 1856 the General Superintendents of Poor were appointed (see extract p.4). These officers formed what was essentially a 'travelling Board', and until 1868, it seems they were relatively free to suggest their own policy or initiate inquiries. Their 'office', in fact, was their own home. This changed with Walker's appointment as chairman. All the outdoor officials were expected to attend the Board's offices for a two week briefing session each year.⁷

Nevertheless, the officers continued to retain considerable independence. Although it was said Skelton gave the new and harsher Poor Law policy (see Chapter Two) its legal foundation,

⁶ Commissioners so appointed had to be either 'a member of the Faculty of Advocates, a duly qualified medical practitioner, or an architect or surveyor'. For a listing of occasional inquiries, see *Return relative to each Parish in Scotland, of all Inquiries instituted by the Board of Supervision . . . from January 1846 to January 1855*, and *Alphabet Return of the Parish in each County in Scotland, showing the Date at which each Parish has been visited under orders of the Board of Supervision*. (P.P. Vol. XLVI 1855). Note also Peterkin's comment to, *Select Committee on the Poor Law, 1870*. (P.P. Vol. XI 1870) p.318.

⁷ Minute of Board of Supervision 12.10.68, SRO HH23/13.

the original idea for an alternative strategy came from two outdoor officers (Alexander Campbell and Malcolm M'Neill), and indeed the stridency of their reports far outmatched that of the Board's minutes and other correspondence. Similarly it was the outdoor officers who first raised the issue of Scotland's housing, commenting freely in the 1880s that the quality of accommodation was poor and that employers ought to take greater steps to ensure their workers were adequately housed.⁸

This independence lasted until the 1900s and only came to an end after the Board was reconstituted following M'Neill's retiral and Russell's death. New and detailed instructions on how they should conduct their inquiries were issued and it seems that they were so overwhelmed by Poor Law matters that their inspections under the Public Health Act declined.⁹

The relationship of the medical profession to the formulation and execution of policy had always been a problem for the Board. The Board, dominated it should be noted by advocates and landowners, remained skeptical that the appointment of a doctor to the Board could enhance its impartial reputation. The Board's authority, it thought, was derived from its quasi-judicial stature, its ability to pass minutes which could then be used as evidence of a parochial or local authority's failure to 'discharge' their duty. When in the 1870's, the Board felt that some technical assistance was necessary, all it was prepared to concede was the appointment of Dr Littlejohn as a part-time medical officer. Part-time

⁸ For instance, Half-yearly Report by Alexander Campbell, Inspecting Officer, dated May 1887, in *Annual Report of the Board of Supervision, 1886-7*. C.5118. (P.P. Vol. XXXVII 1887) App.(A), No.8, p.22, and Half-yearly Report by G. Falconar-Stewart, Inspecting Officer, dated 18.4.90, in *Annual Report of the Board of Supervision, 1889-90*. C.6121. (P.P. Vol. XXXIV 1890) App.(A), No.11, pp.26-27.

⁹ Evidence of MacKenzie, to *Royal Commission on the Poor Law (Scottish Evidence)*. Cd.4978 (P.P. Vol. XLVI 1910) p.202; and for the revised Poor Law form, see Appendix No. CLVIII(B) and No. CLVIII(D). It contained some thirty-eight questions, mostly on administrative matters, but questions 11-18 dealt with the supervision of foster children, and specifically asked for comment on the 'Character of Guardians, Health of child, etc.'. Questions 27-31 were on the condition and occupancy of parochial lodging houses. There was a separate form for poorhouses (fifty-five questions), and another for their sick wards (forty-nine questions). They dealt principally with sanitary conditions, the cleanliness of the inmates, the provision of food, the existence of 'test' work and the adequacy of medical care. The previous parish form was similar to that used for public health purposes (see Lochgelly extract, p.182), except that it asked for information on the inspector of poor and for the number of poor assisted: see SRO HH 40/13.

meant no assumption of superiority and little likelihood of the officer generating his own work. It was only through the insistence of G.O. Trevelyan, the Liberal Scottish Secretary, during the reform of the Board, that the issue was resolved and a medical view formally incorporated into the formulation of policy.¹⁰

Although Trevelyan had intended the new medical member would be available for inquiry work, there is nothing to suggest that this took place. Littlejohn's services continued to be used on a part-time basis. This initially brought little criticism, but after some Liberals in 1900 questioned whether the General Superintendents were sufficiently capable of assessing health issues, the Conservative Government accepted the position was unsatisfactory and a new medical inspector's post created.¹¹

Nevertheless backbench Liberals continued to regard the Board's staffing as inadequate and pressed hard for the addition of more inspectors.¹² This came with the 1909 Housing and Town Planning Act, the Poor Law Commission Report and in 1912 with the new TB regulations. By 1914, except for a few Highland districts, all outdoor public health work was dealt with by the medical inspectors.

The Board of Supervision, of course, had been established as a sub-department of the Home Office and although Sir John McNeill maintained good contact with the Lords Advocate of the period, it was in the difficult position of implementing an Act (and Government policy) without any political power. As a result, in the 1850s and 1860s, when the issue of the superintendence of the Public Health laws was raised, the burghs with their centuries of tradition, objected. Why should they, with their liberal and democratic ethos, be ruled by an unelected and laird dominated Board? The first attempt to increase its power, the 1856 Nuisance Removal Bill, resulted in the Board receiving no power except to decide whether a parish or a burgh was to be the

¹⁰ First Reading, Local Government (Scotland) Bill, *Hansard* 23 (Fourth Series), pp.1613-36, 27.4.94.

¹¹ Supply Debates, *Hansard* 85 (Fourth Series), pp.801-92, 6.7.00. A listing of Medical Inspector inquiries, 1901-15 is reproduced in the Board's annual reports.

¹² For instance, question from Ferguson, M., *Hansard* 194 (Fifth Series), p.1546, 6.10.08.

local authority (see extract p.7). Only when the Privy Council issued an Order in Council, if there was a threat of epidemic disease, could it act. The second attempt, after the 1866 cholera epidemic was more successful, but those burghs with their own and more stringent public health acts and those with a population of over 10,000 were still excluded from Board control. The 1867 Act prohibited it from instituting any special inquiry into their sanitary condition unless the Home Secretary or Lord Advocate agreed.¹³ Similarly, although all local authorities had to appoint sanitary inspectors (if the Board thought it necessary) these burghs could dismiss them without its consent. All the Act insisted on was that they and the sanitary inspector should be paid 'a proper Salary' and should 'make such Returns and special Reports' as the the Board required.¹⁴ The Board also lost its fight to ensure local medical officers would not be dismissed without its consent (see extract p.7).

The creation of the Scottish Office did not really alter this position. The Board's principal responsibility to the Scottish Secretary was to prepare an annual report on its proceedings and although it invariably responded to a Scottish Secretary's request for action, it could have taken an independent line.¹⁵ (The Carluke extract, p.18, represents the first time a Scottish Secretary requested Board action on a health matter, and also the first time a labour union called on the Government for assistance.) Moreover, with the Scottish Secretary not automatically a member of the Cabinet, all social legislation had to be handled

¹³ The Act 'contemplated' the Board's 'inspecting officers' could visit and report on any authority, but could not institute an inquiry in the larger burghs with evidence based on oath. Even if the Board made an application to the Home Secretary for an inquiry, the Home Secretary was bound to consider 'any Representation' the burgh made. However, like the 1845 Act, the Board could institute a special inquiry by one of its number or appoint outside commissioners, the latter now including an 'engineer' as a qualifying profession. For a discussion of Burgh politics, see the evidence of Gordon, E.S., (ex-Lord Advocate), to *Royal Commission on the Sanitary Laws*. C.281. (P.P. Vol. XXXV 1871), pp.137-40.

¹⁴ Outside the principal burghs, sanitary inspectors were normally part-time, their most common other occupations including inspector of poor, police constable and plumber. 'Salaries' varied, but about £5 was the usual for a 'populous' parish.

¹⁵ See fn 9, comments by Trevelyan, especially p.1064. The Board had unsuccessfully opposed his move to lower the property qualification (£20 to £5) for parochial boards, but had been more successful in preventing Poor Law assistance to the unemployed.

through the English Local Government Board. The problem the Scottish Office faced was not, however, simply constitutional. Scottish opinion, especially amongst the Liberals, was divided over the role of government in social affairs. Many of their M.P.s favoured not greater centralisation of power, but far greater local involvement in public services.¹⁶ Amalgamating the 800 parishes into less than a hundred district councils was against the best of Liberal traditions. They also opposed the mandatory appointment of County medical officers; it would mean the professionalisation of public health.

The issue was finally resolved when the Liberal Government reformed the Board in 1894. What Trevelyan, the Scottish Secretary, wanted was to have a new Board that was essentially the administrative arm of his Office, one where policy was politically, rather than bureaucratically decided. The medical member would advise on technical aspects of public health, the legal member, on judicial matters and the chairman, on the Board's general policy.¹⁷

The basic problem for Trevelyan and his successors remained the burghs. Although the 1894 Act meant that the more 'populous' villages could now become special water, drainage and scavenging districts (as part of the district council), there were over 200 existing burghs, nearly half of which had been created for public health purposes.¹⁸ With the majority having a population of less than 5,000, they had neither the finance, nor the work, for a full-time public health department. By the 1900s the Board's problem was how to ensure they successfully implemented the public health and housing laws.¹⁹ The evidence suggests it faced a particularly uphill struggle.

¹⁶ For instance, comments by Campbell, G. during Second Reading of Local Government (Scotland) Bill, *Hansard* 336 (Third Series), pp.1471-3, 30.5.89.

¹⁷ See fn 9; also minute of Trevelyan 25.1.95, in sro DD5/439; and correspondence between the Board and the Scottish Office, 1895-1903, in DD5/455.

¹⁸ *Report on Local Taxation in Scotland*. C.7575. (P.P. Vol. LXXIV 1894) p.vi; 'Memorandum on the Valuation and Rating Systems of Scotland', by the Scottish Office, in *Royal Commission on Local Taxation (Evidence)*. C.8764. (P.P. XLII 1898).

¹⁹ It should be noted that the 1897 Public Health Act removed all previous restrictions on instituting local inquiries.

Poverty, Pauperism and Poorhouses. The 1845 Poor Law Act provided no definition of poverty, or what constituted a minimum standard of relief.²⁰ However the Act made it clear that parishes had a duty to establish a 'roll' of those legally entitled to relief and to levy whatever assessment was necessary. The Act also laid a specific duty on the locally appointed inspector of poor to inquire into all applications for relief and keep appropriate records. If he failed or neglected to perform these duties, irrespective of a parish's wishes, he could be dismissed by the Board. Independently of whatever action the Board took, he could also face a criminal prosecution.

With the Act raising high expectations amongst the poor (and many radical sympathisers), the Board was soon inundated with paupers claiming that their allowances were inadequate or too low. This was especially so in the Highlands and the first extract (p.32) from Smythe's survey of Easter Ross indicates the Board's response. After 1846 the Board never again attempted to assess what the level of adequacy was, or how it was constituted. Nor was it prepared to propose any definite scale of relief. All McNeill was prepared to concede was that parishes ought to increase a pauper's allowance in line with real wages.²¹ In 1846 for an averaged sized family this meant about four shillings and sixpence a week and at the turn of the century, about six shillings and ninepence.²² It represented about a third of a skilled worker's wage and three quarters of an unskilled worker's one.

If the Board was unwilling to review the adequacy of allowances, there was certainly no lack of willingness to inquire into poorhouse matters. The Act empowered parishes to build and maintain poorhouses and provide 'proper and sufficient' medical 'attendance'. (To do this they could raise a loan, using the rate as security.) But it also said it was the Board's responsibility to approve any poorhouse plans and also their rules and regulations.

²⁰ For an official statement of Poor Law practice and administration, 1845-1907, see evidence of MacPherson, Murray and Maxwell, to *Royal Commission on the Poor Law (Scottish Evidence)*. *op.cit.* pp.1-25, 39-49 and 101-11.

²¹ Evidence of McNeill, to *Select Committee on the Poor Law (Scotland)*. (P.P. Vol. IX 1868-9) p. 77.

²² Evidence of M'Neill, to *Royal Commission on the Aged Poor*. C.7684. (P.P. Vol. XIV 1894) p. 489.

Interestingly the Board had no direct power to enforce any change in poorhouse management. But it did have the power to determine whether any relief offered was adequate and so could insist, on threat of closing a poorhouse, that certain minimum standards of provision were met. In the early years, as the extracts (pp.35-43) indicate, the Board was largely concerned to establish a particular type of physical and moral regime. Adequate feeding, the separation of the sexes, the provision of minimum sleeping accommodation, some modicum of medical care, and a general feeling of 'a well regulated institution' would ensure the meeting of material need.²³

McNeill's Board had principally been interested in ensuring that the rights of the poor were met. This had resulted in a considerable increase in the numbers assisted and in parish expenditure.²⁴ The Board, under Walker, reacted sharply against this and adopted a totally different philosophy. Its principal concern was the general welfare of the poor, and that had to be judged, not by how much assistance they obtained, but through their independence from rate-aided relief.²⁵ A more discriminatory policy emerged and it affected two groups in particular, first the mother with illegitimate children, and the second, the unskilled labourer. (The Scottish Poor Law precluded the able-bodied from relief, but many labourers pleaded illness and were therefore offered the poorhouse.) As the extract (p.51) from Haddington illustrates, the Board felt that the withdrawal of relief from mothers with illegitimate children would diminish public 'immorality', no self-respecting woman would get herself pregnant if all she would be offered was the poorhouse. M'Neill's campaign to introduce 'test' labour (see

²³ For its principal circulars on poorhouses, see 'Report on Poorhouse Plans', in *Annual Report of the Board of Supervision, 1847-8*. (P.P. Vol. XXXIII 1848) App.(B), No.4, pp.224-30; 'Circular as to Poorhouses, and Rules and Regulations for the Management of Poorhouses', in *Annual Report of the Board of Supervision, 1850*. (P.P. Vol. XXVI 1851) App.(A), Nos.1 and 2, pp.1-14.

²⁴ The Board changed its way of counting those on relief, but annual expenditure in the year ending May 1846 was £295,232. In the year ending May 1868, with some 130,446 on relief, it was £795,438.

²⁵ Evidence, to *Select Committee on the Poor Law (Scotland)*. (P.P. Vol. XI 1870), especially pp.290-2.

extracts pp.52 and 54) reflected the desire to regenerate the urban labour market and force the worker into accepting (any) paid employment. Large numbers of mothers and unskilled labourers did lose their right to poor relief, but there is little evidence that it diminished 'immorality', or indeed rejuvenated the labour market.²⁶

Yet the Board's new policy also meant that those who remained on the roll were entitled to receive a much higher level of provision. They were clearly the 'deserving' and 'friendless' poor. Better sanitary arrangements in poorhouses was followed by the introduction of trained nursing, and that in turn was followed by the drive for the greater classification of the sick and the infirm.²⁷ It is interesting to note that Scotland's official anti-TB campaign began in the poorhouse.

Nevertheless, as the Board's chief clerk, Abijah Murray, admitted to the 1909 Poor Law Commission, it was impossible to have in the same poorhouse, a home for the 'respectable' poor, a hospital capable of undertaking more advanced medical work, and an institution to discipline the 'dissolute'.²⁸ The result was the same virtually everywhere, semi-derelict buildings, a low quality of staff, monotony for the inmates and a lack of interest by the management. In 1911 the Board finally agreed that no new mixed poorhouse could be built. Instead parishes were to develop separate and specialised institutions.

- 1 *Children and their Care*. Children had formed an important part of pre-1845 Poor Law practice.¹ Although 19th century law meant those who lived with their parents could not be considered separately from their family's needs, there were three groups that did receive independent welfare; those who were orphaned or had been deserted and were subsequently boarded-out by the parish, and those requiring medical care within the poorhouse. But

²⁶ In 1890 the number on relief was 82,454, with 8,078 in poorhouses. Expenditure was £841,952. Numbers on relief increased after 1892, especially in the urban-industrial areas.

²⁷ A history of poorhouse medical relief can be found in, Part Two, *Report of the Departmental Committee on Poor Law Medical Relief (Scotland)*. Cd.2008. (P.P. Vol. XXXIII 1904).

²⁸ *op.cit.* p.45.

despite the first two groups, in the early 1840s, comprising about 3,000 and the latter about 1,000, the 1845 Act said little about amending practice or promoting child welfare. The Board in developing a national policy had instead to decide which of past traditions and practices, and indeed what view of children, it would prefer.

The first time the Board fully considered this issue came in 1852, when an Edinburgh foster mother, a petty thief and a notorious drunkard, seriously assaulted two children under her care.²⁹ After admonishing the parish for the poor selection of its foster parents, the Board instituted a special inquiry into the practice of other parishes. Later, in its annual report, the Board specifically rejected any widespread cause for concern and commented, 'individual cases of neglect or mismanagement may occur, and may for a time escape detection: but in a vast majority of cases the children appear to be treated with kindness, and often with tenderness'.³⁰ It went on to confirm its support for boarding out and added:

'The instincts of domestic attachment are developed on both sides. The children become members of a family, with some feeling of the sacred character of its ties, its duties and responsibilities. They acquire the habits of thought and action of those with whom they associate, and cease to be a separate class. They are not placed in a position superior to that of the children of independent labourers, neither are they placed so much beneath that condition as to make it difficult to be attained; and the practical result appears to be, that they are speedily absorbed and lost sight of in the mass of the labouring population in which they have been brought up.'

This line of thought dominated later Board inquiries, the extract (p.78) from Peterkin's 1862 survey (the first time the Board requested one of its officers to undertake home visitations) was no exception. Yet this emphasis on placing children, almost as a value in itself, amongst farm workers, virtually precluded

²⁹ Minutes of Board of Supervision, 4.2.52 and 12.2.52, in SRO HH 23/4.

³⁰ *Annual Report of the Board of Supervision, 1852*. (P.P. Vol. L 1852-3) p. vii.

considering any other aspect to their welfare. Indeed as the Henley extract indicates (p.86), what was tolerable seemed pretty basic, a diet based on oatmeal, potatoes and milk, one outfit of clothing per year, some element of personal decency and plenty fresh air.

Whatever the Board's desire to support foster-care, many children still had to be kept in the poorhouse; they were either too ill, or had been admitted with their parents. Nevertheless, although poorhouse management often broke down (see extracts, pp.80-85), it was not until Malcolm M'Neill's arrival as Visiting Officer in the late 1860s, that the Board agreed more formally to review the adequacy of institutional provision. Even then, as the extract from his 1889 report (p.97) indicates, poorhouse welfare essentially meant keeping children clean and adequately clothed; most remained as before, under the care of pauper nurses.

The issue of foster care was brought back briefly into consideration in the early 1890's. A spate of alleged cruelty cases (one was the Hunter case, p.91) led the Liberal M.P. for Dundee to call for the General Superintendents to inspect foster homes regularly. This the Board rejected, arguing that the personal supervision of children was for the parish alone. An outdoor officer's role was no more than to 'occasionally satisfy himself' that children were 'properly cared for'.³¹ Soon after, to calm any concern, the Board commissioned Peterkin to review provision. Peterkin, who based his report on replies from a questionnaire issued to inspectors of poor, felt able to comment that the system remained inherently sound.³² 'Excellent results' were obtained from a 'family' based system of care.

Like the 1845 Act, the 1867 Public Health Act made no mention of children, and apart from some advice on the closing of schools during local epidemics (see chapter five), the Board studiously refrained from instituting any special inquiry into child health.

³¹ See reply by Lord Advocate, in *Hansard* 352 (Third Series), p.753. 12.3.91.

³² Peterkin, W.A., *Report on the System in Scotland of Boarding Pauper Children in Private Dwellings*. C.7140. (P.P. Vol. XXXXIV 1893-4); see also his evidence, to *Departmental Committee on Poor Law Schools*. C.8032. (P.P. Vol. XLIII 1896). On 15th May 1893 there were 4,629 children boarded out by parishes. A further 1,348 children were in poorhouses.

Some change in attitude occurred after the 1889 Notification of Infectious Diseases Act when the Board permitted certain childhood illnesses (for example, measles, whooping-cough) to be notifiable, but it stopped short of recommending any special provision.³³

MacKenzie's survey of Edinburgh's schoolchildren (see extract, p.99) was therefore of some importance. This 'most appalling' report, as one Conservative M.P. called it, occurred just at the same time as MacKenzie's old Burgh, Leith, began a scheme of 'milk depots' where nursing mothers could obtain 'tested' milk for their infants.³⁴ (Dundee and Glasgow also embarked on similar schemes.) A parallel development was Dr Ballantyne's opening of Britain's first ante-natal department at Edinburgh's Maternity Hospital.³⁵ This move from 'treatment' into 'care' was boosted by the 1907 Notification of Births Act which permitted local authorities to develop a health visitor scheme. The following year the Children's Act was passed. It laid a specific duty on parishes to prevent child cruelty (and gave cruelty a much wider definition). With the Poor Law Commission also recommending the Board appoint a lady inspector to monitor more closely those under parish care (for its criticism of existing provision, see extract, p.102), the early 20th century saw a substantial shift in Government attitude. This shift was confirmed during the First World War when the notification of births was made compulsory.³⁶ In October 1918, a month before the formal announcement of the Board's reform, its Medical Inspectors were sent to review Glasgow's provision for child health, the first time the wider issue of 'care' was comprehensively reviewed.

³³ In 1899 the infant mortality rate was 132 per 1,000 born, with the cities at 151, the large towns at 136, burghs under 10,000 population at 130, the landward districts of Midlothian at 123 and the landward districts of all counties at 105. There had been little reduction in the rate since the 1870s.

³⁴ *Annual Report of the Local Government Board, 1904*. C.2514. (P.P. Vol. XXXIV 1905), App.(A), No.44, pp.261-4; comment by Gorst, J., in *Hansard* 123 (Fourth Series), p.1353, 18.6.03.

³⁵ Chapter Two, MacKenzie, W.L., *The Carnegie Trust Report on Physical Welfare: Scottish Mothers and Children*. (Dunfermline, 1917).

³⁶ *Annual Report of the Local Government Board, 1916*. Cd.8517. (P.P. Vol. XVI 1917-8) pp.xxxi-iii. Government grants to develop health visitor and other child welfare schemes also became available.

Hospitals and Infectious Diseases. Although the Board's involvement with public health did not officially begin until the 1867 Public Health Act, soon after its establishment the Board made it clear it thought special provision ought to be made in poorhouses for those poor suffering from infectious illnesses and other 'fevers'. At any rate, when an outbreak of 'fever' did occur, there was often no alternative, but to use the parish's facilities—Scotland had few voluntary or other hospitals. But as the first extract from Ardrossan indicates (p.112), parish attitude was often insensitive and usually too late. Parsimony in expenditure was linked to a belief that they could do little once an epidemic had broken out. Outside those burghs which had promoted their own public health legislation, there is no evidence of any parish positively taking steps to either control an outbreak of 'fever', or to establish a separate hospital.

The 1867 Act represented, therefore, a substantial challenge to the local authority (parochial or burgh), and Parts III and IV specified their duties in 'preventing and mitigating disease'.³⁷ Part III permitted the Privy Council to issue an Order enabling the Board to take certain action when Scotland was threatened with an 'epidemic or contagious disease'. The Board was empowered to issue directions for the 'speedy interment of the dead', 'house to house visitation', for 'the dispensing of medicines' and for 'placing overcrowded houses' under common lodging house regulation. Such Orders could be given for up to six months at a time, and were issued frequently during the 1870s and 1880s.

Part IV dealt with more general issues, the most important (for the Board) being Section 39, which permitted local authorities to build and maintain hospitals, or enter into an agreement with an established hospital for 'the reception' of its sick 'inhabitants', and Section 40, which permitted the authority to disinfect the clothing, bedding and housing of the sick and convey them to hospital. Other Sections dealt with powers of removal and interment, regulations for lodging houses, the vaccination of children and ships berthed in local docks.

³⁷ Munro, G., *The Public Health (Scotland) Act, 1867*. (Edinburgh, 1867).

The Board initially took time to make any detailed pronouncement on the Act. But by the early 1870's, once its hospital memorandum had been issued (p.118), its policy became clear. First, the Board recommended that all local authorities should seek full and early knowledge of how and where an epidemic had occurred. Second, it recommended that the inhabitants of any house where an epidemic had 'taken root' should be isolated, and the house and its contents disinfected. Third, it pressed for the implementation of its hospital memorandum; every 'populous' place, the Board argued, should have a separate and permanent fever hospital.

All of these, as the extracts indicate (pp.120-5), brought difficulties. Many local authorities were unsure about what had caused its epidemic, and even how it spread. Some seemed reluctant to engage in any scheme of notification and isolate families, whilst others lacked the administrative capacity to prevent an epidemic taking serious hold. Only a handful bothered to erect a hospital.³⁸

Some attempt was made in 1879 to control dairies: local authorities were to keep them registered and be satisfied that they were clean.³⁹ But this did little to prevent the sale of infected milk and enteric and scarlet fever seemed as prevalent after as before. The Board in 1881 also issued special advice and regulations governing smallpox.⁴⁰ Vaccination and revaccination was urged. So too, was the building of separate hospitals. It was also the first disease that sanitary inspectors had to notify each case to the Board. But, as with enteric fever,

³⁸ Expenditure by local authorities on Public Health, and loans obtained, is reproduced in each of the Board's annual reports. Between 1875 and 1890 loans for hospital purposes totalled £159 789. The following table provides a summary of expenditure on hospitals for the year ending 14th May:

1875	£16,110
1880	£30,697
1885	£48,448
1890	£62,842

³⁹ 'Dairies, Cowsheds and Milkshops Order, 1879', in *Annual Report of the Board of Supervision, 1878-9*. C.2416. (P.P. Vol. XXX 1878-9) App.(A), No.21, pp.37-38.

⁴⁰ 'Circular Letter on the Subject of Cases of Smallpox', and 'Circular Letter requiring Sanitary Inspectors to Report Cases of Smallpox', in *Annual Report of the Board of Supervision, 1881*. C.2971. (P.P. Vol. XLVII 1881) App.(A), No.15, pp.21-23 and App.(A) No.16, p.23.

although death rates declined, epidemics seemed as prevalent as ever.⁴¹

Matters concerning hospital development were, however, eased in 1875 when the Public Works Commissioners announced it would grant local authorities preferential loans, but as the Lothian extract indicates (p.135), even in the 1880's, local authorities remained unconvinced about their value. It was also difficult, with so many authorities on low rateable values, to agree suitable schemes. By 1890 Scotland had, for its size of population, proportionately fewer fever hospital beds (less than 1,500) than England.

The Notification of Diseases Act and the Local Government Act, both of 1889, were therefore important milestones in the control of disease. The former allowed the Board to specify what diseases had to be notified by a patient's family and doctor to the local authority.⁴² The list included cholera, typhus, enteric (typhoid) fever, scarlet fever, diphtheria, erysipelas, puerperal fever, smallpox and membranous croup. Although it was adoptive, the fact that the Local Government Act also created county councils with full-time medical officers meant it was administratively much easier for such notifications to take place. By 1894, over 90 per cent of Scotland was covered by the Notification Act. The Local Government Act also enlarged the landward public health area (by creating district councils) and this in turn meant the rate problem of affording hospitals declined. Expenditure on hospitals more than quadrupled between 1889 and 1894. When the 1897 Public Health Act gave the Board power to compel a local authority to build hospitals, those burghs that

⁴¹ Flinn, *op. cit.* (p.406) calculates annual age-standardised mortality rates as follows.

	Rates per million living	
	1861-70	1891-1900
Smallpox	158	7
Scarlet Fever	822	180
Diphtheria	578	182
Typhus group	1057	180

The rates were highest for young children, for those in the cities, in the towns and in the Lowlands.

⁴² 'Circulars regarding the Infectious Disease (Notification) Act, 1889. (52 & 53 Vict. c. 72)', in *Annual Report, 1889-90, op. cit.* App.(A), No.16, pp.43-47.

had been reluctant fell into line.⁴³ Nevertheless, even where hospitals were built, old attitudes remained. Fever hospitals may have had more beds, but their staffing and other facilities remained meagre. It was certainly difficult for a local authority to treat simultaneous outbreaks of infection.⁴⁴ Providing additional and separate provision for smallpox, as the Board wanted, remained a low priority.⁴⁵

Yet although hospitals were built, local authority ignorance of an epidemic's origin remained an issue. Smallpox evidently overwhelmed Leith in 1894 (p.139), as did diphtheria at Kirkcubright in 1904 (p.148). Despite the 1897 Act giving the local authority power to prohibit the sale of milk from infected dairies it was a question of finding out, and gaining agreement on which one.

The 1897 Act also enabled the Board more readily to add additional diseases to the Notification Act. Almost immediately it was faced with the issue of TB. After some considerable review, Lord Balfour, although agreeing it was an infectious disease, rejected making it compulsorily notifiable.⁴⁶ Its 'infectivity' was different from those already on the list. He also felt that improved sanitation, rather than hospital care, would yield better results. Such opinions were widely shared, even amongst the medical profession, the most notable being the President of Edinburgh's

⁴³ 'Circular drawing Attention of Local Authorities to the more important Provisions of the Public Health (Scotland) Act, 1897', in *Annual Report of the Board of Supervision, 1896-7*. C.8575. (P.P. Vol. XXXVII 1897) App. (A), No.15, pp.29-34. The Act also vested any remaining power of the Privy Council to issue orders with the Scottish Secretary.

⁴⁴ In 1899, two years after the 1897 Act declared the Notification Act compulsory, the following notifications were made; Scarlet Fever, 22,279; Enteric (Typhoid) Fever 5,441; Erysipelas, 4,955; Diphtheria, 3,157; Membranous Croup, 282; Puerperal Fever, 255; Typhus Fever, 131; Continued Fever, 119; Smallpox, 25; Cholera, 1; Total, 36,645. The percentage of cases treated in hospital, nationally about forty-five, was highest in the cities (about seventy) and lowest in the small burghs (about thirty). In 1915, when there had been an upsurge of Scarlet Fever and Diphtheria, the number of cases notified was 44,348. About seventy per cent were treated in hospital.

⁴⁵ *Annual Report of the Local Government Board, 1900*. Cd.701. (P.P. Vol. XXVII 1901) pp. xxxviii-xxxix. In 1900 518 cases had been notified, of which 401 occurred in Glasgow. This epidemic was greatly exceeded during the 1904 outbreak when 2,527 cases were notified, mostly in the large towns.

⁴⁶ *Annual Report of the Local Government Board, 1902*. Cd.1521. (P.P. Vol. XXXVI 1903) p. xxxv. In the 1890s the average annual death rate from TB per million living was 2,377, or thirteen per cent of all deaths.

Medico-Churgical Society, Professor T.R. Fraser and the Professor of Forensic Medicine at Glasgow, J. Glaister.⁴⁷ It was not until 1905, when a new Scottish Secretary, Lord Linlithgow, had been appointed, that the Board changed its mind and the local authority campaign to treat TB in hospitals, as a notifiable disease, was formally endorsed.⁴⁸

Housing and Sanitation. On the 4th June 1866, after cholera had appeared on the east coast of Scotland, the Privy Council issued an Order putting Part II of the 1856 Nuisance Removal Act into operation. A few days later the Board issued a circular to local authorities calling on them to 'discover' all nuisances, enter any premises suspected of being 'dangerous to health' and disinfect houses, bedding, clothing and drains.⁴⁹ As the first extract indicates (p.166), the directions had only a limited impact: many authorities had neither the will, nor indeed the organisation to take effective action.

After what had occurred at Wemyss and elsewhere (cholera reached Slateford, a few miles from Edinburgh), the Board and the Government, understood that a much better system of preventive public health was necessary. As a result, the 1867 Act laid great stress on the removal of nuisances, securing a wholesome water supply and ensuring an area was adequately drained of 'offensive matters'. Part II of the Act explicitly defined what a nuisance was, and what action a local authority should

⁴⁷ Comment at a special meeting of the Society, in *Lancet*, 1902. Vol.2, p.1545, and 'Proceedings at the Annual Congress of the Scottish Sanitary Association', in *County and Municipal Record*, 1903. Vol.1, p.505.

⁴⁸ MacKenzie, W.L., 'The Administrative Control of Pulmonary Phthisis in Scotland', in *Lancet*, 1910. Vol. 2, pp.162-4; see also 'Circular to Local Authorities regarding the Administrative Control of Pulmonary Phthisis', in *Annual Report of the Local Government Board*, 1906. Cd.3470. (P.P. Vol. XXIX 1907) App.(A), No.31, pp.108-13; 'Parliamentary Grant for Sanatorium Purposes', and 'Notification of Pulmonary Tuberculosis', in *Annual Report of the Local Government Board*, 1912. C.6720. (P.P. Vol. XXXIII 1913) App.(A), Nos.13 and 15, pp.94-98 and 104-6; Tuberculosis (Prevention, Care and After-Care), in SRO HH61/592. In 1915 there were 9,494 Pulmonary TB notifications, some forty per cent being treated in hospital.

⁴⁹ 'Directions and Regulations issued by the Board of Supervision, in Terms of The Nuisance Removal (Scotland) Act, 1856' . . ., in *Annual Report of the Board of Supervision*, 1866. (P.P. Vol. XXXIV 1867) App.(A), No.5, pp.5-7.

take. A nuisance meant any defective house or privy which rendered it 'injurious to the health of the inhabitants' or made it unfit for human habitation; any ditch, gutter, sewer or privy that was 'so foul' as to be 'injurious to health'; or any well or other water supply that was 'so tainted with impurities' or otherwise 'unwholesome', or likely to promote epidemics; or any stable, byre or pigstye kept in such a way to be a nuisance, or any deposit of manure kept within fifty yards of a house, or any overcrowded house (defined as giving less than 300 cubic feet per adult). Part VI enabled a local authority to 'lay out' and maintain sewers and to arrange a supply of water from wells or reservoirs. It could, on petition of ten inhabitants, form special drainage and water districts for the more 'populous' parts of the parish. If this occurred, these districts would pay an additional rate.

Throughout the early 1870's the main emphasis of the Board's work centred on improving a local area's water supply and drainage.⁵⁰ Inspecting officers were specially instructed to note any defective privy accommodation, the existence of dung heaps close to wells and housing, to assess the quality of the drainage and to ensure the water supply was not otherwise contaminated. It did not prove an easy task. As the early extracts show (pp. 167-85) many authorities (often after pressure from residents) denied that anything was wrong. In other places, they balked at the cost of remedial work. Nevertheless, with the Board threatening Court action for those that refused to implement the Act, expenditure on water, nuisance removal and drainage gradually increased, polluted wells were closed, new supplies introduced, sanitary inspectors appointed and dung heaps removed further from houses.⁵¹

⁵⁰ A summary of the Board's attitude at this time can be found in the evidence of Walker, to *Royal Commission on the Sanitary Laws. op. cit.* pp. 189-95.

⁵¹ Between 1875 and 1890 loans obtained for water supply purposes totalled £1,074,231, for drainage £297,227, and for both combined £52,712. The following table provides a summary of expenditure for the year ending 14th May:

	Drainage	Water Supply	Nuisance Removal
1870	£7,618	£8,792	£1,611
1875	£15,524	£37,721	£4,502
1880	£30,761	£89,819	£8,217
1885	£29,334	£88,858	£6,169
1890	£26,042	£51,610	£11,314

✓ The late 1870's therefore saw a change in the Board's work; it began to be involved in local disputes over introducing piped water, which it invariably supported. By the early 1880's the emphasis of its work changed yet again. Inspecting officers were instructed to press on local authorities the need to introduce a regular system of emptying ashpits and privy middens.⁵² It seemed to work, for expenditure on nuisance removal increased sharply.⁵³

The passing of the 1890 Housing of the Working Classes Act brought the Board new supervisory powers.⁵⁴ Part I of the Act enabled a medical officer to make representation to his local authority that a group of houses, as a result of being 'dangerous' to health, were 'unfit for habitation' and that an 'improvement scheme' should be instituted. The authority was required to take the representations into account and if its resources were sufficient to proceed with a scheme. This Part was applicable only to burghs. Part II laid a duty on any local authority to inspect their district and see if any house was 'so dangerous or injurious' to health as to be unfit for habitation. If a house was not rendered habitable, the authority could order its demolition. An important departure in both of these Parts was not just that it concerned housing, but that the medical officer had a duty to initiate matters. Part III enabled a local authority to build houses (at an 'economic' rent) for the working classes.

Yet although inspecting officers had commented freely on the quality of workers' housing in the 1880's, the Board did not specifically call their, or indeed Dr Littlejohn's attention to its contents. The extract from Leith (p.205), in fact, represents the first occasion when the Board formally discussed the condition of

⁵² The Board even published a sketch of an ashpit and privy, see Half-yearly Report of M. McNeill, Inspecting Officer, dated 1.7.86, in *Annual Report of the Board of Supervision, 1885-6*. C.4878. (P.P. Vol. XXXII 1886) App.(A), No.13, pp.35-36.

⁵³ The issue of scavenging that Mid-Calder raised (see extract 1878, p.187) was resolved by the Courts deciding that it was not 'ultra vires' for a local authority to pay a contribution for the cleaning of streets and assess the whole parish. See, *Robertson, &c. v Mid-Calder Parochial Board*, 19th December 1883, 11 R. 350. The creation of special scavenging districts under the 1894 Act enabled much larger sums to be provided.

⁵⁴ 'Circular regarding the Housing of the Working Classes Act, 1890 (53 & 54 Vict. cap. 70)', in *Annual Report of the Board of Supervision, 1890-1*. C.6442. (P.P. Vol. XXXV 1891) App.(A), No.15, pp.46-47.

Scottish housing, and that from Kirkintilloch (p.208) the first time it called for a comprehensive local housing survey.⁵⁵

Local authority control of sanitation was greatly increased by the 1897 Public Health Act.⁵⁶ It did this principally by widening the definition of a nuisance. The term now covered circumstances which were 'dangerous' to health, those potentially, rather than likely to cause injury. The Act also increased the rate that could be levied, and if this was not sufficient, the Board could sanction its increase. However it should be noted that a district council could not compel a water supply or a drainage system to be taken into a house. Moreover, if it wanted to control new building (including the introduction of water-closets), pigstyes and byres, then it would have to resolve to pass bye-laws and have them approved by the Board.

A district council's control of housing and sanitation stood in sharp contrast to the Burghs, where the 1892 to 1903 Burgh Police Acts gave stringent powers to control all new building and at the same time compel house owners to connect to the town's water supply and sewers. Burghs could also insist on water closets being introduced, arrange for the daily removal of house refuse (including ashpits), and for the cleansing of streets and common stairs. Bye-laws to regulate the keeping of pigs could similarly be passed.

There is, in the 1890s, little evidence to suggest that the Board positively sought to implement the housing aspects of either the 1890 Act or the Burgh Acts. As at Kirkintilloch, where local medical officers appeared happy with some interim solution, the Board evidently felt there was little it could do. Port Glasgow (p.217) therefore represented an important breakthrough.⁵⁷ It

⁵⁵ It is interesting to note that at Tranent (1870) Irvine (1884) and Kirkintilloch the number of houses enumerated as being 'insanitary' was about twenty per cent of the total.

⁵⁶ A useful summary of the housing and sanitation aspects to the 1897 Act, and also the Burgh Police Acts, can be found in the evidence of MacPherson, to *Royal Commission on Housing (Scotland)*. Vol. I (Edinburgh, 1921) pp.1-28.

⁵⁷ For the Proceedings of the Inquiry, 31.3 - 4.4.03, see Minutes of Port Glasgow Town Council, in *Inverclyde District Library (Greenock)* PG 1/1/24, pp.1-177. A special inquiry by Barclay (9.4.00), after some comments in the Medical Officer's annual report of 1899, had said, 'Pauperism cannot be expected to diminish in the parish while the houses of the poorer classes are allowed to remain as they are. I have not seen worse insanitary surroundings anywhere. I will specially direct your attention to the housing accommodation in Church St to Guthries Close, of which I furnish some details. 760 persons were living for the most part in insanitary dwellings with no sanitary conveniences.' See pp.30 and 40-41.

was the first time medical officer, inspecting officer and Board opinion coalesced; some action under the Act was necessary. Similarly the Board's action at Longrigg (p.222) represents another change; it was the first time it positively reviewed the housing condition of the miners. Such work was to increase, and although it continued to commission special inquiries throughout Scotland, greater attention was directed to the Clyde basin. This was especially so between 1908 and 1911, when virtually all of the Lanarkshire burghs underwent a detailed review of their sanitary condition (see extract on Hamilton, p.223).⁵⁸ By then both the 1909 Housing and Town Planning Act had been passed, and the review of miners' housing ordered. It is noticeable that after 1910 there was a considerable increase of medical inspector inquiries into housing, their reports laying special emphasis on the size and quality of accommodation, the soundness of structure, and its suitability for family life. Even before the Royal Commission on Housing was established (1912), the Board had sensed a change in political economy.

Vagrants and the Casual Poor. In the 19th century 'tramping' had become a well established part of Scottish life. No-one knew for sure how many vagrants, casual and other migrant labourers there were, but most seemed to accept their numbers were increasing, especially in the borders and the south-west. Many, it was said, in the towns and villages in these areas, actually made a living from the tramps, renting out their 'front' room (with a straw bed and an oatmeal breakfast) for anything up to fourpence a night. Elsewhere tradition had decreed that the parish or the burgh provide accommodation and the authorities usually converted a dilapidated cottage into a 'lodging house', sometimes complete with a keeper, but often not. It was a haphazard system, made even more so by police attitudes. Some adopted a punitive attitude and either arrested tramps or moved them on, whilst

⁵⁸ The Board was particularly concerned about the high incidence of enteric fever in the West of Scotland and in 1911 commissioned Dr Dittmar specifically to report on its relation to the continued use of the privy midden. (In the East, where water-closets were more common, the incidence was far less.) See, Dittmar, F., *On the Incidence of Enteric Fever in the Larger Towns of Scotland*. (Edinburgh, 1911).

others, overwhelmed by the numbers, preferred to turn a blind eye. There was, of course, no restriction on how many a lodging house could contain, nor what type of sanitary arrangements they should have, nor indeed, whether they could accept women and children.

Despite this system and the obvious evidence from the 1844 Poor Law Commission that the tramp had been amongst those who received the least, and often, the harshest treatment from the local population, the 1845 Act said little about how parishes should deal with vagrancy. Like provision for Poor Law children, McNeill's Board had therefore to decide what kind of policy and what view of the vagrant it would take.

The first four extracts in this Chapter (pp.234-40) indicate how the Board tried to tackle this issue and enforce the right of the vagrant to relief. At best it was only minimally successful. Parishes seemed more interested in increased police power.

Nevertheless the Board did try to control the quality of accommodation offered. Parochial lodging houses were visited by W.A. Peterkin and similar reports to Paisley and Edinburgh poorhouses were completed (see pp.41-44). After a strongly worded Minute in 1861 which called St Vigean's and other lodging houses 'dens of iniquity' (the sanitary arrangements were particularly poor), a number were closed or renovated, but this was as far as the Board found it could go.⁵⁹ Unlike the poorhouse it had no statutory power to enforce regulations.

Under the 1867 Public Health Act, private lodging houses were brought, for the first time, under the control of the local authority. Section 3 defined a common lodging house as any 'house or part thereof where lodgers are housed at an amount not exceeding fourpence per night' for each person. Section 59 required that the local authority should keep a register of such houses and the number of lodgers they were prepared to authorise. Section 62 allowed them to frame rules and regulations for 'the well ordering of the lodging house', for 'the separation of the sexes' and for 'the promoting cleanliness and ventilation'. It also suggested the minimum amount of space per adult should be

⁵⁹ Minute of Board of Supervision 28.3.61, in SRO HH 23/9.

300 cubic feet. Any regulation so framed had to be confirmed by the Board.

The Board made it clear to local authorities that it thought these Sections were an important part of the Act. Vagrants and tramps, it said, were one of the chief 'propagators of disease' and the outdoor officers were specifically instructed to impress on local authorities the need to enforce the Act and carry out the necessary inspections.⁶⁰ This new zeal to tackle vagrancy was not confined to public health. As M'Neill explained in one of his 1869 half-yearly reports, controlling lodging houses was not simply about removing the 'foci' of 'infection', it was also about 'diminishing' vagrancy.⁶¹ As a result, although the Board still remonstrated when tramps 'inadvertently' died, it urged the imposition of a stricter destitution 'test', especially against those suspected of being able-bodied.⁶²

The evidence suggests that the Board's implementation of the Act and its changed view of poor relief were not successful. Despite inspecting officer exhortations, before the reform of county government in 1889 less than a fifth of local authorities had bothered to adopt any rules or regulations for common lodging houses.⁶³ Similarly the majority of parishes seemed reluctant to impose too great a 'test'. As M'Neill woefully told one Parliamentary inquiry, many feared 'able-bodied beggars going about their town at night'.⁶⁴ This apparently was no idle fear. Another witness to the same inquiry reported that on one occasion at St Boswells 'a great procession' of tramps 'took possession' of the village, then frightened everyone 'out of their wits' until the police arrived.⁶⁵

It was little wonder that parishes hesitated to impose a greater 'test', and as the extracts (pp.245-9) indicate, it was not until after 1900 that the Border parishes accepted the Board's policy. Even

⁶⁰ *Annual Report of the Board of Supervision, 1869.* (P.P. Vol. XXV 1870) App.(A), No.16, pp.57-58; see also evidence of Walker, to *Royal Commission on the Sanitary Laws.* *op. cit.* p.181.

⁶¹ *Annual Report, 1869, op.cit.* App.(A), No.15, p.57.

⁶² *Ibid.* App.(A), No.2, pp.1-3.

⁶³ Evidence of Walker, to *Housing Commission (1885), op. cit.* p.9.

⁶⁴ Evidence, to *Departmental Committee on Habitual Offenders*. . . C.7763. (P.P. Vol. XXXVII 1895) p.191.

⁶⁵ *ibid.*, p.171.

so, as Barclay's evidence indicates (pp.251-5), many others seemed happy to take the line of least resistance.

At the turn of the 20th century how many were still 'tramping' and their impact on public health is difficult to estimate. Certainly there were periodic outbursts of concern. Typhoid was said to have been brought into Ayr in 1898 by a casual labourer from Glasgow. The quickfire spread of smallpox through the Lothians in 1904 was again blamed on 'tramping' workers. But what had changed was local authority reaction. When a number of county councils found that their attempt to draft bye-laws for the easier apprehension of vagrants was ruled 'ultra vires' by the Court of Session, a considerable campaign developed to pass amending legislation.⁶⁶ The 1908 Local Government Act finally gave them that power.⁶⁷ At the same time virtually all sought the Board's approval for lodging house rules and regulations.⁶⁸ Even if 'tramping' had not declined, they accepted that vagrancy and public health were closely intertwined.

How can the work of both the Board of Supervision and the Local Government Board to monitor social conditions and implement the Poor Law and Public Health Acts be assessed? The extracts, in a sense, speak for themselves. Both Boards were extremely active in maintaining some tolerable boundary to what they felt was acceptable local administration. But to appreciate the difficulties they faced, perhaps three factors affecting their work need to be stressed.

The first lay with the nature of local government. The Board of Supervision may have been established to monitor the work of the parochial board, but, as it discovered when public health became an issue in the 1850s, the royal burghs with their ancient traditions would have little of its supervisory power. This was not helped by the 1862 Burgh Police Act (the 'Lindsay' Act), which actively encouraged 'populous' villages to establish police

⁶⁶ Evidence of Scott-Plumber, C.H., and Robson, J. (from the Association of County Councils), to *Poor Law Commission*, *op. cit.* pp.634-8.

⁶⁷ SRO DD5/152, 156 and 160.

⁶⁸ Evidence of MacPherson, to *Housing Commission* (1917), *op. cit.*, p.6.

commissioner status. By the 1880's with 182 royal, parliamentary and police burghs, average population 4,000, the Board found there was little prospect of developing any appreciably trained or technically proficient local bureaucracy. Only a handful of the larger burghs employed any full-time sanitary staff. As Walker acknowledged, the earlier move to enhance public health actually became its hindrance.⁶⁹

Matters in the 1890s improved with the counties, but the burghs continued to present problems. It was certainly true that after the Burgh Acts, 1892-1903, many of the larger councils like Ayr, and even some of the medium sized ones like Bathgate, were able to respond more positively to the public health and housing laws. Hospitals were built, extensive sewage systems introduced, water-closets replaced the ashpit and bye-laws for the regulation of pigstyes passed, but the quality of administration in the smaller burgh continued to give the Local Government Board concern. Some (as in Ayrshire) refused to employ the county medical officer, preferring instead to rely on the part-time services of a local G.P. Others (as in Fife) lacked the rate base for the kind of hospital provision the Board wanted and only acquired the minimum of rights to either the county's hospital or some local combination, whilst still others (for instance in the Lothians) made little attempt to improve their water supply.

A similar problem existed with the parish. The employment of a full-time medical officer for the poorhouse remained a novelty and although trained nursing was introduced and poorhouses became cleaner, apart from the TB campaign, there was little to suggest any serious attempt at 'curative' work. Outside the principal cities, the parish was too small a unit, and too embedded in an ideology of pauperism, to respond.

A second factor affecting their work lay in the size of their staff. Although McNeill in the 1850s was given Treasury permission, and did recruit additional clerks, their numbers were never large, a dozen at most by the 1890s. Part of this reflected the prevailing view of Government: it was economically 'unproductive' to have

⁶⁹ Evidence of Walker, to *Housing Commission (1885)*, *op. cit.*, p. 9.

a large central bureaucracy. It was a view shared by the Board itself. Walker admitted during one inquiry after the 1867 Act that he had deliberately not recruited all his agreed complement of clerks, and had similarly not pressed for the appointment of a full-time medical officer. The same view held in the 1880s. The Board delayed pressing for an additional outdoor officer until it felt its control of industrial Scotland was at breaking point. Even then, despite increased Parliamentary criticism, opposition remained to the appointment of specialist staff.⁷⁰ This attitude continued into the 1900s, the Local Government Board remaining unsure of what role its medical inspector should take until it revised the Poor Law inquiry form.

Third, it is interesting to note that throughout this period, all appointments to the Board, its outdoor staff and, until 1880, its clerkships, were through Government patronage. Although McNeill and Walker specifically rejected 'claims made upon a favour' there was no doubt about what kind of person they wanted, a 'gentleman' capable of engendering the trust and confidence of parish and local authorities.⁷¹ The result can be seen in the Appendix. Until M'Neill's retiral in 1904, both the Board of Supervision and the Local Government Board were dominated by men of Tory persuasion, invariably from a landowning background, often educated at English public schools, and usually appointed after a legal or army career. Episcopalians and those with Catholic leanings, like Skelton and Falconar-Stewart, far outnumbered Presbyterians. This, then, was not Government with officials representative of industrial Scotland, nor even middle class Scotland. It was government by county.

The Board's peculiar status of being Scots, but not quite of the new Scotland, helps explain many aspects of the way policy developed. Undoubtably McNeill's tenure as chairman ensured the implementation of much of what the 1845 Act intended. His soft Highland manner, his avoidance of petty bureaucracy, and his belief that the landed classes had a duty to support the less

⁷⁰ For instance, *Hansard* 313 (Third Series) pp.480-1, 5.4.87; *ibid.* 60 (Fourth series) pp.890-6, 1.7.98.

⁷¹ Letter of McNeill to Walker, 6.6.56, in SRO GD 371/302; Minute of Board of Supervision 17.2.70, in SRO HH 23/14.

fortunate all meant that the poor, unlike in England, were saved from the wrath of the utilitarian Whigs.⁷² Undoubtably, too, the anger of M'Neill, Campbell and the others did persuade local authorities that some action to implement the 1867 Act was necessary.⁷³ Yet the problem for the Board was not simply a question of its weak constitutional position, but its social and cultural distance from the way that ordinary industrial Scotland was developing.⁷⁴ Walker, it was said, spent all his spare time developing his estate and on Episcopalian business, establishing churches and schools to compete with Presbyterian establishments. Skelton was regarded by his contemporaries as primarily a historian, and he himself bemoaned what suburban Edinburgh had done to his Braid Hills retreat. The others, equally, had country pursuits.

The minutes, the correspondence and the reports of the Board all have to be assessed in this light, the almost constant shock, concern and disbelief of what the Scots could do to their fellow poor and to themselves. To Board members and officials, it seemed incomprehensible that any rational person would want to 'pig themselves' (as Walker said) in overcrowded housing, draw water from polluted wells and live right next door to their animals. It seemed equally incomprehensible that poorhouse inmates should be crowded two or three to a bed, with no separation of the sexes, and with children full of flea-ridden clothing. The Board certainly felt it knew what was wrong with industrial Scotland; throughout this period its special reports did increase, and it did (eventually) appoint an additional outdoor officer especially for Clydeside, but its annual and officer half-yearly reports all indicate a fatalism about what it could achieve. Parishes that were prepared to dump the sick, the infirm and children into overcrowded poorhouses, a popular view of sanitation which thought little was wrong with a good dung heap, and a widespread apathy towards the cause of epidemics all meant it was satisfied with even a minimum of residual action.

⁷² McNeill, 'The Working Classes'. (Being the Opening Address to Edinburgh Philosophical Institute, c1856), in SRO GD 371/334.

⁷³ M'Neill's inspections, in particular, were said to cause local officials great 'trepidation'.

⁷⁴ Evidence of Walker, *The Civil Departments (Scotland) Committee*. C.64. (P.P. Vol. XVIII 1870) p.111.

Trevelyan's 1894 Local Government Act, establishing a political rather than a quasi-judicial board, ought to have ushered in a new era, but the medical members he and his successor chose, McLintock and Russell, both succumbed to illness soon after entering office and their impact on policy was never great. Other officials appointed during this period also brought little change to the new Board's continued laird domination. Murray, a staff clerk with impeccable administrative credentials, was passed over for the Secretaryship in favour of Falconar-Stewart.⁷⁵ It was not until W.L. MacKenzie's appointment in 1901 to the newly created medical inspector's post that the beginnings of any significant change in the Board's view occurred.

MacKenzie, who had been heavily influenced at Aberdeen by the experimental psychology of Bain, brought to his Government career a view of public health far removed from even Littlejohn's or Russell's.⁷⁶ As one of his contemporaries wrote, MacKenzie had sensed that a new movement was necessary 'in a different direction and on a different plane' than in the past.⁷⁷ The mass control of infectious disease by better sanitation had certainly reduced death rates, but if further 'advances' were to be made and infectious disease brought under greater control, it would have to be complemented by efforts aimed more at the individual and his needs—hospital treatment for those with TB, the introduction of specialised medical care for the sick poor, welfare schemes for children, the reform of local government, and above all, greater State intervention in housing.⁷⁸

⁷⁵ Letter from M'Neill to Murray, 21.4.97, and Skelton to Murray, 6.5.97, in SRO GD 1/676/12 and 1/676/13.

⁷⁶ Bain, A., *The Emotions and the Will*. (London, 1899); *Senses and the Intellect*. (London, 1894) (with Chapter II written by MacKenzie).

⁷⁷ Obituary Notice by Currie, J., *Scotsman*, 1.3.35.

⁷⁸ On the monthly medical inspection of schoolchildren, 'Diphtheria and its Prevention', in *The Sanitary Journal*, 1895. Vol. II (New Series), pp.386-404; on the necessity of local authorities to develop hospital provision for TB, 'The Prevention of Tuberculosis', in *ibid.*, 1899. Vol. VI (New Series), pp.551-60; on the failure of municipal efforts in housing, 'Review of the Annual Conference of the Royal Institute of Public Health', in *ibid.*, 1900. Vol. VII (New Series), pp.295-301; on stigma preventing an adequate Poor Law medical service and on local government reform, see evidence to *Royal Commission on the Poor Law (Scottish Evidence)*, *op. cit.*, pp.176-85.

With the administrative reorganisation of the Board in 1904 which diminished the role of the general superintendents, the laird domination of the Board declined. The appointment of McCrae as chairman, Murray as Secretary and the addition of the three new medical inspectors served to ensure their formal eclipse. The administration of Government policy was now in the hands of the urban, Presbyterian Liberal, who like MacKenzie wanted to respond more positively, and more urgently, to an advanced industrial economy. Their view of Scotland was not from the county, amazed at what they saw, but from the city, confident that they could and would make others listen. What lay at the heart of their political philosophy was, perhaps, summed up best by MacKenzie. Addressing an audience of fellow medical officers at the outbreak of war, he commented:

'Usually we think of the State as an organisation compelling us from above, not as an organisation created by ourselves from below . . . [but] . . . the State is simply the name for all the institutions and mechanisms necessary to enable the citizen to realise the life of the family. If we keep steadily to that point of view the State can never become an opponent of the family; it will become rather the higher plane of organisation on which the inner purposes of the family can alone be realised.'⁷⁹

Four years later the Board was drafting a Bill which, for the first time, would compel a local authority to assess the extent of its housing need, and with a Government grant, enable it to build low rent homes for the 'working classes'.⁸⁰

⁷⁹ 'Health and the State', in *County and Municipal Record*, 1914. Vol. XXIV, pp.17-18.

⁸⁰ It was MacKenzie who drafted the Bill's key clauses, see *British Medical Journal*, 1929. Vol. 1, p.471.

THE NATURE OF GOVERNMENT

ACQUIRING A MORE ACCURATE KNOWLEDGE OF PARISHES: THE BOARD'S REQUEST FOR AN INSPECTING OFFICER, 1852

The following is an extract from the Board's minute calling for an 'inspecting officer'. A few months later the minutes record, for the first time, W.A. Peterkin, as the 'Visiting Officer'.

The Board proceeded to take into consideration the propriety of entering into some arrangement by which a personal visitation of the different parishes throughout Scotland might be made from time to time by one of the officers of the Board. The necessity of acquiring a more accurate knowledge of the manner in which the administration of relief to the Poor is conducted in every parish than can be obtained by correspondence merely has been long felt by the Board, and they are satisfied that the present system of supervision will always be incomplete, unless the Board have in their employment an officer, who may be commissioned by them to visit and report as to the condition and management of the Poor over the whole country. The Board have at present power to send any of their officers upon such expeditions and this power they have occasionally exercised. They would have done so more frequently had they not been deterred by the fear of expense. By an arrangement entered into and sanctioned by the Lords Commissioners of Her Majesty's Treasury, an officer of the Board when so employed receives fifteen shillings a day for subsistence money having his actual outlay for travelling repaid. Moreover occasions sometimes arise when the Board employ a Special Commissioner under the 11th Section of the Poor Law Amendment Act the expense of which proceeding is necessarily very heavy. A Special Inquiry into charges made against an Inspector of Poor accused of habits of drunkenness cannot be conducted for much less than £50. The Board are disposed to think that the present expenses of the Establishment would not be materially increased, while at the same time great additional

benefits would be obtained for the public service if a new arrangement were made and if Mr Peterkin who had shown himself equal to the duty, were appointed to act as Inspecting Officer of the Board, with an allowance of not less than £180 a year in lieu of the sum now allowed for subsistence money and in addition to his present salary of £150 a year. The expense of Special Commissioners would in that case be of rare occurrence and in very special cases only as Mr Peterkin would be fully competent to enquire into and report upon most of the cases which are likely to arise involving charges against Parochial Officers. The expenditure of the Board had hitherto always been within the annual estimate, and it is conceived that the contemplated arrangement, would not require any further sum to be asked from Parliament than what is exhibited in the Estimates for the present year. The Board direct a copy of this minute to be sent to the Secretary of State for the Home Department and the Lords Commissioners of her Majesty's Treasury. [BS MB 27.5.52, in SRO HH 23/4]

LETTING THE BURGHS DO THEIR OWN DIRTY WORK: SIR JOHN MCNEILL
ON THE NUISANCE REMOVAL BILL, 1856

In 1856 the Lord Advocate re-introduced a permissive Nuisance Removal Bill, which, after objections to the use of the Prison Board as the Central Authority, had been withdrawn the previous year. The first two extracts here are from letters Sir John McNeill sent to the Lord Advocate. The third and fourth are from letters the Lord Advocate received from interested bodies. The resultant Act gave no power to the Board except to decide whether the Local Authority was to be the Parochial Board or the Police Commissioners.

I have been looking at the Nuisance Removal Bill and it strikes me forcibly that, with such powers as you propose to give, the chief danger to be apprehended would be an excess of zeal.

It also appears to me I confess that great inconvenience to the Public Service is likely to result from employing the Prison Board to work out that measure through the machinery of the Poor Law in the greater part of the country. I should certainly be startled and

expect unfavourable results if the Board of Supervision were required to carry out any new measure by means of the machinery of the Prison Board.

Whether the Board of Supervision could undertake the work must depend upon the other members quite as much as me. The Sheriffs are my main stay in Poor Law matters. I cannot rely upon the attendance of anyone else. They are occupied as you know with country business and professional engagements and could hardly be expected to give me another day in the week for the Removal of Nuisances; but the Solicitor General, Sir W. Craig and the Lord Provost, whom we rarely see, might be willing to give assistance.

In the course of this week I hope to be able to tell you what we can and cannot do. [Letter of Sir John McNeill to the Lord Advocate, 7.4.56, in SRO AD 56/276/1]

It appears to me that they [the Bill's clauses] would require considerable modification to make them workable, especially in Rural Parishes.

If the Burghs are to be allowed to do their own dirty work I think, with an assistant Secretary for the Removal of Nuisances, I could manage the Rural Parishes, provided I could get members enough to make a Board on one day in the week or even once a fortnight for that purpose and provided that the Bill is to be licked into workable shape - everything will depend upon the proper adaptation of the measure to the circumstances of the country so as not to require what is impracticable or what is likely to become too oppressive as to be intolerable. [Letter of Sir John McNeill to the Lord Advocate, dated 22.4.56, in *ibid.*]

The proposed substitution of the Board of Prisons for the Board of Supervision seems to be a hardship to the Parochial Boards and Inspectors, as they are not at present under the control of the latter Board and if they might be called upon to perform conflicting duties, or different duties at the same time.

If the control power were kept in the hands of the Board of Supervision it would be not necessary to appoint a permanent Medical Inspector, as in ordinary seasons, the visiting inspectors

of the Board could perform the duty and the Board might have power to call in the aid of a medical man in seasons of epidemic, or when required. My objection to the permanent appointment of a Medical Inspector is that a man of high standing could not be got at the salary proposed and I know, in my parish at least, no proper arrangement could be made, or effectively carried out unless the officer (if a medical man) were of a standing decidedly higher than the Medical Officers of the parish. [Letter of G. Greig, Inspector of Poor, St Cuthbert's Parish, Edinburgh, dated 11.4.56, in *ibid.*]

The Bill appears to them to be generally, one of great public importance but they consider that it is susceptible of improvement in certain respects in so far as regards Parts 1, 2, 3 and 4 and particularly they are of the opinion that there is no occasion for a general superintendence with respect to the matter of Nuisance and prevention and mitigation of diseases as proposed in Parts 1 and 2, the Local Authorities being in their opinion perfectly adequate and best suited for having the provisions of the Bill enforced, but if such general superintendence shall be considered necessary . . . it should be conferred, not on the Board of Prisons, which is of a temporary nature and will expire in 1862, but on the Board of Supervision under the Poor Law, a Board permanently appointed. [Petition to Parliament by Commissioners of Police, Dundee, suggesting alteration of the Nuisance Removal Bill, dated 5.5.56, in *ibid.*]

COLLECTING INFORMATION: THE HOME SECRETARY'S INSTRUCTION TO THE GENERAL SUPERINTENDENTS OF POOR, 1857

During 1854 the Board found itself hard pressed to investigate complaints over Poor Law administration in the Highlands. Two years later when the Lord Advocate introduced a Bill permitting it to appoint outdoor officers Sir John McNeill met a number of MPs who objected to any increase in its power. The first extract is Sir John's subsequent letter to the Lord Advocate. Although the Bill was passed Sir John felt concerned that the officers might be too independent and with the Home Secretary's approval, a set of instructions guiding their inquiries were drawn up. The second extract formed part of these.

To him (A. Hastie) I explained that I approved of your Poor Law Bill as you informed me you had now amended it, provided the Board of Supervision would be at liberty, as I understood you to say, it would be, to exercise its discretion from time to time as to the expediency of assigning districts to the Superintendents or of employing them on a wider range. [Letter of Sir John McNeill to the Lord Advocate, dated 30.6.56, in SRO AD 56/254/1]

In the performance of your duties, you will keep in view that the Legislature has imposed upon certain persons in each Parish, who form the Parochial Board, the obligation to administer the Laws for the Relief and Management of the Poor, and that the nomination and ordinary superintendence of the paid officers is vested in those Boards. They are thus primarily responsible for any irregularity or abuse in the administration which may occur in their respective Parishes, and it would be a serious error so to interfere with their proceedings, as to exonerate them from that responsibility; you will therefore be careful to avoid even the appearance of a desire or intention to supersede the local administration in any of its statutory functions. If, however, any illegal or reprehensible practice should prevail in a Parish either as to the administration of outdoor Relief, the management of the Poorhouse, the keeping of the Parochial Books, or the conduct of the Inspector or Assistant Inspectors, it ought not to escape your observation, and you will not fail to point it out to the Parochial Board, and to report it without delay to the Board of Supervision.

To enable you to acquit yourself of this most important part of your duty, and to obtain full information regarding all matters connected with the Administration of the Poor Laws in your district, you are hereby authorised to be present at the meetings of any of the Parochial Boards, and to take part in the discussions, but not to vote. You are further authorised to require from any Parochial Board or Inspector of Poor, answers or returns upon any question or matter connected with, or relating to, the Relief of the Poor; and also, by a summons signed by you, to call before you all such persons as you may consider it necessary to examine upon any such question or matter, and to administer oaths and to examine upon oath all such persons, and to require and enforce

the production upon oath of all books, contracts, agreements, accounts and writings or copies thereof respectively, in anywise relating to any such question or matter.

It is desirable that you should visit each Parish in your District, and be present at a meeting of the Parochial Board at least once in each year. During such visit, you will minutely inspect the Poorhouse, if there be one, examine into the manner in which Relief is administered, and the duties of the Inspector or Assistant-Inspectors performed. You will ascertain the arrangements for providing Medical Relief to the Poor, and the provision made for the Education of Pauper Children of both sexes, and you will satisfy yourself, by personal inspection, of the general condition of the Paupers, compared with that of the independent labourers in the Parish.

You will report to the Board, immediately after such visit, any matter that may appear to you to deserve their notice, or to require their interference in the Parish. In addition to such Reports, which will be transmitted successively from the Parishes visited, you will forward a short weekly diary of your proceedings, in the form annexed to this letter; and, twice a year, you will prepare a General Report of the state of your District, and especially of that portion of it which you may have visited during the half years ending respectively 31st March and 30th September.

The collection and diffusion of information as to the proper uses and management of Poorhouses, the administration of outdoor Relief, the state of Pauperism in general, and the welfare of the working classes, are matters to which your attention will be given in your communications with the Local Administration, to whom you may be able to impart much useful information, derived from your previous experience and observation. [Letters of Instruction Addressed to the General Superintendents of the Poor in Scotland, as Approved by Sir George Grey, Bart., one of Her Majesty's Principal Secretaries of State, on 16th May 1857, in *The Annual Report of the Board of Supervision, 1857*. (P.P. Vol. XXVIII, 1857-8) App.(A), No 7, pp.126-8]

CONSOLIDATING THE PUBLIC HEALTH LAWS: THE BOARD'S MINUTE,
1866

In 1865 the Government passed a series of Sanitary Acts. The following year Ardrossan Parochial Board attempted to implement them but found their language inappropriate to Scottish conditions. The extract here is from the consequent Board minute. Later the Lord Advocate agreed that the Sheriff of West Lothian, George Munro, should draft a Public Health Bill.

Ardrossan. Submit letter from Inspector dated 3rd October respecting Sewage Utilisation Act 1865 and Sanitary Act 1866, which was before the Board at last meeting, with draft letter by Secretary – Draft letter by Secretary approved.

Miscellaneous. On the motion of Mr Fraser [Sheriff of Ross and Cromarty] the Board agreed to the following resolution: The Board considering the extreme difficulty felt by the Parochial Boards, the Local Authority and this Board in carrying out the provisions of the Nuisance Removal Act 1856, the Sewage Utilisation Act 1865, the Sanitary Act 1866, and the provisions in the General Police Act 1862, relative to the public health, owing to many of these being irreconcilable with each other, and many of them being inapplicable to Scotland, resolve that the matter be brought before the Lord Advocate, with a view to these and other Acts relative to the public health being amended and consolidated.

The Secretary was directed to transmit a copy of the resolution to the Lord Advocate. [BS PHMB(CH) 22.11.66, in SRO HH 26/1]

THE PUBLIC HEALTH BILL, THE BOARD'S POWERS AND THE UNPOPULAR
NATURE OF A MEDICAL OFFICER'S DUTY, 1867

After the Second Reading of the 1867 Public Health Bill the Government proposed to give the Board the sole power to dismiss medical officers of health. This extract is from a letter the Secretary subsequently sent to the Lord Advocate for approval of its action. Nevertheless the Government found Liberal M.P.'s remained in opposition and the amendment was withdrawn.

Those alterations in Clause 8 and 39 are unfortunately in the direction to which some of the Scotch members (acting as mouthpieces of their constituents) profess themselves opposed.

But I think they are really important as regards the beneficial operation of the Bill and you should maintain them if you can.

If medical officers are removable at the caprice of the local authorities without culpe of any kind alleged against them it would be impossible for them in many cases to do their duty fearlessly and independently. Their duties are of a peculiarly invidious and unpopular nature, and in most of our parochial boards the classes with whom sanitary measures are unpalatable form the majority. [Letter of W.S. Walker to the Lord Advocate, dated 11.6.67, in SRO AD 56/276/2]

APPOINTING A MEDICAL MEMBER: THE CHAIRMAN'S OBJECTION TO PROFESSIONAL PREJUDICE, 1868-9

In 1869 the Lord Advocate received a petition from the Royal College of Physicians calling for the Board to have a Medical Member. The Lord Advocate asked the Board's new Chairman, William Walker, for his comments, and the following was his reply.

The board was instituted in 1845 and they have therefore had, as regards poor law administration, an experience of 24 years. In sanitary matters they have acted since 1849, under the Nuisance Removal Acts of that year and 1856, and with enlarged powers under the Public Health (Scotland) Act, 1867. The Scotch Vaccination Act was passed in 1863, but the board have had to discharge duties with reference to vaccination ever since 1848, when the Parliamentary grant in aid of medical relief was first voted. No difficulty has ever been found to arise in the discharge of any of these duties. The board receive medical testimony whenever it is tendered, and they call for reports and medical certificates from the parochial medical officers in all cases in which the opinion of medical men is required; and in cases of difficulty or disputed opinion they obtain additional assistance from medical gentlemen of eminence selected by themselves. Both the Poor Law Acts and the Public Health Act empower the

board to appoint medical practitioners as commissioners to conduct special inquiries and to report to the board, and this power has been exercised whenever an occasion seemed to call for it.

Thus, in framing the dietary for poorhouses, the opinion of Professor Christison, and the late Professor Alison, and Dr Davidson were obtained. At the request of the board, the Royal College of Physicians of Edinburgh drew up, for their information, a set of suggestions relating to cholera and its prevention and treatment. Dr Littlejohn has been repeatedly employed with reference to sanitary measures; Dr Douglas Maclagan and others have from time to time been consulted upon various subjects, and the Vaccine Institution under the charge of the board is superintended by Dr William Husband. I am not aware that the results of this course of practice have been unsatisfactory to the public. They have never been so represented to the board by any of the persons interested; and the board have thereby obtained, at a very small annual cost, all the medical information which appeared to be required for the public service. The economy of the present system is unquestionable. The constant services at the board, of medical men of sufficient reputation to make their opinions really valuable could only be obtained by offering them large salaries. The proposal, however, appears to me to be not only needless, but also objectionable in principle. In the class of questions for the decision of which the board requires medical information, and in the decision of which the Royal College of Physicians of Edinburgh desire that the board should be aided by medical members, the functions of the Board are truly judicial. They have to come to a determination upon, and apply the law to, the facts laid before them. Medical members of the board would necessarily be in a position of being both witnesses and judges in all medical questions, whereas at present the medical evidence laid before the board is quite external to the board itself. I apprehend, moreover, that the change proposed would not be satisfactory in its results to the public, perhaps not even so to the medical profession. It would invariably be assumed that the board's decisions upon medical questions emanated from the medical members, and persons dissatisfied with those decisions would be

very apt to attribute them to professional or personal prejudice. Whether, for instance, a parochial medical officer charged with a failure of duty were dismissed or upheld by the board, both the parochial board and the medical officer would probably believe that the decision was instigated by the medical members. I am satisfied that if the medical members sat at this board, neither parochial boards nor other interested persons would as readily acquiesce in the justice of the board's decisions in such questions as they have hitherto done. The instances cited by the Royal College of Physicians, in which, they state that medical men have been beneficially employed in public departments, are the Lunacy Commissions and the English Poor Law Board. It seems unnecessary to advert to the case of the Lunacy Commission, as the Board of Supervision have no functions relating to lunatics to discharge. With regard to the Poor Law Board (and, it may be added, the Privy Council, as administering the laws relating to public health in England), the medical men employed are not members of the governing board, but merely salaried officers who conduct inquiries and report to the board. But there does not appear to me to be at present sufficient work of a medical kind in Scotland, to justify the appointment of such an officer in connection with the Board of Supervision. [Memorandum of W.S. Walker, dated 20.12.69, in Evidence, dated 10.5.70, to *Select Committee on Poor Law (Scotland)*. (P.P. Vol. XI 1870) pp.260-1]

THE PUBLIC HEALTH DUTIES OF THE BOARD'S OUTDOOR OFFICERS, 1869

Following the 1867 Public Health Act the Board agreed to re-arrange the duties of its outdoor officers and the following is an extract of its circular setting out what it thought they should be.

As the season of the year most suitable for active sanitary operations is approaching, I am directed by the Board to explain to you generally the nature of the duties which you are required to discharge within your district, in connection with the provisions of the Public Health (Scotland) Act, 1867.

The Board do not wish you, at present, to make such regular and minute inspections of your district with reference to its

sanitary conditions, as would seriously interfere with your ordinary duties as General Superintendents of Poor. But, when you visit a parish in the course of your duties as a Poor Law officer, you will take the opportunity of inquiring how far the enactments of the Public Health Act are complied with, and whenever you find any failure on the part of the Local Authority, you will report the same to the Board.

You will keep in view that some of the enactments of the Statute are merely permissive and enabling, while others are obligatory and absolute. In the case of the former, you will inquire as to the grounds upon which the local authority have put the statutory provisions into force, or (as the case may be) have resolved upon leaving them inoperative and you will report as to whether the local authority appear to you to have exercised a sound discretion or not.

It is of course in the towns and villages that the active operation of the statute is of greatest importance, and your observations will be chiefly directed to those parishes which contain any such.

Through the courtesy of the Registrar General, the board have received a valuable and interesting table, with explanatory notes, drawn up by Dr Stark, superintendent of the statistical department in the Central Registry Office, showing the percentage of deaths to population in all the populous districts of Scotland, during the 10 years 1856-1865, and I am directed to transmit a copy for your information and guidance.

But you will understand that the Board do not expect that the whole of the Provisions of the Public Health Act can be immediately and simultaneously put in force in all places. Many local authorities have already shown a commendable desire to improve the sanitary condition of their districts by a prompt and voluntary use of the machinery which the Act provides; and it is upon the spontaneous action of the local authorities, aided or stimulated as may be required from time to time by information, advice, or remonstrance, that the Board are disposed mainly to rely for a successful execution of the Act, and a general improvement in the public health. In addition to your ordinary inquiries and reports, the board will from time to time, call upon you to institute special investigations for their information, upon

any matters requiring such a step, and in these cases you will receive such further instructions as may be requisite. [Instructional Letter to the General Superintendents of Poor and the Visiting Officer, as to Duties under the Public Health Act . . ., dated 31.5.69, in *Annual Report of Board of Supervision, 1869*. (P.P. Vol. XXXV 1870) App.(A), No.9, pp.11-12]

THE ABSOLUTE NECESSITY OF APPOINTING SANITARY INSPECTORS: THE BOARD'S CIRCULARS, 1871-3

The first extract is from the Board's 1871 circular requiring local authorities to appoint Sanitary Inspectors. Two years later the Board recommended a set of byelaws for their conduct and the second extract, from these, deals with their proposed relationship to the Board. They were drafted by Dr Littlejohn.

I am directed by the Board of Supervision to inform you that they have resolved to require all Local Authorities having within their jurisdiction a Town or Village Population of 2000 or upwards, to appoint Sanitary Inspectors, in terms of section 8 of the Public Health (Scotland) Act, 1867.

The Board are of the opinion that in such districts it is absolutely necessary, for the efficient administration of the law, that Local Authorities should have the services of a permanent Statutory Officer. The detection and removal of nuisances, to be of any real value, must be constant and continuous; and the statutory requirements respecting common lodging-houses, as well as rules and regulations made by the Local Authority, therefore, will be systematically disregarded, if there is not a frequent and vigilant inspections of such houses, and if the offenders are not promptly prosecuted. Further, it is impossible in such districts duly to enforce the directions and regulations issued by the Board, with the view of preventing or mitigating epidemic disease, unless there is a Statutory Officer who is authorised to execute them, and responsible for their neglect. No committee of the Local Authority can satisfactorily or continuously discharge any of these duties in populous places.

I am therefore directed to intimate that the Board consider it necessary, for the purposes of the Act, that the Local Authority of [blank] shall appoint a Sanitary Inspector; and they hereby, in terms of section eight of the Public Health Act, require them to do so without delay, to fix a proper salary to be allowed to such Inspector, and to report to the Board the name, address and salary of the Inspector appointed, all in terms of the said enactment. [Circular Letter requiring certain Local Authorities to appoint Sanitary Inspectors, dated 28.8.71, in *Annual Report of the Board of Supervision*, 1872. C.681. (P.P. Vol. XXIX 1873) App.(A), No. 14, pp 88-89]

The Sanitary Inspector shall make all such investigations and reports relating to Nuisances and Common Lodging Houses, or as to the execution of the Public Health Act, as may be ordered by the Local Authority or the Board of Supervision.

The Sanitary Inspector shall from time to time prepare such special reports as to the sanitary condition of the parish or burgh or district to which he may be appointed, and also as to the condition of all Common Lodging Houses within the said parish or burgh or district, as may be required by the Local Authority or the Board of Supervision.

The Sanitary Inspector shall be bound to observe and execute all lawful orders and instructions of the Local Authority and the Board of Supervision, applicable to his office; and, if required, he shall attend upon the Inspecting Officer of the Board of Supervision, and afford him all information relating to the execution of the Public Health Act.

It shall be the duty of the Sanitary Inspector to report without delay to the Board of Supervision and Local Authority, the existence of any disease of an infectious or contagious kind within the district of the Local Authority which, in the opinion of the Medical Officer, threatens to become dangerous or epidemic within the district. [Circular as to Bye-Laws for Sanitary Inspectors, dated 28.7.73, in *Annual Report of the Board of Supervision*, 1873. C.898. (P.P. Vol. XXVI 1874) App.(A), No.17, pp.46-47]

APPOINTING A PART-TIME MEDICAL OFFICER: THE BOARD'S INDISPENSABLE NEED, 1872-3

This extract is from the Board's letter to the Home Office asking it to support its call for a medical officer. Although this was forthcoming the Treasury refused, on the grounds that it had already approved additional allowances for the General Superintendents. After some considerable correspondence, the Treasury eventually relented and the following year Dr Littlejohn, Edinburgh's Medical Officer of Health, was appointed, with one important alteration; the radius for his inquiries was extended to a day's travel from Edinburgh.

I have the honour to state on behalf of the Board of Supervision, that they consider it indispensable that they should now have a Medical Officer attached to this department, in order to enable them to discharge their duty under the Public Health (Scotland) Act, 1867.

That statute has been in existence for more than four years, and Local Authorities and the public in general have, during this period, been gradually becoming more and more alive to the advantages of Sanitary Improvement. During the last six months especially, they have been stimulated into increased activity by the threatened visitation of cholera, and by the recent (and still present) spread of small-pox.

The Board, however, are always desirous of avoiding any unnecessary increase of expenditure in the department under their charge. They have delayed as long as possible proposing to exercise the power vested in them by the statute to appoint a medical officer, and they have carefully considered how the assistance of which they now stand in need can be most economically obtained. If the whole time and services of a medical practitioner of good standing in his profession, and versed in sanitary science, were to be engaged, it is obvious that a large salary would be requisite. But the Board are of opinion that such an appointment is, at present at least, uncalled for, and they suggest that they should be authorised to appoint a Medical Officer at a salary of only £200 per annum, on the understanding he shall be bound to perform all such duties as the Board may from time to time assign him. These duties would ordinarily

consist of attending at the office of the Board when called upon to do so, and furnishing the Board with written Opinions and Reports upon documents transmitted to them by Local Authorities or individual complainants; but the Board propose also to require their Medical Officer, without additional remuneration, to visit and report upon any place within a radius of ten miles from Edinburgh, where special inquiry may be requisite. More distant inquiries (which are rare) would still be made by Commissioners temporarily appointed under the 11th section of the Act, but the total cost of such inquiries would be to some extent diminished by arranging that the Medical Officer shall, for his salary, conduct those inquiries which are to be made in Edinburgh or its immediate neighbourhood. [Letter of W.S. Walker to The Rt Hon H.A. Bruce, M.P., Home Office, dated 10.1.72, in *Annual Report of the Board of Supervision, 1872*. C.681. (P.P. Vol. XXIX 1873) App.(A), No. 25, Letter, the Chairman of the Board of Supervision to the Home Secretary respecting the Appointment of Medical Officer . . . , pp.117-22]

PASSING LOCAL BILLS: THE BOARD'S LACK OF NOTICE, 1875

During the early 1870s a number of local authorities applied for and secured private sanitary legislation. This apparently caused some difficulty with the 1867 Act and the following is an extract of a letter the Board sent to the Home Office setting out what it thought was required.

On behalf of the Board of Supervision I desire to call your attention to the fact that this Department (which administers the Laws relating to the Poor Law and the Public Health in Scotland) receives no notice of any private or local Bill relating to these subjects which may be introduced in Parliament, and I have to state that inconvenience and detriment to the public service are apt to be the result.

During the last Session of Parliament a local and private Act was passed entitled 'The Borrowstouness Town and Harbour Improvement Act'. In it certain enactments were made which are inconsistent with the provision of the Public Health (Scotland) Act 1867, but the Board had no knowledge of them till after the

Act had received the Royal Assent. Since the passing of this Act, the Local Authority have found the operation of the new enactments referred to would be undesirable and they applied to the Board to exercise certain powers which were vested in them by the Public Health (Scotland) Act in order to restore matters to their original footing. But the Board are advised that they have no power to entertain the application insomuch as the more recent local and private Act overrides and in so far as it goes, repeals the Public Act as regards the limits to which the local Act applies.

In England Bills having objects similar to those of the Borrowstouness Act are referred to the Local Government Board, who report upon their provisions to Parliament and I have to suggest that such Bills applicable to Scotland should in like manner be submitted before they are passed into Acts to the Board of Supervision. [Letter of Secretary to the Home Office, dated 8.11.75, and passed to the Lord Advocate, 10.11.75, in SRO AD 56/254/1]

REPORTS BY LOCAL OFFICIALS: AN INSPECTING OFFICER'S VIEW, 1884

The following extract is taken from one of the Inspecting Officer, Southern (Highland) District's half yearly reports. The District also included Fife, Clackmannan, Stirling and Dunbartonshire.

In Reports on the different parishes I have drawn attention to any insanitary conditions which came under my observation, but, as the Board must be fully aware, anything approaching to a complete inspection of the large extent of country in my district is impossible. I am under the necessity of taking much on trust from reports of the local Sanitary Inspectors; it is my endeavour to have such reports made periodically to the different local authorities, and to a great extent I have been successful in this. This is good so far as it goes, but I am aware that the inspections on which such reports are founded are to a great extent merely nominal. [Half-yearly report by A. Campbell, Inspecting Officer Southern (Highland) District, ending 31.3.84, dated May 1884, in *Annual Report of the Board of Supervision, 1883-4*. C.4148. (P.P. Vol. XXXVIII 1884) App.(A), No.6, p.19]

SECURING A MORE EFFECTUAL ADMINISTRATION: APPOINTING AN ADDITIONAL VISITING OFFICER, 1884-5

The first extract is from the Board's minute calling for the appointment of an additional Visiting Officer. Treasury approval soon followed and the second extract is from a subsequent minute adjusting the areas each officer was to visit.

The Board proceeded to take into consideration the propriety of appointing an additional Visiting and Inspecting Officer for the purpose of securing the more effectual administration of the Poor Law and Public Health Acts throughout Scotland.

To the two General Superintendents appointed under the Act 19 and 20 Vict. c.117 (1856), the supervision of the Northern and Southern Highland Districts including the outlying Islands is entrusted. The population of these districts amounted in 1881 to over a million and a half (1,593,971), and from the difficulty of reaching the more remote parishes the officers are fully employed, and it would be impossible for either of them to undertake the strain of additional outdoor work.

The supervision of the Acts in the rest of Scotland is discharged in so far as his other duties permit, by the Visiting Officer of the Board. The population of his district was over two millions (2,141,602) in 1881, and there are 341 Parochial Boards under the Poor Law Act, and a much larger number of Local Authorities under the Public Health Act. Most of the large towns and populous manufacturing and mining districts are within this district, which may be said generally to include the whole of Scotland south of the Tay and Clyde. It is obvious that even if the whole time of the Visiting Officer were devoted to visiting his district, it would be impossible for him to do it justice, or to make his supervision complete and satisfactory. But he has in addition to visit twice a year and report to the Board upon the organisation and discipline of the 62 Poorhouses which are scattered all over Scotland, and the majority of the Special Inquiries ordered by the Board are held within his district and are conducted by him.

The Board desire to point out that the administration of the Poor Law and Public Health Acts, through their outdoor staff, is exceptionally economical. In England 21 Inspectors and Assistant

Inspectors are attached to the Local Government Board, and the Irish Local Government Board have the services of 10 Inspectors. The average population in the District of each English Inspector (excluding London) is slightly over a million; in the district of each Irish Inspector the average population does not exceed 517,483. The salaries of the English Inspectors rise from £600 to £1,000, of the Irish from £500 to £700.

In Scotland there are three outdoor Officers only; two General Superintendents and one Visiting Officer. The salaries of the General Superintendents rise from £300 to £500, the salary of the Visiting Officer from £300 to £400. When another Inspecting Officer is added to the establishment, the average population in the district of each of the Visiting Officers will be, according to the Census of 1881, 1,070,801. [Minute of the Board Regarding the Appointment of an Additional Visiting Officer and Inspecting Officer, dated 15.1.84, in *Annual Report of the Board of Supervision, 1884-5*. C.4559. (P.P. Vol. XXXIV 1884-5) App.(A), No.4, pp.16-17]

The Board are very desirous that the administration of the Law by each Parochial Board and Local Authority within the District should be enquired into at least once a year by one or other of their officers. The supervision of Local Authorities entrusted under the administration of the Public Health Act has been committed to the Board, and they feel that in existing circumstances this is a most important duty and should be particularly attended to. [BS MB 20/3/85, in SRO HH 23/20]

THE LANARKSHIRE MINERS' UNION, THE SECRETARY FOR SCOTLAND
AND THE BOARD: CARLUKE'S WATER SUPPLY, 1886

The first extract is from a letter by the Lanarkshire Miners' Union complaining of an inadequate water supply in the Carluke district. The second and third are from letters sent by the Scottish Office to the Board, and the fourth from a later Board minute. An improved water supply was eventually introduced.

I am instructed by the Lanarkshire Miners' Association to direct attention to the unsatisfactory and insanitary condition as regards

water supply of the Law District Carluke, Lanarkshire, where a considerable community of miners are resident. In Wilsons Colliery the number of families is about 60 and in Thorntons 20 in all 80 and thereby year by year these families have complained and memorialised the Local Authority but still nothing was done but talk and make fair promises. A water exists but experiences and analysis have proved that it is altogether unfitted for domestic use as it is poisonous and destructive to vegetable life.

The miners families are compelled to use water pumped from the mine containing as it does many impurities consequent upon so many human beings and animals being in the mine and they are compelled to go to a neighbouring Smithy the Proprietor having sunk a well the water of which is plentiful and good and first across the turnpike road from the miners cottages. The Blacksmith charges a halfpenny for every two flaggons, a charge that the miserable conditions relative to wages cannot well afford. [Letter of William Small, Secretary, Lanarkshire Miners' Association, to the President, the Local Government Board, London, dated 16.10.86, Carlue PBM 25.11.86, in SRA C01/27/16]

I am directed by the Secretary for Scotland to transmit herewith for the consideration of the Board of Supervision a copy of a letter from the Secretary to the Lanarkshire Miners' Association relative to the impure nature of the water supply of the Law District, Carlue, and I am to state that Mr Balfour will be glad to know what steps can be taken to meet the complaint of the Society. [Letter from Scottish Office, dated 2.11.86, in SRO HH 28/2/1, Scottish Office Outletters, Public Departments]

I am directed by the Secretary for Scotland to acknowledge with thanks the receipt of your letter of 6th inst., and enclosure, relative to the water supply of the Law District, Carlue, and to state that he will be glad to hear the result of the negotiations in the matter, when communicated to the Board of Supervision.

I am to add that Mr Balfour presumes that the Secretary to the Lanarkshire Miners' Association understands what has been done in the matter. [Letter from Scottish Office, dated 10.12.86, in *ibid.*]

The Board call for a further report as to the steps resolved on for a water supply of Law District. The Secretary was directed to inform the Local Authority that the Secretary for Scotland is urgent in the matter. [BS PHMB 24.3.87, in SRO HH 25/10]

SEPARATING SANITARY DUTIES FROM THE POOR LAW: THE LOCAL GOVERNMENT BILL, 1889

In February 1889, Lord Lothian, the Scottish Secretary, submitted to the Cabinet a Bill for the reform of county government. At the same time he also proposed that parochial boards should be reformed either through giving them the county franchise or by permitting them to combine. The first extract is the Cabinet's response. The second is from the consequent Scottish Office memorandum. It formed the basis of the Bill's Public Health clauses.

The Cabinet are not in favour of making any alteration in the authority for poor law matters, but it has been recommended to me that it might be possible to separate the poor law from the sanitary duties as is done in England and as is also I understand done in towns in Scotland. The Cabinet regarded this suggestion favourably but wish to see it embodied in clauses unless there are such insuperable objections to it as to make it useless to try and draw clauses. There is considerable objection to the present area of poor law administration which it is considered ought to be enlarged. This, obviously, we could not deal with in the present Bill and therefore we might fairly urge that the present arrangements should remain. But there is no reason why for sanitary matters we should not set up a Local Board in each Parish elected on the principle embodied in the Bill. Please let this subject receive consideration. [Letter from C. Ritchie, President of the English Local Government Board, to Lord Lothian, Secretary for Scotland, dated 7.2.89, in SRO GD 40/16/23]

The Parochial Board is the body which at present conducts Poor Law and Public Health Administration. It has not been considered desirable to interfere in any way with the administration of the Poor Law. But the question remains whether an

endeavour might not be made to find a more effective body for the administration of the laws relating to public health.

One method of doing this would be by setting up in each parish a new parochial authority, elected on a county council constituency, but concerned exclusively with sanitary administration.

Two serious objections exist to this proposal – (1) It is very undesirable to set up more administrative bodies than at present exist, with separate elections, separate staff, &c.. (2) If it were proposed by the Bill to set up such a popularly-elected body in each parish for sanitary purposes, it would be at once proposed to give it Poor Law powers; and the question would be raised in the most inconvenient form, and probably discussed at length.

As an alternative scheme, the following suggestions are submitted: (1) It is generally admitted, even by those who prefer the parochial treatment of the relief of the poor, that the parish is frequently too limited an area for sanitary administration. (2) It is proposed therefore, to divide the county into districts, each under a District Public Health Committee charged with sanitary administration within its own district, but with certain controlling power vested in the County Council. (3) The District Public Health Committee would consist of all the County Councillors for the district, and, if it were thought desirable, there might be added a representative from each Parochial Board within the District. There would thus be no occasion for any separate election with its attendant trouble and expense. [Memorandum on the Local Government Bill by the Scottish Office, dated 13.2.89, in *ibid.*]

THE ANNUAL REPORT OF PUBLIC HEALTH OFFICIALS: THE BOARD'S REGULATIONS, 1890

The Local Government (Scotland) Act, 1889, Section 53(1) required District Council public health officials to prepare an annual report on sanitary conditions and send a copy to the Board. The following is an extract of the Board's 1890 regulations. After the 1892 Burgh Police (Scotland) Act was passed similar regulations governed Burgh officials.

Every such Medical Officer shall annually prepare a Report with regard to his district for the year ending 31st December, which Report shall contain:

1. A general account of the sanitary state of the district, and the measures which in his opinion should be adopted for its improvement.
2. A statement of the general inquiries he has made during the year, and of any special inquiries as to sanitary matters.
3. A general statement of any matters as to which he has given advice or granted certificates, including any action as to offensive trades and the sanitary condition of factories and workshops.
4. An account of his inspections of the bakehouses in the district, and of any proceedings taken with regard to them.
5. An account of the supervision exercised by him over the hospitals belonging to the Local Authority, or to which the Local Authority are entitled to send patients.
6. A summary of the action taken to prevent the outbreak and spread of infectious disease.
7. A statement as to the causes, origin and distribution of disease within the district, and the extent to which the same have depended on or been influenced by conditions capable of removal or mitigation.
8. A tabular statement (in such form as the Board of Supervision may from time to time direct) of the sickness and mortality within the district.

Every Sanitary Inspector shall annually prepare a Report with regard to his district for the year ending 31st December, which Report shall contain:

1. A general account of the Sanitary state of the district, as regards drainage, water-supply, nuisances, etc., together with any suggestions for its improvement.
2. An account of his general inspections, and of any special inspections or inquiries.
3. An account of the character of the house accommodation of the labouring classes.
4. An account of the condition of the common lodging-houses.
5. An account of the condition of the dairies, cowsheds and milkshops.
6. An account of the condition of the burial grounds.
7. An account of the means of disposal of household refuse, contents of ashpits, privies, cesspools, &c.

8. An account of the means of isolation of persons suffering from infectious disease.
9. A statement in the form hereto annexed (or in other such form as the Board of Supervision may from time to time direct) of the proceedings under the Public Health Acts during the year. [Regulations and Bye-Laws for Medical Officers and Sanitary Inspectors appointed under the Public Health and Local Government Acts, dated 24.7.90, in *Annual Report of the Board of Supervision, 1889-90*. C.6121. (P.P. Vol. XXXIV 1890) App. (A), No. 15, pp.32-42]

CO-OPERATING HARMONIOUSLY WITH LOCAL OFFICIALS: THE INSPECTING OFFICERS' INSTRUCTIONS, 1892

At the beginning of 1892 there was a change in the staff of the outdoor officers and this extract is from the Board's new instructions, following the 1889 Local Government Act, as to their Public Health duties.

The area of each District embraces several Parishes, and in most of these Districts the County Medical Officers and Sanitary Inspectors have been appointed the Chief District officers. The Board fear that there are Districts in which the amount of local assistance furnished to the principal officers is insufficient, and that there is a danger consequently that from want of time and knowledge of the localities, on the part of the County Officers, nuisances may be overlooked and allowed to remain.

If, in the course of your parochial inspections, you should learn of the existence of nuisances which have escaped attention, it will be your duty to report them to the Board (or, in the case of urgency, to the District Officers), and the Board will take measures to communicate the substance of your Reports to the officers of the Local Authority. It is thought that important information bearing on the sanitary condition of the parish may frequently be obtained from the Inspector of Poor who is necessarily familiar with the poorer and more insanitary localities.

The Board are anxious that their officers should co-operate harmoniously with the officers of the Local Authorities. They

believe that the principal local officers, whose knowledge of modern sanitation must in many cases be greatly in advance of that possessed by their employers, will welcome any assistance that the Board and their Officers can afford.

This assistance will probably be most effectually rendered in connection with the Reports on the sanitary condition of their Districts which the Local Officers are required to make to the Board; and copies of, or extracts from, these Reports will be transmitted to you in order that your attention may be particularly directed to the localities which in the opinion of the local officers require special measures of sanitation.

I may add that any portions of your Public Health Reports which you do not wish to be transmitted to Local Authorities should be marked 'confidential'. [Letter of Instructions to Inspecting Officers as to their duties under the Public Health and Local Government Acts, dated 3.2.92, in *Annual Report of the Board of Supervision, 1891-2*. C.6725. (P.P. Vol. XXXIX 1892) App.(A), No.16, p.56]

TRYING FOR MORE POWER OVER THE BURGHES, 1898

During 1898 the Board encountered difficulties with Kelso, Saltcoats and a number of other burghs on improving their water supply. The extracts are from the Board's minute on the need to amend the 1897 Public Health Act, and formed the first attempt at introducing what eventually became the Burgh Sewerage, Drainage, and Water Supply (Scotland) Act, 1901.

I am convinced that Kelso has at present a dangerous and inadequate water supply and that the evil points to a gravitational scheme as the proper remedy. All attempts on the part of the Board by persuasion to get the Local Authority to move have so far failed. The only alternative is compulsion, which the gravity of the case warrants; but there seems to be legal complications and the cautious estimation and if possible, the solution of these is the immediate question, but it is for our legal members to advise. [Minute of Dr J.B. Russell, Medical Member, dated 5.11.98, in SRO DD 13/1145 Burgh, Police and Health (Scotland) Bill 1898]

I am of opinion that we should not move further until and unless we know we can compel the Local Authority to introduce a supply by gravitation, if our call upon them to do so should be disregarded.

The Act of 1897 does not deal with the water supply of burghs and it is at least doubtful how far the provisions of Section 147 of that Act would enable the Board to compel a Local Authority to observe the requirements of the Burgh Police Act, assuming these to comprehend such a gravitation supply as is here in question.

Accordingly I think we must hold our hand in Kelso and in other Burghs, where we know that a new water supply is called for. On the one hand it is in such Burghs, particularly the small ones, that our intervention is chiefly required.

Our hand seems to me to be also tied as regards the future. Apparently the Burgh Police and Health Bill, as introduced at the close of the last session, leaves the Board powerless. It does not seem to be intended that the powers which the Board had alike in the Burghs and in the Landward Districts under the 1867 Act are to be renewed as regards Burghs, and unless we have such powers I do not suppose that these Burghs be inclined to pay such attention to simple remonstrances. Indeed our jurisdiction as regards water supply matters within the Burghs will be very different from what it has been if we have no power to enforce our views, and I fear that the Burgh Authorities will very soon find this out, if they have not done so already.

If the other members of the Board agree, I think the President should see the file. [Minute of J Patten-McDougall, Legal Member, dated 11.11.98, in *ibid.*]

The legal position being as described I approve of the opportunity of the Bill being utilized to amend it, and of the Legal Members suggestions. [Minute of Dr J.B. Russell, dated 11.11.98, in *ibid.*]

My own fear is that, even if we have the right to take this Burgh to Court, a mass of scientific evidence may be produced to show the purity of the Tweed-water on which the Burgh can draw to any extent. We all know that the Tweed is used as a sewer by towns above Kelso, eg Galashiels, Peebles, Innerleithen, Walkerburn,

etc., but whether analytical or even bacteriological, examination at the point of intake at Kelso would show impurity is quite another (and I fear a doubtful) matter. [Minute of M. M'Neill, Vice-President, dated 11.11.98, in *ibid.*]

I would not like finally to deal with these papers until I have the judgement of the House of Lords in a case of . . . versus the Commissioners and Magistrates of Leith which . . . is still at avizandum. Meantime, however, I doubt whether the proposed Bill would give us what we wish and I think it would be well to see the President on the matter. [Minute of C. Scott Dickson, Solicitor-General, dated 22.11.98, in *ibid.*]

In this case we must surely be guided by our legal colleagues. Whenever they give their sanction I think we should petition to obtain a sanitary water supply for Kelso, using every legal means to do so. [Minute of C.C. Scott-Moncrieff, Under Secretary for Scotland, dated 30.11.98, in *ibid.*]

I agree. But I think that the Solicitor-General and the Legal Member ought to take a chance of explaining our difficulty to the Lord Advocate and Mr Nicholson [the legal secretary]. It is worth considering whether in the proposed Bill we should not try for more power over the Burghs. It might make the Bill controversial, but the Lord Advocate should consider it. [Minute of Lord Balfour of Burleigh, Secretary for Scotland and President of the Local Government Board, dated 1.12.98, in *ibid.*]

ENFORCING THE HOUSING ACTS: THE BOARD'S MEMORANDUM, 1904

In the summer of 1903 the Society of Medical Officers of Health petitioned the Government to extend the recently passed English Housing Act to Scotland. (They specifically wanted easier borrowing facilities and an increase in the powers of compulsion). The following is an extract of the Board's subsequent memorandum. The Scottish Secretary, Lord Balfour had already indicated that there could be no Parliamentary time for what they wanted.

The present period of repayment is 30 years, and in my opinion, it would be quite sufficient to meet the circumstances of the case if

an extension were made to 50 years. This is especially the case if such an extension is to be accompanied by:

1. The removal of any limit as to the amount to be borrowed.
2. By the absence of the check of any confirming or sanctioning authority.
3. By the want of any system of audit worthy of the name, so far as Burgh Accounts.

On the other hand if provision were made for a confirming or sanctioning authority and for an Audit of Burgh accounts similar to that given by the Local Government Acts I think the object to going beyond the 50 years would not be so strong.

I certainly think that power should be given to the Department which is to be charged with the administration of the Act to enforce its provisions upon unwilling local authorities. Without such a power, we know well that the provisions of the Public Health Act of 1897 would certainly not have been made available to the extent to which this was required. The power is an extremely useful one and coupled with the condition that where the exercise of power is by petition to the Court of Session, as in the Act of 1897, I cannot conceive that any local authority would be entitled to resent it. [Memorandum of J. Patten-McDougall, Legal Member, dated 20.7.04 and approved by M. M'Neill, Chairman on same day, in SRO DD 6/255, Housing of Working Classes Bill, 1903]

FOR THE BENEFIT OF PROFESSIONAL CRITICISM: THE BOARD ON POORHOUSE ANNUAL REPORTS, 1905

One of the recommendations of the 1904 Departmental Committee in Poor Law Medical Relief was that Poorhouse Governors and Medical Officers should report annually to the Board. The next year the Board issued the appropriate circulars, of which the following is an extract.

The Medical Officer.

The Report should deal with the following matters:

- (a) The sufficiency of the accommodation provided for the various classes of inmates;
- (b) The heating and ventilation;

- (c) The dietary;
- (d) The quality and cooking of the food;
- (e) The nursing arrangements, noting specially whether the staff of nurses is adequate;
- (f) The sufficiency of the supply of medicines and medical appliances;
- (g) The equipment of the sick-wards with medicines, medical appliances, disinfectants, hot and cold water, screens, chairs, bed-rests, etc.;
- (h) The sanitary arrangements;
- (i) The bathing of the sick;
- (j) Suggestions as to the improvements of the buildings;
- (k) The means adopted for the curative treatment of cases of phthisis, and for the isolation of cases of phthisis, itch, and all infectious or offensive cases;
- (l) Any other matters affecting the Poorhouse that you may think it desirable to bring under the notice of the House Committee and of the Board.

I am to add that the primary purpose of your Report is that the House Committee and the Board should in each year have the benefit of a professional criticism of the Poorhouses, with special reference to the conditions affecting the health of inmates, by a competent medical practitioner. [Circular on the Annual Report of the Poorhouse by the Medical Officer, dated 10.8.05, in *Annual Report of the Local Government Board, 1905*. C.2989. (P.P. Vol. XXXVII 1906) App.(A), No.9, p.11-12]

The Governor:

I am to suggest that the Report should deal with the following matters:

- (a) The sufficiency of the accommodation for the various classes of inmates and for the total number of inmates usually in the Poorhouse;
- (b) Whether the staff of servants and officials is adequate, noting any changes in the staff during the year;
- (c) The dietary;
- (d) The discipline of the inmates;
- (e) The kind of work provided for the inmates; whether it is

profitable financially, and whether any changes might with advantage be introduced;

(f) The children, stating how they are being trained, and what proportion of them have been boarded out; and why those still in the Poorhouse have not been boarded out;

(g) Any alterations, structural or otherwise, that have been carried out during the year;

(h) Suggestions as to improvements in the buildings and administration;

(i) Any other matters affecting the Poorhouse that you may think it desirable to bring under the notice of the House Committee and of the Board. [Circular on the Annual Report of the Poorhouse, by the Governor, dated 10.8.05, in *ibid.* App.(A), No.10, p.12]

EXTENDING THE BOARD'S POWERS: THE SCOTTISH OFFICE ON HOUSING, 1908

The following is an extract from a Scottish Office memorandum on the 1908 Housing and Town Planning Bill. Although the Bill was withdrawn, the memorandum guided its re-introduction in 1909.

In my opinion the opportunity should also be taken of transferring the powers of the Secretary for Scotland who is the Central Authority . . . to the Local Government Board for Scotland. This is in accordance with the views of the Board and I think with reason, for it seems clear that the same authority should control Public Health and Housing. While it may be that the Bill will not do all that is required for Scotland, its provisions are not, so far as I see, inconsistent with the proposals, e.g. of the Glasgow Housing Commission. It is perhaps a question whether Scottish Town Councils will readily submit to the proposal to confer over-ruling powers upon the Local Government Board, but I believe that such powers may well be required in certain circumstances. They already exist under Section 147 of the Public Health Act, dealing with cognate matters, and it cannot be supposed that the Board would exercise them in such a way as to be ruinously oppressive upon local finance or extravagantly in advance of public opinion. [Memorandum of J.M. Dodds,

Assistant Under-Secretary, Scottish Office, dated 22.1.08, in SRO DD 6/256, Housing and Town Planning Bill, 1908]

LOCAL AUTHORITIES AND HOUSING INSPECTION: THE BOARD'S REGULATIONS, 1910

The Housing, Town Planning, etc. Act 1909 empowered the Board to issue local authorities with regulations for district inspection. The following extract is from those of November 1910.

ARTICLE I (2) – The local authority shall as part of their procedure make provision for a thorough inspection to be carried out from time to time according to the varying needs or circumstances of the dwelling-houses or localities in the district of the local authority.

(3) The local authority shall cause to be prepared from time to time by the medical officer of health, or by any other of their officers designated by them for the purpose, a list or lists of dwelling-houses, the early inspection of which is, in the opinion of the medical officer of health or such other officer, desirable. The list or lists may, if thought fit, relate to the dwelling-houses within a defined area of the district without specifying each house separately therein.

ARTICLE II – The inspection under and for the purposes of subsection (1) of section 17 of the Act of 1909 shall be made by the medical officer of health, or by such other officer as aforesaid, and the officer making inspection of any dwelling-house shall examine the state of the dwelling-house in relation to the following matters, namely:

(1) The arrangement for preventing the contamination of the water supply.

(2) Closet accommodation.

(3) Drainage.

(4) The condition of the dwelling-house in regard to light, the free circulation of air, dampness and cleanliness.

(5) The paving, drainage, and sanitary condition of any yard or outhouses belonging to or occupied with the dwelling-house.

(6) The arrangements for the deposit of refuse and ashes.

(7) The existence of any room which would in pursuance of subsection (7) of section 17 of the Act of 1909 be a dwelling-house dangerous or injurious to the health of an inhabitant.

ARTICLE V – The medical officer of health or other officer designated as aforesaid shall make a report annually to the Board containing information and particulars in tabular form in regard to the number of dwelling-houses inspected under and for the purposes of section 17 of the Act of 1909, the number of dwelling-houses which on inspection were considered to be in a state so dangerous or injurious to health as to be unfit for human habitation, the number of representations made to the local authority with a view to the making of closing orders, the number of closing orders made, the number of dwelling-houses the defects in which were remedied without the making of closing orders, the number of dwelling-houses which after the making of closing orders were put into a fit state for human habitation, and the general character of the defects found to exist. He shall also include any other information and particulars which he may consider desirable in regard to the work of inspection under the said section. [*Housing (Inspection of District) Regulations, 1910(I)*, dated 28.11.10]

POVERTY, PAUPERISM AND POORHOUSES

DEFINING THE SUM NECESSARY FOR A PAUPER'S MAINTENANCE, 1846

In January 1846 a number of Highland paupers complained to the Board that their allowances under the New Poor Law had not risen as much as they had expected. The Board's Secretary, William Smythe, was sent to inquire. After visiting a number of paupers and then reviewing wage levels (day labourers 7s. per week and ploughmen £24 per year) his report went on to discuss the sufficiency of allowances. The following is an extract.

As far as I could judge from investigating the actual condition of the paupers, there was no appearance of positive want, but I was anxious to ascertain how far my observations might appear justified by an examination of the poor themselves, as to the amount of food actually consumed by them, and by the calculations I might thus be enabled to make of the sums necessary for their maintenance.

An old man and his wife at Thurso, said their supply of meal cost them 5s. a month; this would be 35lbs between the two. The wife of a labourer in Dingwall with four children living in family, the youngest five, and the eldest about twelve, said, that a boll of meal and a boll of potatoes kept the family for six weeks. A boll of meal equals 140lbs. $140.6 = 23\text{lbs}$ of meal in the week, for six individuals, or not quite 3.5lbs per week for each. A boll of potatoes is equal to 4 cwt or 448lbs; $448.6 = 74\text{lbs}$ of potatoes per week for six individuals, or somewhat more than 10.5lbs per week for each. Now, 5lbs of potatoes being generally held equivalent in point of sustenance, to one pound of meal, it would appear that the daily consumption for each individual of this family did not amount to one pound of meal in the day, yet the father and mother were both able-bodied, and employed at hard work, and the children were not of a very tender age. I may also mention the case of an old man at Thurso, who ate nothing but wheaten bread. A 4lb loaf in the week, was stated to be more than

enough for him: this would be 8d. a week; and I believe that in England, a 4lb loaf is reckoned the amount of bread necessary for an individual in a week. All the farther inquiries that I made on this subject, lead me to conclude that these statements are correct. Therefore, I hold, that, for the mere sustenance of a pauper, one pound of meal in the day is sufficient.

Out of the pound of oatmeal, therefore, which I allow, there would remain six ounces for the mid-day meal. Now, 1s. a week, or £2 12s. in the year at the present price of oatmeal (which I take at 20s. a boll) will purchase exactly 364lbs, being, as near as may be, a pound a day. But then we must not lose sight of the important item of potatoes, of which all the paupers, with hardly a single exception, have a certain quantity, varying of course, in each individual case, but still always to such an amount as to form a very material part of their yearly subsistence. From what I saw myself, and the inquiries I made as to the stock in hand at the period of my visit in the second week of February, I should say that a boll and a half, or two bolls, might fairly be taken as the average quantity of potatoes raised by each pauper; a boll and a half should maintain an individual for at least three months. A woman in Urquhart, not on the poor's roll, told me that a boll of potatoes would maintain herself and her mother for two months; and two women living together considered that a boll and a half of potatoes would last them till Whitsunday – that is about three months. I would therefore value the potatoes as affording sustenance for ninety-one days, and hence as equal 91lbs or 6.5 stones of meal, which would be a saving of 9d. a week, or 13s. in the year. This sum should be more than sufficient to provide fish, salt, and other small items. Now, where, as on almost all cases in the rural districts, the paupers sit rent free, where many have small patches of garden ground attached to their houses, and where fuel, either peat or wood, is obtained at scarcely any cost, I am led to consider that an allowance of 1s. 3d. or 1s. 6d. a week is not insufficient for an old man or woman having no other resources. Taking a shilling a week as adequate to supply the necessary food, and addition of 3d. a week, or 13s. a year, will procure any little articles of clothing which may be required; and where paupers are so helpless as not to be able to plant potatoes, in

such cases 3d. a week or more, or 1s. 6d. a week in all, will make up the deficiency.

/We are not accustomed to consider 2s. a week as a very low allowance to a poor person able to move about and not require attendance; and from the returns we have had from England, we know that 2s. and 2s. 6d. are not by any means unusual rates in that country for persons who are wholly dependant on the parish for support. In fact, 2s. 6d. may be taken as the general average even in the South of England: now, if 26s. a year (or 6d. a week) be deducted for rent, and 3d. a week for fuel, it will be found that a poor person in Urquhart receiving 1s. 9d. a week, is actually on a par with the English pauper, as regards the sum of money which is properly applicable to his subsistence; while, if the difference in the standard of living, the nature of the wants to be supplied, and such other additional resources as I have mentioned be taken into consideration, I do not hesitate to say that a pauper in Sutherland or Ross with only 1s. 3d. a week, is to the full as easy in his circumstances as a poor person in a lowland town or village with 2s. 3d., or in England with 2s. 6d. a week.

/The Board will, I am sure, see the expediency both in moral and political view, of not increasing unduly the parochial allowances. It would be a moral evil if the poor are suffered to give way to habits of indolence, by the stimulus to exertion on their own behalf being rendered less urgent than heretofore, while the actual loss arising from there being so much less productive labour will be considerable. Should the allowances be raised, or 2s. be given, where 1s. 3d. a week is now found sufficient, I have little doubt, for instance, that the system of planting potatoes will soon be abandoned, from which alone I reckon, that an amount of food is raised equal to maintain all the poor for one quarter of the year. In dealing with cases of partial disability, the Board, will, I trust, unless some very strong reasons be shown to the contrary, be disposed to place confidence in the local boards, who found their judgement upon many circumstances which cannot easily be demonstrated to person at a distance. I am satisfied that in many cases of partial disability an addition of 6d. or 9d. a week is often of the greatest benefit to the pauper, and sufficient to meet those wants which he is unable to supply by his own industry. [Report

by William Smythe on the Poor in the Northern Counties, dated 12.3.46, (P.P. Vol. XXVIII 1847) in *Annual Report of the Board of Supervision, 1845-6*. App.(C) No.6, pp.39-42]

RECOMMENDING A POORHOUSE DIET: DRS ALISON AND CHRISTISON'S REPORT, 1847

In September 1846 the Board set up a committee of the Solicitor-General and the Chairman to devise a model set of Poorhouse rules. As part of its work Drs Alison and Christison, two Edinburgh physicians, were approached to advise on an appropriate diet. The following extract from their report formed the basis of the Board's approved scales, issued in 1850.

The Dietary of the Edinburgh City Charity Workhouse appears to us to form a good basis for rates of Diet for all similar establishments in Scotland. The following view represents very nearly the average Diet for each inmate:

I. The Healthy who do not work are stated to us to receive, on an average, at breakfast, about 3.5 ounces of oatmeal made into porridge, and 16 ounces of skimmed milk, butter milk, or beef; at dinner, a quart of broth made as below, together with 6 ounces of bread; and at supper, the same as at breakfast. In point of fact each inmate may have as much porridge as he pleases.

The broth, which is served to 340 out of 440 inmates, is made with 32lbs of ox heads, 42lbs of houghs, 40lbs of barley, 10lbs of pease, and 34lbs of carrots, cabbage, turnips and leeks. Upon trial, we consider it of excellent quality. Having ascertained, by experiment, the quantity of meat obtained from the heads and houghs, as well as the weight of digestible solid matter boiled out of the meat and boned together, we find that each ration contains the equivalent of 2 ounces of meat, nearly 2 ounces of barley, a half ounce of pease, and one and a half ounces of vegetables, among which carrots and turnips preponderate. We have no hesitation in recommending this receipt as an excellent one for making the broth of Charity Workhouses.

II. The Healthy Inmates who work receive, in addition to these rations, 'a small portion of meat' boiled in the rice soup of No. III,

amounting, as we are informed, to about 4 ounces daily. This increases the daily nutriment to 15 ounces.

III. The Infirm and Sick, about 100 in number, receive at breakfast and supper the same rations with the healthy who do not work, with the addition of tea, made with about an eighth of an ounce of tea, a half ounce of sugar, and two and a half ounces of new milk. And instead of broth at dinner, they have each daily about 4 ounces of boiled meat, and a basin of rice soup, made with 5.5 ounces of meat, exclusively of bone, one and a half ounces of rice, and 2 ounces of vegetables. The total dry nutriment amounts to 14.8 ounces. We also find, on inquiry, although not stated in the return to the board, that those who get tea have also along with it a small quantity of bread. All inmates of this class do not actually consume both the tea and bread, and the porridge and milk. But they may, if they please; and some do so. [Report by Drs W.P. Alison and R. Christison on the Diet for Charity Workhouses in Scotland, dated 16.1.47, in *Annual Report of the Board of Supervision, 1847*. (P.P. Vol. XXXIII 1847-8) App.(B), No.2, pp.13-14]

THE CRUELTY OF EXPOSING PAUPERS TO CONTAGION, ST CUTHBERT'S POORHOUSE, 1847

At the end of 1847 Sir John McNeill received a number of complaints about the management of St Cuthbert's Poorhouse. The Board immediately appointed a Committee of its members to inquire and the first extract is their report. When an inmate subsequently refused to carry coals, was confined to a cell for twenty-four hours and then assaulted the Governor, the Board passed another minute, the second extract.

We visited all the wards except the Hospital in which there are several patients suffering from typhus fever. We found the House generally clean and well ventilated, the bedding and clothing of the inmates sufficient, and the wards not too much crowded except one of those occupied by children in which the beds were so numerous that they were in contact one with another throughout the whole length of the ward on each side.

In the wards occupied by inmates who are feeble and bedridden each pauper has a separate bed, but in all the other wards each bed

is occupied by two persons and appears to be large enough for their accommodation.

The windows in two of the wards required repair; paper having in some cases been substituted for panes of glass that had been broken.

In the female wards there was accommodation for nine additional inmates and in the male wards for six; but in those occupied by the children there is not vacant accommodation: on the contrary one of these as already stated is now too much crowded. Besides the limited number accommodated in the house many pauper children belonging to this Parish are boarded in the country.

The airing grounds are defective in as much as they do not admit of a proper classification of the inmates while at exercise.

This Poorhouse is not provided with probationary wards, in which persons presenting themselves for admission into the Poorhouse can be placed until the Medical Officer has ascertained whether they are suffering from any disease which would make it unsafe to place them amongst the ordinary inmates. All persons who at the time of their admission are suspected by the House Governor or Matron to be labouring under any such disease are sent to the Hospital where they are exposed to the risk of contagion. This serious evil we were assured would be removed in a short time when the temporary fever Hospital now in progress will be in a fit state to receive patients. But that up to this time no measures should have been taken to provide probationary wards is in our opinion highly objectionable.

The cell in which refractory inmates are confined by order of the House Governor for a time not exceeding twenty four hours, was found to be so imperfectly secured that on two occasions persons confined there had forced their way out, and it was admitted that to prevent a refractory female who had recently been committed to this cell from effecting her escape it had been considered necessary to bind her arms with a cord. It further appeared that when persons are confined to this cell by the House Governor on his own responsibility no report of the proceeding is made to the House Committee of the Parochial Board until its next meeting; and as this Committee usually meets only once a

month nearly that time may in some cases lapse before any report is laid before them.

We are of opinion that the Parochial Board before it entrusted its House Governor with the power to place a refractory pauper in solitary confinement was bound to provide a place of safe custody such as would have left no pretext for having recourse to any measure so objectionable as that which was employed on the occasion referred to.

We have to report with great respect that we found the diet allowed to the inmates of this Poorhouse inferior not only to that prescribed by Dr Alison and Christison in their Report to the Board of Supervision (16th January 1847), of which a copy was communicated to the Parochial Board of St Cuthbert's for their guidance (17th March 1847), but also inferior to the more meagre diet laid down in the rules transmitted by that Parochial Board to the Board of Supervision. Instead of allowing each inmate three and a half or four ounces of meat in the broth supplied for their dinner as recommended by Dr Alison and Christison or even three ounces which is laid down by the Parochial Board to be their allowance, it appears that little more than two ounces on an average of all the ordinary inmates was actually provided and that this deficiency was not compensated by an increase of the other articles of food. On the contrary the allowance of barley and pease in the broth was also found to be smaller than that recommended in the report of the Physicians above referred to.

The Board of Supervision has already intimated to the Parochial Board of St Cuthbert's that it cannot regard an offer of admission to the Poorhouse of that parish as a tender of adequate relief until the rules for that house including the diet tables shall have been approved by this Board. We beg leave to recommend.

First, that the Parochial Board of St Cuthbert's be required immediately to remove to the Country such a number of children as may admit of the beds in the ward we have described as overcrowded being placed at a distance of at least three feet from each other.

Second, that they be directed to prepare two suitable probationary wards of which one is to be appropriated to the males and another to the females admitted to the House.

Third, that they be required to recall the authority given to the House Governor to place refractory inmates in solitary confinement, and not review it until a suitable place of safe custody shall have been provided, and thereafter to direct their House Governor to report immediately to the House Committee every case in which he has considered it his duty to place an inmate in solitary confinement.

Fourth, that they be required forthwith to provide the inmates of the Poorhouse with a diet equivalent to that prescribed by Dr Alison and Christison and that with this view the inmates be classified in the manner adopted by these Gentlemen and that the diet for each class made equivalent to that prescribed for it by them.

Fifth, that they be required to keep suspended in each ward a printed table of the diet allowed to the inmates so that all who can read may have the means of ascertaining the quantity of each article of food to which they are entitled and that copies of the table so suspended be transmitted to the Board of Supervision.

Sixth, that the Board of Supervision should adhere to its resolution not to regard an offer of admission to the St Cuthbert's Poorhouse as a tender of adequate relief until it shall have been satisfied that the Parochial Board of that Parish has actually carried into effect the directions of the Board of Supervision for the regulation of the diet. [Report of Committee Appointed (18th November 1847) to Enquire into the Condition and Management of St Cuthbert's Poorhouse, dated 25.11.47, BS MB 25.11.47, in SRO HH 23/2]

On the 26th November 1847 a communication was addressed to the Parochial Board of St Cuthbert's in which attention was directed to the improper treatment to which the House Governor had subjected an inmate who was placed in solitary confinement; and also to the cruelty of exposing healthy paupers to the risk of contagion by placing them amongst patients who were suffering from fever. It now appears from the report of the Subcommittee of the Parochial Board that the remonstrance and proceedings of this Board have been insufficient to prevent a recurrence of these reprehensible practices. An inmate of house confined for

refractory and violent conduct, on the 9th January 1848 was detained during the following night in a cell without bed clothes or any other protection from cold than his ordinary dress and he and other healthy paupers were subsequently placed in a convalescent ward of the fever hospital where they were exposed to the risk of contagion.

This Board also regrets to find that unseemly scenes of personal violence and contest between the House Governor and one at least of the inmates have taken place in the House. The refractory conduct of the pauper may have provoked the scuffle but this Board cannot help fearing that such occurrences may indicate a want of those qualities in the House Governor which would enable him to exercise the moral influence without which the discipline of a Poorhouse cannot be properly maintained.

The fact that the House Committee have thought it advisable to expel from the House the pauper Forbes, who had long been an inmate on the express ground that the House Governor had been unable to control him, impresses this Board with an unfavourable opinion of that officer's system of management and considered in connection with the other proceedings above referred to leaves them to doubt his fitness for that particular office.

But this Board holds the Parochial Board of St Cuthbert's responsible for the management of their Poorhouse and hopes that having adopted the suggestions of the Subcommittee they will immediately take steps to prevent the recurrence of the evils to which the attention has been directed and thus relieve the Board of Supervision from the necessity to taking ulterior measures to effect that their remonstrances have hitherto failed to accomplish.

The Rules for the St Cuthbert's Poorhouse were submitted to the Board and approved of. [Minutes 10.2.48, in *ibid.*]

SEPARATING THE SEXES AND SEPARATING THE BEDS, PAISLEY POORHOUSE, 1856-61

The first extract formed part of an early Visiting Officer report on Paisley Poorhouse. On his next visit, some two years later, the Officer again raised the same issues and the second extract was the parish's response.

The third is from a letter the Board sent supporting the Officer and the last is from his next report. Afterwards Paisley agreed to both his and the Board's suggestions.

I visited the Poorhouse on Wednesday 5th March, and now beg to Report that generally speaking I found the Establishment in good condition. The Dormitories clean and well aired, and all the Wards in a satisfactory state with two exceptions, which may require some explanation. The recent additions to the Poorhouse are occupied by females only. The ward at the top of the House is set apart for those aged females who although able to go about (and therefore are not allowed to remain in their own dormitories) yet require occasionally to rest in bed for a portion of the day. In this ward there are besides some infirm females who are unable to leave their beds. This ward is also used as the Probationary Ward for females. The objections to this latter arrangement are so obvious that I need not point them out.

I also see objections to the arrangements of the House in effecting a separation of the sexes. The separation gate between the airing yards is insufficient. The access to the Kitchen from the female side of the House is either through the Dining Hall or through the Male airing yard, from which is the principal entrance to the Kitchen. [Report of W.A. Peterkin on Paisley Poorhouse, dated 6.3.56, Paisley PBM(PH) 12.3.56, in *Renfrew District Library (Paisley) B57/7/27*]

In this Poorhouse two adult males sleep in the same bed, but all males who are not of cleanly habits, and all such as wish to sleep alone are accommodated with single beds. This has been the practice since the opening of the Poorhouse in 1752, and has never been found liable to any abuse or irregularity.

It is considered that satisfactory arrangements for the separation of the sexes were made subsequent to the date of Mr Peterkin's visit in 1856. On reconsideration these arrangements appear to the Committee to be as complete as the Buildings will allow. The male and female Departments are separated by a Gate which is constantly locked and which prevents all communication on the

part of the inmates except such as is authorised by the Governor or Matron. [Minutes 9.4.58, in *ibid.* B57/7/28]

With reference to the Minute of the Poorhouse Committee of 9th April last, and that portion of it which relates to the sleeping of two male adults in one bed, the Board of Supervision have to remark that they did not doubt that to direct the attention of the House Committee to the existence of such a practice would be sufficient to put an end to an arrangement so objectionable, and which they must now request may at once be discontinued. I am also instructed to inform the House Committee that the minimum space which the Board has sanctioned for each inmate of a Dormitory which is not less than eleven feet in height from floor to ceiling and sixteen feet in breadth of floor from wall to wall is four and a half feet viz, three feet for the breadth of the bed and one foot six inches between the beds, as well as between the corner beds and the end walls of the ward. Thus a Dormitory to accommodate twenty inmates must be at least forty six feet six inches long, at least sixteen feet broad, and at least eleven feet high. This would give as the minimum about 400 cubic feet for each inmate which is the smallest admissible space. A Dormitory must never therefore under any circumstances be so crowded as to reduce the space for each inmate below that minimum, and it ought to be kept in view that it is only by careful attention to ventilation especially during the night, and regular and thorough daily airing of the Dormitory by open windows while the inmates are in the dayrooms that it can be made proper or safe to reduce the space even to that minimum.

Where there are inmates so infirm that they cannot be regularly removed to Dayrooms, and their Dormitories cannot therefore be so perfectly and regularly aired by opening the windows, a space considerably exceeding 400 cubic feet for each person who sleeps in the ward will be necessary. [Letter of W.S. Walker, dated 4.6.58, Minutes 11.6.58, in *ibid.*]

Inmates: Adult Males 127, Adult Females 190, Total 317. Children, Males 3, Females 5, Total 8. Vacant, 35 Males, 90 Females, Total 125. Overall Total 450. Generally this Poorhouse

was in good order. I am however still of opinion that the structural arrangement of this House should be altered so as to admit of direct communication between the Kitchen and the female side of the House. At present the traffic between the Kitchen and the Female side passes through the airing yard for males. I am also of opinion that two aged and infirm women ought never to be placed in the same bed, and that all aged and infirm females ought to have beds of at least 3 feet in width. [Report of W. A. Peterkin on Paisley Poorhouse, dated 21.10.61, Minutes 28.11.61, in *ibid.*]

MAINTAINING ORDER AND DECORUM, THE VISITING OFFICER ON ST CUTHBERT'S POORHOUSE, 1861

In 1861 a number of St Cuthbert's Poorhouse inmates complained of harsh treatment and the Board sent its Visiting Officer to inquire. He agreed that there had been lapses in management and this extract formed part of his Report. The Parish agreed to adopt the Board's recommended Poorhouse Rules and Regulations.

During my formal inspection of the House on the 28th November I was not satisfied with some matters affecting the material comfort of the inmates, particularly the very insufficient state of the bedding, especially in the Hospital or Sick Wards. I was informed that fresh straw being put into the beds every quarter and the time of my inspection happening at the expiry of the quarter, accounted for the state of the beds. I cannot accept of this explanation as satisfactory.

The collection of clothing and miscellaneous articles secreted about the beds and lodged in the cupboards and boxes in the wards. The stated liberty days with their attendant evils. The system of giving premiums for work done by the inmates. The private supplies of other than House provisions sent to, or brought into the House by inmates. The Lucifer Matches which I found lying about in most improper places. The private cooking in the Dormitories. The want of adequate dayroom accommodation. The diversity of dress worn by the inmates. The permission given to inmates to wear their own, or other than a

uniform House clothing when out on temporary leave of absence as well as frequently the case even in the House itself. The occupation of poor persons, and other improprieties and irregularities attracted my attention as on former occasions.

I have reason to believe that in the minds of many members of the Parochial Board the Poorhouse is still regarded in the light of an almshouse for the reception of the more deserving amongst the aged, infirm or friendless poor, and that work, confinement and discipline are not the main conditions upon which paupers, more especially those of idle, immoral or dissatisfied habits are to be relieved. While this feeling exists, and favours, and indulgences in the shape of stated liberty days, premiums, keeping private stores of provisions and clothing, and the like, are granted, and no sufficient dayroom accommodation is provided, and no proper arrangements made for carrying out the Rules, it is almost hopeless to expect Discipline, Order or Decorum to be maintained.

At present the Parochial Board having the command of pauper labour, undertake to execute work of various kinds for the general public. I refer particularly to knitting and sewing. They thus enter into competition with their own outdoor poor, and many other struggling females who earn a scanty subsistence by sewing and knitting. It is evident that a large establishment, economically worked for profit cannot be attended to without much careful attention and Bookkeeping. To enable a Governor and Matron of a Poorhouse to apply themselves to their proper functions they ought not to have imposed upon them duties and responsibilities which can impede them in the execution of their real duties, which are to maintain Discipline, Order and Decorum and generally to enforce the Rules. [Report of W.A. Peterkin on St Cuthbert's Poorhouse, dated, 30.11.61, St Cuthbert's PBM(PH) 27.12.61, in EDA]

THE DEATH OF ANN BURNS IN CHILDBIRTH ON AN EDINBURGH STREET,
1866

In March 1866 the Board passed new regulations governing suspicious deaths in poorhouses; all were to be specially reported to the

Procurator-Fiscal. Within a month the Board received the precognition of the Crown Agent on the death of an Edinburgh pauper and the following minute was passed.

The Committee took into consideration the letter from the House Governor of the City of Edinburgh Poorhouse transmitting copies of the House Committee's minute of 18th April relative to the case of Ann Burns, who on her way on foot during a cold winter night from the Poorhouse to a Maternity Hospital had been delivered of a child in the street and had subsequently died at that Hospital.

In answer to the Board's enquiry what measures have been taken to prevent the occurrence of such a lamentable event in future the House Committee seem to consider it enough to inform this Board that the House Governor is instructed in all cases in future to obtain a medical certificate before parties are sent to the Maternity Hospital. The minute does not state what it is that the medical certificate is to certify, neither does it state in what manner the pauper is to be conveyed to the Hospital should she be sent there, nor what arrangements have been made for her proper accommodation in the Poorhouse if she should not be sent to the Hospital. In short a matter that has been the subject of judicial investigation raises a question as to the humanity with which the inmates subject to the control of the House Committee are treated would seem from the terms of its minute to be disposed of by that Committee in a manner indicating a want of due consideration which the Board could not have anticipated and which they hope is more apparent than real.

The Board must again call upon the House Committee to inform them in a more intelligible and specific form what measures have been taken to prevent the recurrence of any such lamentable event in future. [BS MB 27.4.66, in SRO HH 23/12]

PAISLEY'S CLEAN AND ORDERLY POORHOUSE, 1867-72

The following extracts are from Visiting Officer reports on Paisley Poorhouse. The parish agreed to most of the minor suggestions, but refused to consider a new building.

An Itch ward is much required. There were several itch patients in the Probationary ward for females, one side of the ward being devoted to the itch patients. The accommodation for women and children is not very satisfactory. This is a very troublesome class in poorhouses and should be kept completely separate from the more respectable female inmates. The House as the Board is aware, has insuperable defects, but notwithstanding of these, the management is so good that on inspection of it always affords one satisfaction. I trust however, that the day is not distant when the Parochial Board will provide for their excellent officials, a house more worthy of them. [Report of A. Campbell, Visiting Officer, dated 24.5.67, Paisley PBM(PH) 19.6.67, in *Renfrew District Library (Paisley) B57/7/29*]

This House is remarkable for its cleanliness and order and appears to be carefully and judicially managed. There is but one airing yard for each sex, classification is therefore impracticable. There is no refractory cell. The use of double beds has generally been abandoned in Poorhouses, with beneficial results to the health and comfort of the inmates. I venture to draw the attention of the Committee to this fact as well as to the advantage of providing for each sick and infirm ward a proportion of beds with mechanical arrangements for raising the occupants to a sitting position. [Report of Malcolm M'Neill, Visiting Officer, dated 5.1.69, Minutes 23.2.69, in *ibid.*]

The House appears everywhere to be clean and orderly. I made to the Governor the following suggestions, viz: That with the view of avoiding frequent washing of the blankets, 2 sheets should be used on each bed. That the mothers of infants should be employed in the washhouse and otherwise as soon after their recovery as the Medical Officer may permit. In view of the improved test which is founded by a well classified Poorhouse and exterior to a town, I trust that an effort will be made to abandon the present inconvenient buildings and to erect a more suitable establishment near the site of the proposed Lunatic Asylum. I observed the ova of vermin on the heads of three girls who have been, I was

informed, recently admitted. [Report of Malcolm M'Neill, Visiting Officer, dated 16.1.72, Minutes 7.2.72, in *ibid.*]

The condition of this House is such as to reflect great credit on the officials whose difficulties from its defective construction and situation must be considerable. The site is exposed on three sides to the street and surrounded by manufactures. There is no possibility of classifying the males while at labour, a single room (an attic over the dormitories) being the only work room, other than the workshop available, useful and healthful employment in the open air is unattainable, and lastly there are but two airing yards for all classes and both sexes of the ordinary inmates. The front staircase should be repaired without delay. Painting seems to be required in various directions. Chamber pots should be provided for the dormitories; the present wooden utensils (used I am informed for all necessary purposes owing to deficiency of water closets) are objectionable and obsolete. I regret to observe that the ova of vermin which have increasingly been banished from most Poorhouses appear in considerable numbers in the heads of the girls. [Report of Malcolm M'Neill, Visiting Officer, dated 2.2.74, Minutes 4.3.74, in *ibid.*]

EDINBURGH'S CLEAN AND ORDERLY POORHOUSE, 1870-1

The following are extracts from Visiting Officer reports on Edinburgh's Poorhouse. The Parish agreed to his recommendations.

I observe no sign of inattention to cleanliness in this House, but there is much room for improvement in the order and tidiness of the dormitories with the exception of that for Boys which leaves nothing to be desired. I have urged the Governor to cause the bedding throughout the House to be so adjusted as to expose by day the lower sheet to air and view; examples of the expediency of this arrangement were abundant particularly in the Wards occupied by mothers and infants. The Board will learn with regret that women and children and even adult males still occupy double beds, this system in the latter class has now been entirely abandoned in Scotland, with one notorious exception, while its

occurrence is becoming rare in the two former. I observe that the absence of urinals leads to considerable irregularity in the water closets, the expediency of providing accommodation in the male airing yards seems hardly doubtful to which the means of drawing water for scrubbing might be added with advantage. The floors of the wards are rapidly becoming disfigured by rust from the beds. There are no wards for venereal cases, such cases have been admitted in several cases. [Report of Malcolm M'Neill, Visiting Officer, dated 7.10.70, Edinburgh PBM(PH) 17.10.70, in EDA]

The House appears to be clean and orderly, but from its extent it is obviously impossible for the Governor to bestow daily attention in minute details, it is therefore my duty again to urge the appointment of an active wardman or other male official. With the exception of the tradesman and a few others the male inmates are absolutely without indoor occupation. I may therefore point out to the Committee that even in some of the smaller Poorhouses, mat making and firewood cutting etc, are actively carried on, while in the City of Glasgow Poorhouse the employment of a wardman enables the officials to require the male inmates to clean their own apartments without any assistance whatever from the females. Decency would seem to require the separation of the bathing room into compartments by means of water proof curtains at least during its occupation by females. [Report by Malcolm M'Neill, dated 11.12.71, Minutes 20.12.71, in *ibid.*]

PUNISHING THE INMATES AT CAMBUSNETHAN POORHOUSE: THE GOVERNOR'S CENSURE, 1870-2

At the beginning of 1870 a number of Cambusnethan Poorhouse inmates complained to the Board of their illtreatment and the first extract indicates the Board's initial minute. The second extract is from the Board's final minute, issued some two years later, after further complaints.

The Board having considered the letter from Thomas Chalmers and others dated, 29th January, together with the Report by the Visiting Officer, dated 9th February, and the evidence taken by

him, are satisfied that some of the statements in said letter are untrue and others exaggerated, but they regret to find that the Governor has in several particulars and on frequent occasions acted in total disregard of the Rules and Regulations for the Management of Poorhouses, a strict adherence to which was his primary duty.

No corporal punishment of any description can be legally inflicted on any child, except in terms of Rules LXIII, LXIV and LXV, and without being recorded in the Report Book of Offences and Punishments in terms of Rule LXVI.

The punishments inflicted on the cripple William M'Iloy and the paralytic Thomas Beaton were not only without warrant in the Rules, but in themselves highly improper. The Rules do not authorize a cold bath as a punishment in any case, nor do they sanction the infliction of corporal punishment upon any adult. It cannot be permitted that the Governor should strike an inmate of any age with his hand.

The confinement of James Lindsay at night in the Porter's Lodge without a bed was an infraction of Rule LX.

No punishment of any nature can be held to have been legally inflicted unless it is recorded in the Report Book of Offences and Punishments.

The mode of making up the requisite quantity of soup by adding water without the corresponding quantity of other prescribed ingredients is an infraction of Rule LXVII.

The system of detaining or interfering with letters written by inmates is quite unjustifiable, except in the extreme case of its being suspected that the letters contain some of the property of the Combination or other inmates.

It appears that in all the above specified particulars the Governor has failed in or exceeded his duty, but the Board have no reason to think that his irregular proceedings have arisen either from unkind feelings towards the inmates or from a deliberate intention to disregard the Law. The Board, however, must point out to the Governor and House Committee that all departures from the Rules prescribed for the Management of Poorhouses are illegal, and that if the Governor again offends in any such manner, the Board will be unable, so long as he remains Governor, to hold

an offer of admission to the Cambusnethan Combination Poorhouse as an offer of adequate relief.

The Board have to intimate that, as Dr Forrest states that he certified Thomas Beaton to be insane, steps should immediately be taken to remove Beaton from the Poorhouse, and to report him to the General Board of Lunacy.

The Board have further to call the attention of the House Committee to the complaint of cold in the men's workroom, which appears to be well founded. [BS MB 17.2.70, in SRO HH 23/14]

The Board having considered the Reports of the Visiting Officer upon the complaints against the House Governor, together with the evidence taken in connection therewith, are of opinion that Mr Frew cannot be permitted to retain the office of Governor.

In February 1870 Mr Frew was found guilty of several serious infractions of the Rules and Regulations for the Management of Poorhouses, (chiefly in respect that he had improperly and illegally inflicted punishment upon inmates) and the Board then informed him that if he should again offend in any such manner, they would be unable, so long as he remained Governor, to hold an offer of admission to the Cambusnethan Combination Poorhouse as an offer of adequate relief.

Notwithstanding this censure and warning, it appears that Mr Frew, in direct contravention of Rule LIX, and with a lamentable want of good sense and humanity, punished two boys named Francis and John Bone, then under medical treatment, by unauthorised alteration of diet, and by confining them in the end of October in a room without a fire, and without shoes and stockings. The inmates of a Poorhouse are in a great measure defenceless and dependent upon the Governor for proper treatment in accordance with the Rules which were issued by this Board for their protection as well as for the discipline of the House. Children and sick persons are more especially in this position, and the Board do not think it would be safe any longer to entrust such persons to Mr Frew's management. Either by temper or by disposition he seems to be wholly unfitted for such a charge.

It further appears that Mr Frew uses gross and profane language to the inmates, and is insolent in his demeanour and speech to members of the House Committee. The Board need scarcely observe that such conduct is not only highly improper in itself, but is intolerable in a public officer.

The Board therefore feel it to be their duty to call upon Mr Frew to resign the Office of Governor within seven days from this date, his resignation to take effect from a day not later than 1st April next. [Minutes 7.2.72, in *ibid.* 23/15]

THE VISITING OFFICER AND SUFFERING FOR A MOTHER'S SIN:
ILLEGITIMACY AT HADDINGTON, 1873

The first extract is a Haddington Parochial Board minute after it had received a Visiting Officer report on its policy of outdoor relief to mothers with illegitimate children. The second is the consequent Board minute. Haddington agreed to build a poorhouse.

Judging from the manner in which the offer of the 'House' was received by mothers of illegitimate children belonging to other parishes, the Parochial Board cannot doubt that relief in that shape if tendered would be refused by most, if not all of the women referred to by the Inspector and that thus for themselves and for their children they would cease to be chargeable. But the Board cannot overlook the consideration that the children would be sufferers who are innocent of crime and whom it seems hard to doom to neglect and suffering for the mothers sin. In some of the cases the mothers are girls otherwise respectable and now in domestic service who with that little addition given by the Board are able to board out their children. Were the sum withdrawn it is impossible that the extra sum now given for the children could be continued and their mothers would be compelled probably to leave their service to keep their children depending on daily and precarious employment, a position of much greater peril than that which they now occupy. In other cases nothing is to be said for the mothers, but where a woman has 3 or 4 illegitimate children it is impossible that she can sustain them upon her own honest labour, and if they are to be fed, and clothed, and educated, her

earnings must be supplemented from some other source, either payments by the fathers of the children where these can be got or when they cannot by some amount of parochial relief. [Haddington PBM 7.4.73, in SRO CO7/7/4]

A Report by Mr M'Neill, Visiting Officer, dated 18th October 1872, on the administration of the Poor Laws in the Parish, with a letter from the Inspector, dated 7th April, enclosing copy minute of the Parochial Board was submitted. The Secretary was directed to instruct the Visiting Officer to visit the Parish again, and confer with the Chairman and Inspector. The Secretary was further directed to point out to the Parochial Board that the Visiting Officer reports that whereas in his District, which comprises all the Southern Counties, pauperism stood on the 1st January last to population in the ratio of 1 to 32.7, in the Parish of Haddington the ratio was 1 to 17.5, and further that on the same date in the Parish of Haddington the ratio of single women with their illegitimate children was to population as 1 in 197.7, against 1 in 322 in the county at large, and against 1 in 767 in the Southern District. [BS MB 1.5.73, in SRO HH 23/16]

TEST LABOUR IN POORHOUSES: THE VISITING OFFICER'S VIEW, 1879

The following is an extract from one of Malcolm M'Neill's half yearly reports to the Board. It emphasised his commitment to poorhouse work tests.

Test labour in poorhouses will probably assert its value in the end and hopeful experiments are in progress here and there which will afford interesting information in the future. I may repeat that it is of the highest importance to apply the principles of *tasks* wherever it is practicable, i.e. to insist on a definite amount of work from each individual before recognising a claim to 'Class C' or the working diet. Where large gangs are employed, or where the forms of labour are numerous and the workrooms far apart, it is impossible that the labour-master can otherwise exact a day's work from each person. I may also point out that the hours of labour should coincide as nearly as may be with those of the

working classes outside; the following incident illustrates my view: a special form of labour (the manufacture of fire-lighters) was organised in Glasgow poorhouse and, when a few days' trial had perfected the details, the Governor intimated to his gang of forty that in future a full day's work must be performed; ten men instantly gave notice of their intention to quit the house and removed themselves from the roll. The poorhouse of Linlithgow deserves the credit of being among the first to organise test-labour on an intelligent system; here there are three small sheds, each with a yard, where stonebreaking and bonecrushing are carried on as a task, while oakum-teasing and other light work, the former also being a *task*, have their own apartments: it is scarcely credible but I am nevertheless assured that upwards of three hundred tons of road metal is the tale of twelve months' labour in that department alone although the average number of inmates at work was only 5 or six. In the poorhouse and parish of Abbey also an example – perhaps the most striking in Scotland – may be found of an adequate test reasonably employed; in the poorhouse no male inmate is idle if he be fit for any class of labour; he either scrubs his own floor, is engaged in the fire-lighter factory, makes mats, teases a *task* of oakum, or breaks a fixed quantity of road metal; he is not allowed to smoke during the working hours, and he is limited to the prescribed diet. The result is very apparent and must be satisfactory to the Parochial Board for, while pauperism of the adjacent parish (Paisley) has steadily increased during the past winter notwithstanding a free use of indoor relief, that of Abbey has declined solely, as I learn, from the fact that the poorhouse of the latter parish supplies a real, not a nominal test. The truth is that, while common sense demands that the condition of the pauper should never rise above the standard which can be attained by the lowest class of labourer, our House Committees have too often insisted on applying to all classes of their inmates a system which, though admissible in the case of sick persons or children, raises the poorhouse in times of distress into a desirable refuge for the dissolute and idle. [Report of Malcolm M'Neill, Visiting Officer, for half-year ending 30.6.79, dated 1.7.79, in *Annual Report of the Board of Supervision, 1878-9*. C.2416. (P.P. Vol. XXX 1878-9) App.(A), No.4, p.11]

THE VISITING OFFICER ON CUNNINGHAME'S CLEAN AND ORDERLY
POORHOUSE, 1880

Early in 1880 the Board approved for the first time rules for the employment of trained nurses in poorhouses and Cunningham was one of the first to consider their employment. The first extract here is that year's Visiting Officer's report for its Poorhouse and the second is a subsequent Board minute.

1. The House continues clean and orderly but I observed with surprise that the Committee still maintain the custom of providing but one sheet for each bed.
2. For the safety of the officials it is important that some formal record should be preserved for the punishments inflicted in School.
3. I must repeat that entertainments given to the inmates should be limited to those of good character and to the children.
4. The labour performed is very satisfactory and requires only the introduction of 'tasks' to complete the system.

Infirmary

5. (a) The nursery staff should be completed in terms of the Board's circular dated 29th April 1880; at present the arrangements involving the employment of paupers in attending the sick are unsatisfactory.
- (b) A handrail should be fitted to each staircase; unless this is done an accident will probably occur.
- (c) A supply of bedchests should be obtained, if these are not already provided.
- (d) Door scrapers should be fitted.

[Report of Malcolm M'Neill, dated 20.7.80, Cunningham CPHM 7.8.80, in ADA CO3/65/13]

The Board approve of the Regulations for the Infirmery framed by the House Governor and transmitted in Mr Highet's letter of 11th August and I have to intimate that these regulations together with the rules issued by the Board on the 29th April last now come into operation. The Board however do not consider the proposed arrangement for assistance to the Lady superintendent as at all satisfactory, and they call upon the House Committee to

appoint at least two trained assistant nurses in addition to the Lady superintendent. There should of course be pupil untrained assistants also, but these latter without the former would be of little service, and alone they might be positive drawbacks. The Infirmary is at present licensed to receive 84 patients, and if trained assistants are not appointed as here indicated, the Board will be compelled to limit the number of inmates to be placed in the Infirmary to 20. [BS MB 8.9.80, in SRO HH 23/18]

THE VISITING OFFICER AND THE ABSURDITY OF PAUPER AND UNTRAINED NURSES, 1882-5

The two extracts here are from Malcolm M'Neill's half-yearly reports to the Board, the first in 1882 and the second in 1885. In the intervening period the Board had agreed that expenditure on trained nurses could be reclaimed from the Poor Law Medical Relief Grant.

It is, as I think, a disgrace to the administration in this country that in 35 of our 63 poorhouses the sick are still nursed exclusively by paupers while in one instance only is there any pretence of maintaining the proportion of one trained nurse to *twenty* cases which you have advised as a minimum. Even this does not convey an adequate conception of our condition here for not only has our insignificant result been attained with difficulty but we are in hourly danger of relapsing to the former position; it is notoriously more easy to demolish than to construct and to the task of demolition a narrow-minded minority invariably apply themselves when any improvement has been effected in opposition to their wishes. They bring forward proposals for retrenchment, they discourage the officials by depreciatory remarks or personal rudeness, they are persistent, malignant, and united. I see no reasonable prospect of progress until a licensing power is placed in the hands of some Central Authority. The powers which I suggest could hardly be withheld if such facts were in the knowledge of the legislature as those of which you are aware, – that pauper nurses intoxicate themselves with the stimulants issued to their patients, – that prostitutes find access to the sick wards as nurses, – or that children are infested with

vermin; these facts have little influence on some House Committees but I much mistake the temper of the House of Commons if that body should be found equally indifferent. [Report of Malcolm M'Neill, Visiting Officer, for half-year ending 39.6.82, dated 1.7.82, in *Annual Report of the Board of Supervision, 1881-2*. C.3321. (P.P. Vol. XXXI 1882) App.(A), No.4, p.4]

The issue of the Board's circular, dated the 31st March, on the subject of sick-nursing in poorhouses has produced the greatest satisfaction among all who take intelligent interest in the administration of the Poor Law and I may be allowed to hope that no nurse will be admitted on the Register, on any pretence whatever, unless she has undergone the prescribed training, for I am strongly impressed with the fear lest, if any exceptions are made, private and other influences will be used to procure the registration of unfit persons and thus to degrade the status of the whole body of poorhouse sick-nurses. Some idea may be formed of the sort of nursing which may be expected, unless great precautions are used, from the following incidents: on one of the most bitter days during last winter I inspected a poorhouse where a paid nurse is maintained, and she accompanied me on my visit to the wards. In a turn-out ward, a long upper apartment with four windows, I found an elderly woman sitting upright in bed eating her dinner and inquired why she was there. The reply was that she was suffering from severe pains in her back, which I conjectured to be lumbago, and I pointed out to the nurse that the lower sash immediately opposite the pauper was raised 6 inches, that the floor was damp from recent washing and there was no fire; discipline and ventilation are excellent in their proper place, but one could not help wishing that, if the patient were not removed to the sick-ward, her bed might at least have been near a good fire, that the washing of the floor could have been deferred till next day, and that ventilation had been obtained otherwise than by the admission of the keen outer air within a few feet of her and at the level of her back. I found, however, that the nurse did not respond to my views on the subject.

Another absurd but instructive experience is as follows: a nurse was highly commended to me by the Medical Officer, but it

appeared (1) that there were no thermometers in the wards, (2) that the nurse had never applied for them, (3) that she did not understand the meaning of the word 'thermometer', (4) or 'temperature', (5) that she had no idea of the temperature which should be maintained, and (6) that a portion of the food was stored all day within each ward. Such things are inconceivable under trained management, but if they exist under that untrained official superintendence which has been so contemptuously condemned by the highest authority in this country [Miss Nightingale], how much more cruel folly may not exist where paupers are the sole nurses? [Report by Malcolm M'Neill, Visiting Officer, for half-year ending 30.6.85, dated 1.7.85, in *Annual Report of the Board of Supervision, 1884-5*. C.4559. (P.P. Vol. XXXIV 1884-5) App.(A), No.3, pp.15-16]

BARONY'S CLEAN AND ORDERLY POORHOUSE: THE VISITING OFFICER'S REPORT, 1885

The following extract is from Malcolm M'Neill's 1885 Report on Barony's Poorhouse. The Class C diet, of meal and milk for breakfast, bread and meat broth for dinner and meal and milk for supper was for working adults. The infirm received rice soup instead of meat broth and tea instead of milk at supper.

1. The House appeared to me clean and orderly throughout.
2. My attention was attracted by the large amount of bread, etc, stored in the Infirm Wards, and on enquiry, I learned that the issue is made but once daily instead of with each separate meal. The Committee should consider this subject and in my opinion should direct the issue of each ration complete at the meal hour, and the removal after a reasonable interval of the unconsumed food.
3. The women in the washhouse still receive tea and bread in addition to class C diet – an unnecessary, and in some respects, mischievous indulgence.
4. The diet of the children is wisely varied, and their appearance is satisfactory, but I must still urge the substitution of sweet milk for butter milk in the whole of this class.
5. When the furnishing of the test wards is undertaken I should propose to the Committee the abolition of the double bed to

contain mother and child, and the introduction of a small crib for each infant, placed beside, or at the foot of, the mother's bed.

[Report of Malcolm M'Neill, Visiting Officer, dated 1.9.85, Barony PBM 30.10.85, in SRA D-HEW 2/7/14]

A QUESTION OF A WHOLESOME INSTITUTION: DRS LITTLEJOHN AND RUSSELL'S REPORT ON GLASGOW'S POORHOUSE, 1887

For many years the Board had expressed some concern over the sanitary state of Glasgow's Poorhouse which, with 1,500 beds, was the largest in Britain. In 1882 separate reports by its Secretary and Medical Officer had condemned the building and urged the Parochial Board to seek alternative accommodation. This failed to move Glasgow and the issue resurfaced in 1887 when, after press reports on overcrowding, the Board appointed Dr Littlejohn to inquire, with Dr Russell, the Medical Officer of Glasgow City Council. This extract is taken from their report. The Poorhouse was eventually closed in 1904.

. . . no one who has known the north quarter of Glasgow [during the last twenty-five years] can fail to have observed how rapidly it has . . . degenerated as a residential district. Villas and other self-contained houses, frequently with gardens, have disappeared. Trees will not grow, flowers will not thrive – even grass can be maintained only as an annual. These changes are only such evidences as the physical conditions would lead us to expect of the deteriorated salubrity of the district, and the consequent desire of everybody who can to escape from it. We beg to report that in our opinion the site of the City Poorhouse is not now and has long ceased to be a wholesome one for an institution, the large majority of whose inmates are sick or infirm, aged persons and young children.

A glance at the block plan alone discovers great defects, e.g. (1) The position of the male hospital on the building line of a public street; (2) the situation of the female hospital within what almost amounts to a 'hollow square'; (3) the proximity of the eastern Magdalene block to the gable of back land of dwelling-houses and the boundary wall of back court; (4) the eccentric position of the kitchen and general stores with reference to the population to be

served; of the mortuary with reference to the hospital; and the dispensary with reference to the sick.

When we take into consideration the manner in which the various blocks are occupied, it becomes still more apparent how insufficient and inconvenient the present premises are, and to what straits the Managers have been put to adapt their necessities to the somewhat erratic buildings, and to maintain some appearance of order and classification among the inmates. In the north building, we find the infirm but not bedridden in the same ward as 'wet cases', and both in the same building, with common stairs and airing courts, such as they are, as a detachment of sick and ordinary paupers, who are unclassified. On the female side the confusion is increased by the presence of the nursery for women and infants, who again share one lateral half of the ward, the other half of which is the female Itch ward, separated only by a three-quarters partition, with free aerial communication! The dormitories for children of both sexes from 2 to 15, the nurseries for the younger, and playrooms and school for the older, are all in one block, in flats united by a common, steep, confined stair in the extreme south-east corner, contiguous to the hospital blocks. These so-called hospital blocks, again, do not contain all the sick. There are six large hospital wards in the north buildings. While the female itch ward is, as we have seen, objectionably placed in the north building, the male is equally ill-situated en suite with the male probationary below the male hospital. The female venereal ward is not sufficiently isolated from the ordinary sick wards.

The Water Closet accommodation in every department is defective, both as to character and extent. It is no exaggeration to say that we did not see a single appliance of this nature which was not objectionable in position, and generally also in lighting and ventilation. In the north building water-closets have been recently provided by simply enclosing with wooden partitions a portion of the air-space of each dormitory and ward. In no case can this prevent free aerial intercommunication between the water-closet and the sleeping apartment. In No 399 female side, the partition bisects a window, and there is the freest communication with the ward. It is the first principle in sanitary construction to place such offices beyond the main walls, so as to

ensure independent ventilation. The only attempt at this is imperfectly made in the sunk flats of the north building. In the hospital blocks the water-closets are all objectionable in situation – on stair landings – and otherwise either in violation of sanitary principles or of the convenience which sick persons require, so as to avoid exposure to cold and publicity in resorting thither. The privies provided in the back courts of the north building are very rude erections. On the female side they are especially open to observation, and in neither is provision made for the individual privacy of persons using them.

The provision made for bathing and personal ablutions is everywhere defective. At our visit on 22nd April the dormitories Nos 345 and 345a were full of watery vapour and smelt like a washing-house, the explanation being that between 50 and 60 persons had been getting their weekly bath in two baths placed in apartments partitioned off as described above – a process which occupied from ten to one o'clock. Even a worse state of things exists on male side, where 290 persons are bathed in two baths attached to dormitory No 356 – a process which extends from 7 a.m. to 7 p.m.! There ought to be a bathhouse for the ordinary inmates entirely cut off from the main building. For the daily ablutions of both sexes of this class there is no provision under shelter. In summer and winter they must go to taps and basins in the open air in the back yard. The same deficiencies prevail more or less in the other departments. There are no baths in the upper two floors of the male hospital, nor in the middle floor of the female, which includes the lying-in ward.

In the course of our inspection, especially of the north building, we were constantly shocked at the use of the water-closets as sculleries and pantries. In the Magdalene block the water-closets, which have baths attached, are provided with tables on which the food is divided out, and are used as sculleries. In the male hospital and both Probationaries, the absence of special provision for storing food and washing dishes is general.

The want of provision for open air exercise is very conspicuous. The yards behind the north building are quite unfit for such purpose, being a strip from 63 to 78 feet broad, cumbered with large day-rooms and conveniences, lying to the north and in

the shadow of buildings from 37 to 48 feet high. The sick, whose convalescence is so much promoted by open air exercise, have no space allotted to them. The ground about the hospital blocks is so closely built that any back court in the city would be as suitable for sitting or walking in.

The day-room accommodation is bad and defective. There are four day or work-rooms placed behind the north building, which are miserable apartments, badly lighted and ventilated, from having such a large proportion of dead wall, and being so placed that one gable comes within 10 feet, another within 15 feet of the back of the north building. The infirm are kept in the same room day and night, simply for want of sitting rooms, and this in many cases implies living in the noxious atmosphere surrounding paralytics, because these have not separate accommodation.

The Female Hospital is a three storey block of wards on the 'back to back' principle, one tier looking north, and the other south, so that through ventilation is impossible in some and impaired in others. It is in the back court formed by the male hospital on the south, the board-room and office on the west, the Magdalene block on the east, while the ground on the north rises so as to complete stagnation of the surrounding air. This block is 40 feet high to the eaves, and the male hospital rises fully 38 feet above ground level. The main buildings of the two blocks are from 33 to 35 feet apart, and the projecting back jambs only 25 feet apart. It is questionable whether the building regulations of any city would permit of two tenements of ordinary dwelling-houses being separated even by an open street of such strait dimensions. It is certain that in no modern hospital would the pavilion blocks be nearer in any part than their full height. Internally, as we have said, the wards in this female hospital are 'back to back', with a central staircase and lobby. In all the walls having a northern aspect a style of window is used which we have never found excepting in a prison. The daylight aperture measures 3 feet 10 inches by 3 feet 8 inches, and the sill is 6 feet 6 inches above floor level.

The Male Hospital Block is placed on the building line of Parliamentary Road, along which all the heavy traffic passes to the public works and the North British Goods Station at the

Townhead. The constant racket from the granite paved street must be injurious to the sick, and also interfere seriously with the use of the stethoscope by the medical attendants. The windows facing the street can be opened only at the cost of great annoyance to the patients. [Report by Dr H.D. Littlejohn and Dr J.B. Russell on Glasgow City Poorhouse, dated, 20.9.87, in *Glasgow Mitchell Library* G/362/5]

THE INJURIOUS EFFECT OF HAIR TEASING: JAMES CORNWALL'S COMPLAINT, ST CUTHBERT'S, 1887

In September 1887 an inmate of St Cuthbert's Poorhouse complained to the Board about the effects of hair teasing and the Board referred the matter to the Poorhouse Medical Officer. The first extract here is his report and the second the subsequent Board minute, which St Cuthbert's agreed to accept.

That the teasing of hair might be deleterious to paupers suffering from asthmatic or phthysical conditions, owing to the dust or small particles being inhaled, but such paupers were not allowed this employment. The only real risk is from infection of fevers, as undoubtedly mattresses must form a great medium for the conveyance of germs. In my opinion the only proper way to prevent infection would be to have a proper disinfecting chamber, the one used for killing the vermin on the paupers' clothes being inefficient. [Report by the Medical Officer of St Cuthbert's Poorhouse St Cuthbert's PBM 10.10.87, in EDA]

The letter of James Cornwall, dated 27th September as to the injurious effect of hair teasing on the health of the inmates, which was before the Board on the 28th September was again submitted.

The Board rely on the House Committee and Governor strictly following all the instructions of the Medical Officer in matters affecting or likely to affect the health of the inmates. The Medical Officer is the proper judge whether an inmate should be set to work at hair teasing.

The House Committee should at once provide a proper disinfecting chamber for the disinfection of hair brought to be teased. [BS MB 13.10.87, in SRO HH 23/21]

CUNNINGHAME POORHOUSE AND THE BURYING OF UNCLAIMED PAUPER BODIES, 1892

The first extract here is the report by R.B. Barclay, the General Superintendent in charge of poorhouses, on Cunninghame's Poorhouse, made soon after his appointment in 1892. The second is the Board's consequent minute and the third Cunninghame's response.

1. I found the House in excellent order.
2. The bath in the children's ward requires renewal.
3. The floor of the dining hall is much worn in several places.
4. I accidentally discovered that paupers dying in this House, whose bodies are not claimed by friends, are buried in an enclosed part of the garden. I am surprised that no complaint has arisen with regard to this practice and I am afraid that a great scandal may at any time arise. Protestants and Roman Catholics are buried indiscriminately. The ground has been twice gone over during the present Governor's term of office. If any descendant of a deceased pauper, who may have prospered in the world, desires to erect a head stone to his parents' memory it will probably be impossible to indicate the place of sepulture. [Report by R.B. Barclay, dated 25.11.92, Cunninghame CPHM 8.12.92, in ADA CO3/65/13]

A Report by Mr Barclay on the Management of the Poorhouse, especially with reference to the practice of burying unclaimed bodies in a position of the garden, was submitted. The Secretary was directed to call upon the House Committee for a report as to the facts in regard to the practice referred to and to furnish a medical certificate as to whether or not overcrowding exists. [BS MB 1.12.92, in SRO HH 23/22]

The Committee after hearing Mr Barclay's Report visited and

examined the Burying Ground and found (1) that the same had been in existence since the Poorhouse was built and had been so walled off from the other grounds of the Institution and that it had at no time ever formed part of the garden. (2) That said Burying Ground extends 508 square yards and is of a fine dry sandy soil. (3) That as informed by the Governor bodies buried here do not exist for a longer period than seven years from the date of their interment, and that hitherto no protest or objection had ever been taken to the system of burial here, by relatives of the deceased or others and that the same rule and practice prevail here as is adopted and recognised in every cemetery where the poor of the Burgh or Parish are interred.

Should it be found necessary the Committee further find that the Burying Ground can be extended to double its present size at an expenditure of about £80. [Cunninghame CPHM 8.12.92., in *loc. cit.*]

TUBERCULOUS DISEASE IN POORHOUSES: THE GENERAL SUPERINTENDENT'S SURPRISE, 1899

During 1898 Alex Stuart, one of the General Superintendents, drew the attention of the Board's Medical Member to the absence of any provision in poorhouses for the isolation of tuberculosis victims. R.B. Barclay was then asked to make an inquiry and the following is an extract from his report.

I am surprised at the small number of cases reported to have been treated in poorhouses in a year. I expected the number would have been much larger considering the feeble and suffering class of the population from which the inmates are mostly drawn, and also from the fact that these cases are not retained in general hospitals and infirmaries. The Board's returns show that about 25,000 cases are annually treated in our poorhouses hospitals and sick wards. If the returns were confined to individuals, these figures would be much less, as many persons appear *frequently* in the records not only of the poorhouse, but of many poorhouses

throughout the country. The returns that I have now received show the treatment of -

(a) Phthisis	1239
(b) Tuberculosis diseases which are discharging - e.g., sinuses from disease of bone, lupus, etc	<u>331</u>
Total	1570

which is only about one-half per cent of the cases treated.

I am pleased to observe that the issue of this return has had the effect of calling the particular attention of Medical Officers and other officials to the use of precautionary measures, and I was not prepared to learn that so much care had been in use. I quote from one of the first returns on the list (Aberdeen West), and the practice therein detailed seems almost universal:

'The feeding utensils are kept separate from those of the other inmates, and disinfected with carbolic lotion when washed. Spittons are emptied, cleaned, and disinfected twice daily, according to the quantity of discharge. Dressings when removed are immediately burned. Washings are disposed of through a flush closet. When patients are being dressed in the wards their beds are screened off.'

In some cases I am suspicious that these measures may have been adopted on the suggestiveness of the questions asked in my return. When the precautions have seemed to me defective, I have pointed them out to the Governor and I have received numerous promises that my suggestions will be adopted in future. I shall keep this subject in view when visiting poorhouses.

In five poorhouses only are patients suffering from phthisis reported to be treated in separate wards, and in wards reserved exclusively for such cases. These are Glasgow City Poorhouse, Leith, Jedburgh, Latheron and Lewis.

In the case of the City Poorhouse of Glasgow, in which nearly 500 cases of phthisis are treated in a year, Dr Johnston, the Chief Medical Officer, writes:

'Two wards are set apart for phthisis only (one male and one female and additional cases have to find accommodation in other wards. Our hospital space is so inadequate, and the air space at our disposal so limited, that I am of opinion any further segregation of

these cases would prove harmful to the patients themselves and to the nurses.'

Leith had only nine cases of phthisis admitted last year, and nearly all were incurable when sent in.

Jedburgh, Latheron and Lewis are small empty houses, in which there is no difficulty in appropriating an unoccupied room for isolation. [Report of R.B. Barclay, General Superintendent, on Tuberculous Disease in Poorhouses, dated 31.3.99, in *Annual Report of the Local Government Board, 1899*. Cd.182. (P.P. Vol. XXXVI 1900) App.(A), No.20 pp.33-34].

TUBERCULOSIS: THE OPEN AIR TREATMENT AT CRAIGLOCKHART POORHOUSE, EDINBURGH, 1903

After his annual inspection of Edinburgh in 1901, Alex Stuart reported on the problems of caring for pauper tuberculosis victims in overcrowded homes. Two years later the parish asked the Board to approve plans for open air treatment at Craiglockhart Poorhouse. The first extract here is from the Board's reply and the second from the subsequent statement of Edinburgh's Medical Officer.

The Board anticipate that expenditure incurred in applying Sanatorium treatment to paupers will ultimately lead to economy. The ordinary career of a consumptive in the ranks of pauperism is to pass into and out of the Poorhouse, a superficial recovery probably following each period of residence, but on each occasion from a lower level, so that after time entire disablement, and finally death ensue. The cost to the Parish of such a case is great and unsatisfactory. The disease is meanwhile spread, dependents are thrown onto the rates, and there is initiated an ever-widening circle of expenditure and social loss.

The object of Sanatorium treatment is so to strengthen the vitality of the tissues as to stop the inroads of the bacillus of tubercle, and, ultimately to destroy it. This is sought to be accomplished -

- (1) By placing the patient in physical circumstances which promote digestion and assimilation, viz: as much as possible in the open air.
- (2) By the liberal supply of wholesome and appetising food.

(3) By a general regimen (exercise, rest, etc) adjusted to the conditions of each patient.

Special structural arrangements, a special dietary, and careful supervision are therefore necessary.

The Board note with satisfaction that the trial of the open-air treatment proposed to be made at Craiglockhart is being instituted on the suggestion of Dr Carmichael, Consulting Physician. They have no doubt that the Parish Council will give their fullest consideration, and effect to his opinions and advice, both in the structural arrangements necessary to be made and the use of food for therapeutic purposes. On the other hand, the Board have no doubt that utility for the purpose in view will guide the Consulting Physician in advising as to the structural accommodation, and that, in the important matter of food, he will select foodstuffs with a view to the greatest economy consistent with nutritive value. [Letter of G. Falconar-Stewart, 9.1.03, Edinburgh PCM 2.2.03, in *Edinburgh Public Library* 9YHV 251]

. . . I have to state that I consider the erection at present being put up for the reception of phthisis patients well suited for the purpose of giving such patients the benefit of the open-air system of treatment so far as spending their whole time in the open is concerned. It is proposed to have eight or ten beds placed in the erection, and, after picking out apparently suitable patients, and explaining to them the treatment intended, and that, in order to benefit by it, they will require to stay as long as thought desirable, we trust to give the system a fair trial, by keeping these patients constantly, day and night in the open. Some may be kept wholly in bed, others permitted to be up throughout the day, and advised to take limited exercise.

So far as dietary is concerned, I have taken the opinion of several specially concerned in this line of treatment, and have finally fixed upon the following as the recognised ordinary diet:

Breakfast – One pint of Sweet Milk; Porridge, as much as patient will take; Bread, as much as patient will take; Butter, two ounces; one or two Eggs, occasionally Bacon.

Dinner – Half-pound of Fresh Meat, Steak-Mince, Mutton,

Beef, Fish; Potatoes and other Vegetables; Custard or Suet Pudding; one pint of Sweet Milk.

Supper – One pint of Sweet Milk; Porridge, ad libitum; Bread, ad libitum; Butter, two ounces; Egg.

Night – Half-pint of Sweet Milk.

Of course, as the Local Government Board recognises, each patient will require to be watched and weighed: if not gaining, then it will require to be considered if a more liberal diet would help, or if the disease is causing the loss, and, if the former, a more liberal diet would be tried; hence a rigid dietary is impracticable. [Letter of Dr E. Carmichael 30.1.03, in *ibid.*]

KYLE POORHOUSE: THE GENERAL SUPERINTENDENT ON ITS SERIOUS CONGESTION, 1903

The following is an extract from R.B. Barclay's 1903 report on Kyle Combination Poorhouse. General renovation and extension, as advised, did not begin until 1906.

I visited the Poorhouse today, and I find that the number of male inmates is still increasing. I called attention to this in my Report of 9th August last, but the numbers today exceed those recorded in any previous year. I may repeat, for easy reference, the highest records I formerly noted: 19th February, 1900 – 93 Adult Males. 14th January, 1901 – 86. 14th February, 1902 – 101. And today – 104.

I am hopeful that these numbers might be reduced by the introduction of test labour. It is undeniable that some men are quite willing to accept the accommodation of the Poorhouse, because they may be temporarily unable, through debility, to follow the occupation to which they are accustomed, without exerting themselves to obtain other and lighter employment.

I wish, however, to call the serious attention of the Committee to the congestion in the Sick Wards, which has caused an overflow of patients into the ordinary and infirm wards, where they have not the air-space which their condition of disease demands, nor the nursing which, I expect, the Committee consider they have provided for them. I understand the medical

officers will bear me out in saying that a case of pneumonia cannot be treated successfully in the sick wards as they are now occupied. I have made out and append a list of all bed-ridden cases at the time of my visit.

I may preface it with the information that one nurse is not expected to attend more than 20 patients by day – that the minimum cubic space for an ordinary sick ward is 800 cubic feet for each patient, and for a ward where phthisis or other tuberculosis disease is treated, not less than 1000 (and preferably 1500) cubic feet each. It will be seen that the trained nurse in this Poorhouse has to attend 21 men and 16 women, bedfast by day, suffering from serious acute diseases, such as pneumonia, pleurisy, phthisis, cancer, etc, and chronic cases of paralysis and senile decay, the latter often wet cases, polluting the atmosphere for cases where purity of atmosphere is essential for proper treatment. The Male Sick Ward, which is fully occupied, contains a phthisis case, a pneumonia, and wet cases, and has only 710 cubic feet for each inmate, and the small ward, No 44, with 3 phthisis cases and one case with ulcerated legs, has only 534 cubic feet.

The present congestion in the hospital has grown gradually, and probably has been unobserved by the Committee. I am sure it is only necessary to call attention to it to have it remedied, and proper accommodation for the sick provided.

MALE SICK WARD – 19 beds, 710 cubic feet each

Occupants

H,	76	Senile Debility;	W,	43	Pneumonia.
M,	57	Paralysis;	C,	64	Paralysis;
C,	84	Senile Debility;	H,	74	Heart Affection;
P,	80	Chronic Heart	M,	60	Bad Eyesight;
		Disease;	A,	52	Cancer of Sto-
L,	57	Chronic Heart			mach;
		Disease;	R,	78	Paralysis;
J,	60	Paralysis;	L,	30	Spinal affection;
T,	60	Heart Disease and	L,		Paralysis
		Dropsy;	H,	75	Paralysis (wet
W,	71	Heart Disease;			case);
C,	85	Senile Decay;	W,	68	Phthisis;

SMALL SICK WARD - No.44, 6 beds, 534 cubic feet each

C, 53 Ulcerated Legs; N, 72 Phthisis;

Two other Phthisis cases not bedfast

Two other men (ordinary)

The above 25 are under charge of trained sick nurse.

ORDINARY WARD - No.52, 17 beds, 443 cubic feet each

B, 66 Bronchitis and M, 50 Phthisis.

Heart;

ORDINARY WARD - No.49, 8 beds, 480 cubic feet each

M, 72 Senile Decay; S, 70 Blind and Senile

M, 50 Skin Disease. Decay;

ORDINARY WARD - No.55, 7 beds, 466 cubic feet each

H, 61 Bronchitis; K, 66 Hemiplegia.

The above seven are under charge of Matron and inmate Warders.

FEMALE SICK WARD - 19 beds, 716 cubic feet each

C, 73 Heart and Senile W(?), 65 Paralysis (wet
Decay; case);

S, 70 Hemiplegia; P, Warder;

M, 35 Paraplegia; M(?), 60 Senile Decay;

J, 55 Rheumatic Arth- M, 79 Senile Decay (wet
ritis; case);

D, 70 Dying; D, 83 Senile Decay (wet

S, 84 Senile Decay (wet case);

M, 60 Mental;

C, 66 Debility; M, 51 Pleurisy.

SMALL WARD - No.69, 8 beds, 485 cubic feet each

H, 64 Bronchitis; W, 75 Debility.

Other 6 in Ward not bedfast.

The above 16 are under charge of trained sick nurse.

ORDINARY WARD - No.22, 12 beds, 438 cubic feet each

C, 76 Senile Decay; M, 70 Debility.

ORDINARY WARD - No.72, 17 beds, 442 cubic feet each

R, 50 Specific (wet, etc,

case)

The above 3 are under charge of Matron and Inmate Warders.

[Report by R.B. Barclay on Kyle Poorhouse, dated 10.2.03, Kyle CPHM, 23.2.03, in ADA CO3/65/2/1/4]

BRACING THE HILL AIR: THE GENERAL SUPERINTENDENT ON BOARDING OUT TUBERCULOSIS PATIENTS, MAYBOLE, 1906

At the end of May 1906 a meeting of Maybole Parish Council instructed its Inspector and Medical Officer to seek homes in the country for two men suffering from tuberculosis. Immediately the Board sent R.B. Barclay to conduct a special inquiry and the following extract is from his report.

On the 25th July last, along with the medical officer and inspector of poor, I made a most interesting visit to two male phthisis cases who were boarded out at a place called Shalloch-on-Minnoch, situated on the watershed between Ayrshire and Kircudbrightshire, 1,250 feet above sea-level. The district is moorland and very sparsely populated; indeed, from any eminence, not more than eight or ten cottages can be seen within view. At the time of my visit, the men were occupying one room in a shepherd's cottage, at a cost for board and lodging of 10s. per week each. The cottage was situated in what, for this region, might be called a sheltered hollow between two streams, well stocked with trout. There was no family. The shepherd had a cow, pony and fowls, and some arable land. The men had as much wholesome food as they could possibly consume, such as new milk, butter, cheese, scones, oatcakes, fowls, ham, eggs, rabbits and burn-trout. After a short residence here the men were able to make extensive fishing excursions, and carried their food with them. The men had therefore an object in taking exercise – one of them caught five dozen trout in a day – and in the most bracing hill air. One day, to reach a loch, they crossed the shoulder of a hill 2,500 feet high. Another advantage was that they could have their meals when and where they pleased, and when they had an appetite and relish for them.

The following details of the case, and the progress made by patients, are of interest:

AA was 33 years of age when he applied for relief on 15th November 1905. He had a wife and four children. He had been working in a boot factory till the end of October, and earning 27s. a week. At the time of the application he was confined to bed, and was suffering from phthisis in an acute form; a constant and hacking cough, with frequent haemoptysis, night sweats, sore

throat, and a great thirst. On 31st May 1906 he was removed from his bed and driven with great care to Shalloch-on-Minnoch. On 2nd July he walked and 'biked' to Maybole, 20 miles, and returned next day. At our visit Dr Girvan examined this man carefully, and found the disease arrested. All the unfavourable symptoms had disappeared. He remained at Shalloch till 3rd August, and on 2nd November 1906 he ceased to receive relief. He is now employed as a post-runner and insurance canvasser, and has not been an hour off duty the late stormy weather.

WM'G was 35 years of age when he applied for relief on 14th December 1905. He was a widower with six children. His wife died of consumption on 16th November 1905, and his eldest daughter, at 17 years of age, of the same disease, on 13th February 1906. At the time of his application he was working intermittently in a boot factory, and earning about 5s. 6d. a week. He was suffering from phthisis in an acute form. In his case there was loss of flesh and weight, and great debility, severe cough, high temperature, diarrhoea, vomiting and palpitation. He was removed to Shalloch, with the other man, on 31st May, and quickly improved. All the unfavourable symptoms rapidly disappeared, and at our visit his weight had greatly increased, and he looked as healthy a man as one could wish to see. He remained at Shalloch till 3rd August, and ceased to receive relief on 5th October. After a satisfactory trial he has now been placed on the permanent staff of the Post Office as a post-runner, and supplied with a uniform. He has improved in weight, and has successfully stood the test of the present most inclement weather. [Report by R.B. Barclay on the Treatment of Pauper Consumptives, dated 31.12.06, in evidence, dated 27.5.07, to *Royal Commission on the Poor Laws, Scottish Evidence*. Cd.4978. (P.P. Vol. XLVI 1910) p.145]

HAMILTON'S POORHOUSE: FOR THE MOST PART 'DONE': THE MEDICAL INSPECTOR'S REPORT, 1913

During 1910 Dr Dewar, one of the Board's Medical Inspectors, accompanied by the Architectural Inspector visited and reported on Hamilton's Poorhouse. They made a number of recommendations

including the building of a new and separate hospital. Three years later, after Hamilton had delayed any implementation, Dr Dewar was again sent. The following is an extract from his report. Hamilton agreed to renovate and build a separate hospital.

The Poorhouse was erected in 1864 and licensed for occupation in 1867. It is thus by no means among the oldest of the Scottish Poorhouses of medium age. On the other hand after forty six years of continuous use it is not surprising that it should be found to require a somewhat radical renovation.

The Poorhouse possesses sanctioned accommodation for 220 inmates. At my visit on November 17th, I found 196 persons in the house.

Generally speaking, the rooms or wards are too small, too much divided. By such an ill and antiquated arrangement of premises, administration is inevitably hampered. In dormitories, closets, and throughout the house generally, the walls require to be repainted. Wallpaper, where it exists, requires renewal. The floors are of plain boarding and are for the most part considerably the worse for wear. The floors of corridors are worst: in a passage leading to the back yard there is a large hole. Skirting boards are loose in parts. On some of the floors (such as the attic dormitory) linoleum had been placed, but its provision is exceptional. In quite a considerable number of places cracks are visible in walls of rooms, some of these are a quarter to half an inch across. In my opinion they are quite definitely ascribable to subsidence.

I learned that rats were numerous and troublesome in the Poorhouse, most notably over the Nursery and at the 'Gate'. The fact that buildings in general and plumbing work in particular are old doubtless gives the rats an advantage.

In some of the dormitories on the ground floor, the beds seem rather too close. Here infirm persons sleep. Those ground floor dormitories whose windows open under the verandah have their light supply undesirably diminished as a consequence.

The men's day-room, reached by crossing the courtyard, is meagrely furnished with benches, and is apt to be ill-ventilated. This is chiefly because it is crowded. The sewing room seemed dingy.

The heating arrangements in the Poorhouse have been unsatisfactory for several years. All seem agreed as to this; but the House Committee have been unwilling to introduce new arrangements until they saw how far the whole institution required re-arrangement and re-organisation.

The heat diffused from the hot pipes has not proved sufficient and fires have had to be kindled in the grates.

Artificial lighting is by gas. Within the last few years it has been improved by the introduction of incandescent mantles but the attention they require was that of the painter not that of the domestic servant. I formed the impression that the standard of general domestic cleanliness was maintained as high as the somewhat depressing condition would admit. At my visit in October 1910 (on a day particularly cold for the season) I observed an excessive number of flies in certain rooms. They were probably hatched in the pigsty.

With few exceptions the closets, baths, lavatory and sanitary fittings generally are out of date. There are a number of good porcelain baths of modern type but they are enclosed in woodwork in the old fashion. On the first floor is an old, defective fixed in bath. Here pails have to be filled since there is no other tap available except outside. All the closets within the house are of old type. Near the nurses sitting-room is an inmates' water closet of particularly defective type. The Governor informed me that it was difficult to keep clean and dry. There is also an outside urinal and multiple w.c. The former is satisfactory. Both are white-tiled and of excellent constitution. The closets are open and are automatically flushed. This place is also excellent; but the substitution of hand for mechanical flushing would probably be beneficial. With these exceptions, the sanitary fittings are for the most part 'done'. It is therefore not surprising that rats are numerous.

Mattresses are filled with straw in all cases. Sheets are changed once a fortnight except in the probationary ward. All those I noticed were remarkably clean. Each inmate has his own towel.

I was assured and my observations so far as they went fully confirmed the assurance, that the food supplied to the inmates was uniformly of excellent quality. At my visit I saw so-called

'mince' which was really a rich and appetising broth with meat, excellent currant pudding, and potatoes boiled in their slices. I saw the cheese provided for the house. It was of first class. 'Acto' tinned meat is supplied in 6lb tins. The milk supplied to the Poorhouse is uniformly good.

The dining hall does not leave a favourable impression. It is of the old type. Only about half the inmates can be accommodated here at one time; to save having two dinners, a number of infirm inmates have their meals in their wards. The benches are fixed. They have narrow pew-like boards fixed to the back of the bench in front. There is scarcely room for plates. These boards do not fold up or down. The hall floor has to be scrubbed twice a day, because owing to the narrow boards, much food falls to the floor. The fact that the benches are fixed increases the difficulty of cleaning the hall. There is a service of good delf. Forks and knives are supplied. Tea at tea-time is served from teapots.

The grounds of the Poorhouse, enclosed within a high wall, extend to over six acres, of that area, fully three acres is in vegetable garden. In front of the house a small space is laid out in ornamental style.

The pigsty, which contained twenty-two pigs when I visited it is of fairly good construction, but the brick floor is not impervious. It was moderately clean. The bedding supplied for the swine is composed of shavings which at least does not look so suitable as straw. Some time ago, I was told, the pigsty became the source of offensive odour, and it was found on enquiry that it was without effective drainage and that the liquid manure simply soaked into the ground. This incident, the numerous flies observed in several parts of the Poorhouse in 1910, and many observations made elsewhere show that it is extremely difficult to keep swine in the neighbourhood of a large institution in an entirely harmless and inoffensive manner.

In cutting wood, in the manufacture of firelighters and in gardening the most of the men who are fit for work are employed. There is a large stick factory in which many men are kept in useful work. In a special factory, firelighters of unique and ingenious type, are produced. These have a good sale and I

learnt that in no Poorhouse in Scotland does the work of inmates prove more profitable.

On the female side, apart from those engaged in laundry and kitchen, there are very few fit to do much work.

Concerts are given in the Hall once a month. In those occasions the Hall is extremely crowded. On two occasions cinematograph exhibitions have been given. There is a picnic in June or July of each year. There is sufficient provision of books and newspapers for the use of inmates.

Visitors are admitted to the Poorhouse to see friends or relatives who are inmates, on Saturday afternoons from 2.30 till 4.30 p.m. There is no satisfactory accommodation for them. The reception room is very small and is crowded during visiting hours. Ordinary inmates are allowed out on pass whenever they wish to do so.

The Nursery is defective in a number of respects. It is ill-situated, not being sufficiently detached. It is not large enough. It is particularly over-run with rats. During the few weeks preceding my visit, the cupboard in the Nursery had been much gnawed by rats. Then the Nursery is defective in equipment. There is no lavatory. Water has to be carried to it from the laundry on the other side of the court. The floor of the Nursery is rough and so is difficult to keep clean. It must be admitted that it is readily ventilated and that I found it very fresh. At my visit in 1910, flies were very numerous here. All are now aware of the significance of this.

Generally speaking, the accommodation at the probationary department is unsatisfactory. The male probationary ward has seven beds. Cases remain here until they are seen by the medical officer, not longer than one day. Occasionally, a refractory case is sent here for disciplinary reason. The floor of the ward is firm. The w.c. is satisfactory. The bath-room is not properly heated. Beside the main ward is a room with two beds for cases of itch or the like. It is a dingy place.

There are three rooms in the female probationary department. One of three beds, being immediately on the street, is lighted by means of obscured glass. A second also with three beds, was formerly a clothing store. A third room, also for three inmates, is

a dark room to the back with barred windows. It is only for intoxicated or obstreperous arrivals. The bath-room is heated. There is an old fashioned built in bath. Beside the bath-room is a dull and meagre dressing room.

There is no hospital associated with the Poorhouse. The wards for the sick are situated in the main building. This is not an ideal condition. In amount as well as situation the accommodation for the sick is defective and has been frequently strained. At the time of my visit, the maternity ward was being used as a female ward on account of the lack of accommodation for such cases elsewhere. The number of sick has recently been up to forty-five.

On making enquiry about ward equipment I learned that it, too, was far from complete. The provision is defective alike as regards lockers, bed-chairs and bed-rests.

All serious surgical cases are sent to the Victoria Infirmary or one of the other General Hospitals in Glasgow. In the circumstances this is doubtless the best course and makes the provision of an operating room unnecessary. I was told that the Poorhouse possessed an adequate complete set of instruments for routine or ordinary surgical requirements.

Males suffering from phthisis are accommodated in a separate ward of six beds. It is more suitable for this purpose than the ward sanctioned for use as a phthisis ward. There is no place set aside as a ward for female phthisis cases. The medical officer has expressed the opinion that the provision made for cases of phthisis is far from satisfactory and that such accommodation is required.

The Hospital bath-room is a small place: but the bath itself is satisfactory. There is only one bath for the female sick. [Second Report of Dr T. Dewar on Hamilton Poorhouse, 1913, Hamilton CPHM 27.3.14, in *Hamilton Public Library* L362.5(Ham)]

CHILDREN AND THEIR CARE

THE VISITING OFFICER ON THE UNQUESTIONABLE BENEFITS OF FOSTER CARE, 1862

During the 1850s a number of mainland parishes, including Glasgow began to recruit foster-parents from amongst Arran's crofters. In 1862 after receiving complaints that a child had died through the lack of medical care, the Board sent its Visiting Officer to inquire; the following is an extract from his report.

Throughout the Island there are a number of crofters, or small farmers, paying from £5 to £25 rent, and upwards, having one or more horses, cows, sheep, etc. The houses on these small farms are on the whole good of their kind, and their sleeping accommodation is generally sufficient to enable the tenants to take two or three children as boarders, without inconvenience. There are good roads throughout the Island, and it is besides, well supplied with schools. In the houses of these crofters, or small farmers, there is usually a 'roughness', as it is called – that is, a plentiful supply of oatmeal, barleymeal, milk, butter, potatoes, poultry, and other wholesome provisions – the addition of two or three children makes no very material or perceptible difference in the family consumption of food – and their board, paid regularly in cash, is of considerable importance to the crofter in helping him pay his rent.

. . . the last family visited is a fair specimen of the rest, not only in regard to this [clothing] matter, but in every other respect. In the house I refer to there were a crofter and his wife, their adult son and daughter, and four Pauper Children – two aged 11 and 7, being brothers, and the other two, aged 11 and 8, being also brothers. The house consisted of the byre, the kitchen, with two beds, and the inner room, with two beds. The rent of the croft was L.5; there were a horse, three cows, poultry, etc. There was ample show of provisions in the house of all kinds – sacks of meal, oatmeal bread, peasemeal bread, eggs, butter, potatoes, and hams

hanging in the kitchen. In short, there was all the appearance of a substantial and well stored house. The children came in from school during my visit. They came in as they might to their own house; they were received pleasantly by the crofter and his wife, speaking to the latter and styling her 'granny'. I could detect no expression of a dislike to, or fear of, those with whom they lived. One of them was less robust-looking than the others, but they were all healthy-looking children, and, with the exception of one of the younger ones, were well and comfortably clothed. All had received their clothes about the same time, but the one whose dress was not so good as the others, was said to be a more 'stirring' boy, and his clothes were patched and mended, while the others did not require to have theirs mended. These patchings and mendings were done by the crofter's wife.

In every house I visited I perceived, of course, many varieties in cases. In some, the children were robust and healthy-looking; in others, more delicate. Some bore about them painful evidence of diseased constitutions; but, whatever their state of health might be, all appeared to be treated as members of the families with whom they are boarded. The pale face and inert expression sometimes observable in Poorhouse bred children, were exchanged for a healthy complexion and an intelligent expression. The squalid and ragged appearance of poor children to be met with in the wynds and closes of large towns was nowhere visible.

The scale of allowances is, in a very few cases, 2s. – the prevailing allowance is, however, commonly 10s. and 12s. a month for each child, with clothing, and school fees when fit for school. An arrangement is made with the medical gentlemen on the Island to give a general superintendence of the children, only by one of the parishes sending paupers there. In other cases, it is understood that the medical gentlemen shall be called in to attend any of the children when necessary; it is thus left to the discretion of the nurses to say when it is necessary to send for medical aid – a discretion which they may not exercise, or not see occasion to exercise, particularly when they have from 8 to 16 miles to send for him. The expediency of this arrangement seems somewhat doubtful.

. . . In the meantime, it appears to me unquestionable, that a present benefit is conferred on these poor children, and that the crofters and small farmers in Arran are not only benefitted by the cash payments on their account, and enabled to pay their rents more easily than they could do without them, but have also a present and prospective supply of servants and labourers, whose wages are at the lowest.

In the case of the child referred to in the anonymous communication made to the Board, it appears that it was that of an infant; that it was constitutionally unhealthy – that the nurse, under whose care it was, consulted a midwife on the illness assuming a serious aspect; that she also consulted the schoolmaster and the minister of the district – that the doctor's residence being some fifteen miles or so distant, he was not sent for, and that the child died. It is by no means apparent that the child died in consequence of the treatment; but however well-intended and kindly meant the treatment was, and however proper it may have been under the circumstances, it was not guaranteed by professional advice.

That Pauper Children having hereditary disease, or some constitutional complaint, ought to be under the special and constant care of a medical officer, appears to me very desirable; and I should not doubt whether the healthfulness of a district alone was sufficient to counterbalance the security which we have for proper care and treatment of delicate or very young children when in a Poorhouse, visited daily by a medical man. [Report by W.A. Peterkin, Visiting Officer, on Pauper Children Boarded in the Island of Arran, dated 21.4.62, in *Annual Report of the Board of Supervision, 1862*. (P.P. Vol. XXXII 1863) App.(A), No.4, pp.3-8]

BARONY POORHOUSE: THE DEATH OF THE CHILD JOHN FORREST, 1863

In January 1863, the Board received a precognition from Glasgow's Procurator-Fiscal on the death of a Barony pauper and the extract here is the Board's consequent minute. The child's mother had previously been confined in the Poorhouse punishment cell for 'obscene language and assault'.

The Board while they see no reason to believe that the death of the child John Forrest was caused by the exposure consequent on the expulsion of the family from the Poorhouse see on the other hand much reason to believe that the fatal termination of the child's malady, which probably could not on any circumstances have been long postponed, was somewhat accelerated by that exposure, and they regret that they do not find in the proceedings of the Medical Officer in the case any indication of that humane care and consideration which are essential to the proper performance of his duties towards the poor, whether they be of 'troublesome' or of contented disposition.

The Board are also of opinion that the House Governor ought, on the remonstrance of the child's mother that he was too ill to be removed on Monday, to have had him examined by the Medical Officer on that day when his condition may have been materially different from what it had been on the preceding Saturday. It was more especially incumbent on the House Governor to have taken that precaution before calling for the aid of the Police to overcome the anticipated or threatened resistance of the parents, which was expressly founded on their allegation that the child was then too ill to be removed without danger.

Part of what is objectionable in the proceedings relating to this case may perhaps be traced to the transmission by Telegraph of a peremptory order to dismiss Forrest and his family from the Poorhouse. It is evident from the subsequent proceedings that if the Inspector had previously made himself aware of the condition of the child John he would not have ordered the dismissal of the family who were furnished with an order of re-admission as soon as he became aware that the child was so ill. But however this may be it was clearly the duty of the House Governor and the Medical Officer to see that any such order, whatever may have been its terms, was not executed in such a manner as to produce the results which have followed its execution.

The Board hope that what has occurred on this occasion will serve as a sufficient warning both to Dr Thomas and to Mr Wilkie not to omit in any case the humane precautions which are required of them and which are hardly more necessary for the

welfare of the paupers than for the security of those officers themselves. [BS MB 4.2.63, in SRO HH 23/10]

THE TREATMENT OF A BOY NAMED JOHN TAIT BY THE DALKEITH POORHOUSE COMMITTEE, 1864

The first extract is from the minutes of Temple Parochial Board, the second and third from Dalkeith Poorhouse minutes and the last the resulting Board minute. Dalkeith responded by building a 'lock-up' for children.

In the case of John Tait, consider that he is not of age to be adrift on the world. Write to the Poorhouse Board that perhaps he might get a place if sent in charge of somebody in the fair. If he is unsuccessful then this Board will try to get something for him to do at the term and that in the meantime he must remain in this Poorhouse [Temple PBM 1.4.63, in *Midlothian District Council Records*]

A lengthened conversation took place with regard to a boy in the House of the name John Tait, who had been in three situations, but had left them all and who has been re-admitted on an order from the Temple inspector. The Governor stated that the boy was insubordinate, refusing to work or obey his orders. The boy was called, admonished and promised amendment. [Dalkeith CPHM 16.11.63, in SRO CO2/99/1]

The Governor again reported regarding the boy John Tait belonging to the Temple Parish as still being insubordinate, setting a bad example to the other boys, had repeatedly climbed over the walls and only the previous day had been brought back by the police, and whose conduct altogether seriously interfered with the proper discipline of the House, when it was unanimously resolved 'that the Secretary be instructed to write to the Temple inspector that the boy John Tait cannot be longer retained in the House and if not removed by Saturday the 27th inst. be sent back to the Inspector'. [Minutes 9.2.64, in *ibid.*]

The Board . . . are of the opinion that the insubordinate and misconduct on the part of the boy John Tait did not constitute a

valid reason for dismissing him from the Poorhouse, one of the purposes of which is to subject to proper restraint and discipline paupers of bad character or vicious habits while at the same time their material wants are provided for. In the case of this boy not yet fourteen years of age it was competent to the House Governor to inflict various punishments and even resort to corporal punishment in the manner provided for by Rule LXIII of the Rules and Regulations relating to Poorhouses. It appears to the Board that it is not creditable to the efficiency of the House Governor that he should have been unable, wielding such powers as he possesses to combat a boy of that age.

If the enclosing walls of the airing grounds for boys is not such as to prevent them getting over it when they please, the proper course would be to make it so. Such a state of things in this respect as the House Governor speaks of is a temptation to breach of discipline and ought to be remedied.

But while the Board are of the opinion that John Tait ought not to have been dismissed from the Poorhouse on the grounds stated, it appears to them that the Inspector of Temple to which parish the pauper belonged has exhibited throughout with regard to this boy great carelessness, indifference and want of judgment. Instead of taking a proper interest in the boy and endeavouring to procure him employment with a suitable master he coolly instructs this ill-behaved boy of thirteen to go to the hiring market and find a master for himself and then when he has found one, fails, if the House Governor statement is correct, to supply him with the clothes of which he stood in need and which had been promised by the Inspector. [BS MB 10.3.64, in SRO HH 23/11]

THE DEATH OF THE BOY CUMNOCK, OLD MONKLAND, 1865

On the night of 15th February, 1865, a five year old inmate of Old Monkland Poorhouse died and the local Procurator-Fiscal, on reviewing the case sent his precognition to the Board. The following extract is from the Board's Minute.

The Board are of the opinion that the circumstances of this lamentable case reflect discredit on the management of the Old

Monkland Poorhouse. To lock five children who were under medical treatment, into a probationary ward by themselves, at a distance from the other inmates and with no nurse within call, from seven in the evening until the same hour in the morning, was a most objectionable arrangement. It is stated that there was at hand a porter whom the children could have summoned; but it is also stated that they were afraid to disturb him and in fact, he was not summoned, though Thomas Cumnock was seriously ill during the night and after much suffering expired in bed between his two bedfellows of ten and eight years old. Warned by this distressing occurrence it appears that a nurse is now to remain with the children during the night; and it is not easy to conceive how any other arrangement could have ever been adopted.

It appears that the boy Cumnock did not die of any sudden seizure but of acute inflammation of the pleura, from which the post mortem examination showed that he must have been suffering for several days. Yet it is said that the nurse, a pauper inmate employed to attend to those children, to bathe them, to apply the external remedies prescribed for the cutaneous disorder with which they were affected, to strip them and put them to bed, never discovered that the boy was suffering from any other disease than the itch, though she put them to bed, after he had rejected his food, within a few hours of his death. It is impossible to resist the conviction that, either from careless indifference or from want of ordinary intelligence, this woman was unfit for the duty entrusted to her.

But the part of this painful case which appears to the Board to be most unaccountable is the fact that the medical officer, who was attending these children and examined them daily, failed to discover that the boy was suffering from any other disease than itch and seems never to have suspected, till the post mortem examination revealed the cause of death, that the child had, for some days, been affected with acute inflammation of the pleura extending to the whole of one side of the chest and part of the other. This does not appear to the Board to be easily intelligible on any supposition consistent with the possession of competent professional knowledge and perception and the exercise of proper care and attention by the medical officer. [BS MB 13.4.65, in SRO HH 23/11]

LEWD PRACTICES AT INVERESK COMBINATION POORHOUSE, 1868

In early 1868 the Visiting Officer reported on mismanagement at Inveresk Poorhouse. The following is an extract from the subsequent minute, the last to be drafted by Sir John McNeill.

The documents respecting apprehension of David Gunn an inmate of the Poorhouse, on a charge of lewd practices towards one or more of the girls, inmates of the house . . . were again submitted. The Board . . . are of opinion that those documents disclose the most unfortunate instance of mismanagement that has been brought to their notice with reference to any poorhouse in Scotland. The House Committee knowing that a considerable number of the inmates both male and female were of bad character and vicious habits not only failed to punish their delinquencies when brought to its notice by the House Governor – but at the same time failed to provide reasonable care and protection for the female children whom, at their own urgent request, the Parishes had been permitted to receive into the House. It is much to be regretted that the feelings of benevolence which led the Committee to refrain from punishing drunkenness and other breaches of discipline and decorum, should not have led them to incur the expense of providing a suitable paid nurse for the female children, after the bad character of the pauper in whose immediate charge those children were left, had been brought to the notice of the Committee not only verbally but in writing by the House Governor. The consequences of threatening the vicious with indulgence and withholding adequate protection from the innocent have now been made apparent and the Board cannot doubt that it must be the desire of the House Committee to abandon a system which has led to results so painful.

When that House was erected it was not contemplated that children should be received into it and no special accommodation for that class of inmates was provided. At the request however of the Parishes interested, the Board left them at liberty if they considered it advantageous to make arrangements for the admission of children; but only as an experiment which was to be abandoned if it should be found to be productive of inconvenience

rather than advantage. No intimation that any inconvenience had resulted was made to the Board – but it is obvious that the structural deficiencies of the House have not been compensated by careful and judicious management; and the experiment having now resulted in lamentable failure the Board cannot incur the responsibility of sanctioning the detention or admission of female children as inmates, until the structural arrangements of the House shall have been adapted to that purpose, in such a manner as the Board can approve . . . The Board are also of opinion that all the children who are inmates should have separate beds. The practice of putting two in a bed tends to propagate cutaneous disorders and to prevent the correction of offensive habits and ought therefore to be abandoned. [BS MB 2.4.68, in SRO HH 23/13]

FOSTER-CARE: AN ORPHAN'S VIEW, 1870

At the end of 1869, the English Poor Law Board asked one of its District Inspectors to undertake a survey of foster care in Scotland. The Board of Supervision gave its approval and the following two statements by orphans and three by foster mothers are extracts from his Report.

Hugh Mowbray, now in the poorhouse, St Cuthbert's, Edinburgh – I am 14 years of age. I was in the poorhouse till I was boarded out, at four years old, at Kippen. I was there nine years with a widow, Mrs M'Farlane; she had one granddaughter, 21 years of age. When I came away, about eight months ago, there were five other children in the same house belonging to St Cuthbert's Parish: James Farquharson, James Pringle, Margaret Cockburn, Catherine M'Call and Mary Risk, belonging to Bucklyvie parish. There was a kitchen and one bedroom in the house. Mrs M'Farlane, her granddaughter, and Mary Risk slept in the kitchen; all the six St Cuthbert's children slept in the bedroom in two beds. The four boys slept in one bed, the two girls in the other. The eldest girl, Margaret Cockburn, would be 14 when I came away. There was also a boy in the kitchen bed. There were two open beds with curtains in the bedroom where we slept; I was 13 when I came away. I was the eldest boy then

there. There was no rule about boys and girls going to bed; we were sometimes dressing and undressing together. We all got up together, boys and girls. We washed in the burn; we were never washed all over, except when we bathed in the summer, of our own accord. I never heard of the girls washing except their face and hands. We had no chamber pots in the room for the boys, but the girls had one. The beds were partitioned off just the length of the bed. The girls slept in their day shifts. I often saw them. We saw and heard the girls using the pot. The door between our room and Mrs M'Farlane's was closed at night. The girls did not dress in bed, they got up to dress. We had three meals a day, breakfast at nine, porridge and sweet milk with a scone to take to school; at one O'clock dinner, broth and potatoes or milk and potatoes; and porridge for supper at five. We started for school at 9.30 to go in at 10; came out at one, went in from two to four or five O'clock. There was a whole holiday on Saturday.

We were about on Saturday and played. We went for wood in the evening and a 'whiles' on Saturdays. I was making bands for a farmer in holidays at harvest. I got 5s. for that job. I had the money myself; I spent the money in Stirling on sweeties; that was the only work I did for myself. The other boys did the same. I was apprenticed at 13 years of age to a baker (Dobbie); I stayed with him a fortnight. I slept during that time at Mr Sims', 8, Home Street, Edinburgh. I broke a glass thing by accident, so Dobbie dismissed me. I afterwards went to a painter for a week; he dismissed me without giving any reasons; afterwards to a plumber, where I was a month, when I was brought back here for stealing some money out of the coat pockets. I liked being at Kippen better than here because I was out among the farmers; the food at both is about the same. I liked the beds better at Kippen, where we slept four to a bed, though the blankets are better here than at Kippen. The sheets at Kippen were changed once a month. Mrs M'Farlane mended our clothes, shoemaker our shoes. We did not wear stockings or shoes in summer at Kippen and never shifted our stockings but when they had holes; they sometimes stood six weeks without being washed. We had never less than two pair of stockings for use. We shifted our shirts on Monday morning. We went to church on Sunday in our dirty shirts; we

went to Sunday school and church every Sunday. I used to go about with the horses at Kippen, on Saturdays. I could ride them home from the plough, and to water, and clean the harness. I have also taken the horses to the smith's shop. The girls used to wash the clothes and milk the cows, and we boys 'mucked the byre'.

Robert Fairly, Edinburgh. – I am 14 years old; I have been boarded out. I was five years in one place and seven in another. There were three children at Gore-bridge, two boys and one girl. There was a husband, wife and one son. The daughter, 18 years old, was at service; before she went away she slept with her mother in the room with us. There were two rooms in the house, a kitchen and bedroom. There were three beds, one in the kitchen and two in the bedroom, and a shakedown. The son slept in the kitchen, and the husband and wife and three boarded children in the back room; the two boys in a bed, the girl on a shakedown. They were common beds with curtains, there was no partition between the beds. The girl's shakedown was in the middle of the room. The girl was 14 when I left; there was nothing to prevent the boys from seeing her. Her name was Christina Williamson. The girl went to bed after us and got up before us. We all washed in the kitchen. The girl put on some of her clothes in bed, and took off some. We got three meals a day; we got plenty of food. We went to school every day, but when detained by illness. We went to Sunday school and church. We had a clean shirt and stockings every Sabbath. I commenced working for wages at 13 years old, about three months before I came here, at farm work, at 3s. a week; the nurse got that money. I was at Borthwick before I was at Gore-bridge; I was eight years old when I left it. The landlady flitted. We did not get our meat well or our beds. We laid in straw, no sheets, no pillow, but a pair of blankets; three boys slept there. We did not get enough of food at any meal; we did not complain. The woman deceived the visiting officer, she showed him other things. We never complained to the inspector, the woman dared us; we were afraid. She showed the visiting officer the lodgers' beds instead of ours. The lodgers were masons building a church.

Mrs Hadden, 36 Pleasance, Edinburgh. – I am a widow. Alex Colston and Margaret Colston are my grandchildren. They are orphans. The boy is 17; the girl 10. I only receive payment for the girl. The boy earns his own living and pays me 6s. a week. He has been off the roll about a month. We all sleep in this room, the girl in the bed with me, the boy on the ground in front of the fire.

Note – This room was very dirty and dark, the walls black and the plaster falling off the ceiling.

Jane Bell, Kippen. – I have four boys from St Cuthbert's, Edinburgh. I have had them as young as 16 months old. I do not know how old they are when they go away. They may work on holidays for themselves. They have three meals a day, and a piece. They go to school every day, and church on Sunday, and night school. They wash in the burn. I send for a doctor when a child is ill, and whatever is ordered by him I get, and send the bill to the Inspector at Edinburgh.

Note – Beds clean; four boys in one bed in the only room; the nurse in the other bed. No lodgers.

Ann Forrester, Kippen. – I am a single woman. I have three boys and two girls with me from Edinburgh. The eldest girl would be 12 years old; the other's age I do not know; she is said to be a little older; the eldest boy will be about 12. They will be here till they are 13 or 14 years old. The girls and boys sleep in the back room in two beds; I and my cousin sleep in the bed in the kitchen. The girls go to bed last, and get up first. The girls put off their clothes before going to bed in the same room with the boys, but the boys are then in bed. The boys are in bed when the girls get up, but they dress in the room before them.

Note – Beds opposite; six feet from boys' to girls' no separation of sexes. [*Report on the Boarding-Out of Pauper Children in Scotland*, by J.J. Henley (P.P. Vol. LVIII 1870) pp.108, 110 and 112]

MRS GLEN AND HER TEN FOSTER CHILDREN, 1875

In 1875 the Board's Secretary conducted a survey of foster care and when he discovered one of Glasgow's foster parents at Aberfoyle had ten

children a General Superintendent was asked to make a Special Report. The following is an extract.

Mrs Glen has a small croft, and keeps a couple of cows. She is now an old woman upwards of eighty, but her intellect is still clear and vigorous. Her daughter, Miss Glen, lives with her and takes the active charge of the children. She is a woman of superior education and teachers them. She and her mother seem thoroughly devoted to their occupation, which they have carried on for upwards of twenty years. Ten children are now boarded with them, five being boys, aged respectively from seven to ten, and five of them girls, four of these aged from nine to eleven, and the fifth a pretty child about three years old. I saw them all; they were clean in person, simply and sufficiently clothed, and looked healthy and happy. They occupy as sleeping-rooms three of the apartments of the cottage. In addition to the ordinary school teaching, the children have here the advantage of a good deal of industrial training, for which the ordinary business of the house, herding and attending the cows, working the croft and garden, and keeping the ground in order, afford ample opportunity.

On my return to Glasgow, I made inquiry at the office of the Parochial Board regarding the number of children from first to last consigned to the care of Mrs Glen, and what has become of them. The total number has been 60, of whom 10 are now with her. Of the remaining 50, two only, a brother and sister, Irish, and who exhibited as children kleptomania very strongly, have done badly; the girl has become a prostitute, and the boy a thief. Forty-eight are thus accounted for. Two were adopted by respectable people who are childless; twelve went to their friends; two girls are married and doing well; twenty-six are maintaining themselves by their own industry. Among them are a ware-houseman, a pastry baker, a gardener, a painter, a carver and gilder, and a sailor. The others are ploughmen, carters, and domestic servants. Many of these have considerable savings in the bank, and the conduct of all is said to be highly creditable. Four of the fifty have died, and one was transferred whilst under age to another parish. [Report of A. Campbell, General Superintendent of Poor, dated 27.5.75, contained with report by J. Skelton as to

Boarded-out Pauper Children, in *Annual Report of Board of Supervision, 1874-5*. C.1382. (P.P. Vol. XXXI 1875) App.(A), No.1, pp.9-10]

GREENOCK POORHOUSE: THE VISITING OFFICER, ITS GIRLS AND THEIR VERMINOUS HEADS, 1885

This extract is from the Visiting Officer's 1885 report on Greenock Poorhouse. Greenock replied by stating that they were reviewing the position of the matron and the head nurse. The Poorhouse usually contained about sixty children.

An examination of the children showed the cleanliness of the boys to be satisfactory, but the heads of the girls, though ostensibly tidy and well brushed, were in a horrifying and utterly disgraceful condition. The ova of vermin were present in large numbers; and I also observed the live insects. The offer of indoor relief to female children should not be regarded as adequate in this Poorhouse while the present management continues. A Report by Dr Gemmell on the state of the children's heads is enclosed. [Report by Malcolm McNeill, dated 6.2.85, Greenock PBM 17.3.85, in SRA CO2/22/4]

In accordance with your request, I visited the Nursery and examined the heads of all the children; I found there, I think I am correct in stating, that with two exceptions I detected the ova of *pediculus capitis* on each head. In the case of several, the ova were present in great numbers, and in two children I observed the parasite. [Report of Dr Gemmell, Parochial Board Medical Officer, dated 5.2.85, in *ibid.*]

THE HUNTER CHILDREN: A QUESTION OF THEIR NEGLECT BY MR & MRS CROUCHER, DUNDEE, 1889

At the end of 1888 the Board asked Dundee to investigate an allegation that five fostered children at Auchterhouse had been ill-treated and left without medical attention. The first extract is from the consequent report. Although the foster parents resigned, some of the Parochial Board

remained unhappy and the next extract is from statements obtained from one of these, the Revd. Wilson. The Board then sent a General Superintendent to make a full enquiry and the last extract is from its final letter to Dundee.

[Report of Parochial Board Sub-Committee on visiting foster home] The building is a cottage of one storey, with southern exposure, and having in front and on the west a considerable quantity of vacant ground, where, the Committee were informed, the children along with other children of the village are in the habit of amusing themselves. The entrance door opens into a lobby 10 feet in length by about 4 feet in breadth, which leads to a kitchen at the east end, and to a large room at the west end.

The kitchen – an apartment 16 feet by 12.5 feet, and the ceiling 8.5 feet from the floor – is well furnished. It was clean and in good order. It contains one bed, which is occupied by Mr and Mrs Croucher and their youngest child. In a close range a fire was brightly burning comfortably heating the place.

Entering off the kitchen there is a clean and snug apartment – 13 feet by 7.5 feet, and ceiling 8.5 feet from the floor – containing an enclosed bed, in which three of the orphan children sleep, namely: Alexander (aged 5 and 10 months), Euphemia, and Nelly. This arrangement it was explained had been adopted because these children – especially the eldest one, who is weak-minded – are inclined to dirty habits, rendering it necessary for Mrs Croucher to lift them during the night. The bedding was sufficient, and both bed and bedding were clean and in good order.

The large room at the west end of the lobby is a spacious apartment, 16 feet 2 inches by 14 feet 9 inches, and the ceiling is 8.5 feet from the floor. It is clean, airy, cheerful, and comfortable, and remarkably well furnished; the neatness and order everywhere observable indicating care and good taste. On the mantelpiece were a large and handsome mirror and many pretty ornaments, and on the walls fourteen framed pictures, consisting of portraits, sea scenes, etc, and several illuminated mottoes. The front wall is of stone, and the three other walls are lathed and plastered, and all are papered. The ceiling is closely lined with

polished wood, grooved and feathered. The floor, of wood, is carpeted, and the window, which admits abundance of light, is draped with muslin curtains. Two iron bedsteads, each 6 feet by 4 feet, are placed close to each other and on end against the north wall. They are provided with chaff mattresses, and the clothing was both abundant and clean. One of the beds is occupied by two little girls of the orphan family, and the other bed by three of Croucher's own children, the eldest of whom, a girl, is twelve years; and the youngest, a boy, five years of age.

The Committee were satisfied with all they had seen and examined. The whole house is free from damp and thoroughly comfortable. The Committee were particular in examining the beds and bedding, and in ascertaining how the children are fed, clothed, and generally cared for, and they were unable to find any appearance whatever of their being neglected or ill-treated.

The Committee had an opportunity of witnessing the orphan children at dinner in the kitchen. The children appeared to be in good health; they were comfortably clad, and clean and tidy in their persons, and according to the testimony of persons who were examined, much improved physically and mentally since they came to the village. The dinner which had been served out to them, and of which they were partaking with apparently good appetite, was most substantial, consisting of broth, pork, potatoes and pudding.

Statement of Mary Croucher, aged 40. One Sunday evening last winter, when it was dark, one of the children – Elizabeth Hunter, aged nine years – in going for milk slipped on the ice on the door step of my house and fell, hurting her right elbow. We did not think that there was anything wrong with her, but I sent for my neighbour, Miss Anderson, and asked her advice as to whether she thought there was anything the matter with the girl's arm. We discovered nothing wrong. However I rubbed the elbow with vinegar. Two or three days after this I noticed that when the girl lifted her arm it appeared to be stiff. I then poulticed the elbow two or three times, and also frequently rubbed it with vinegar. As the treatment brought about no improvement I asked Dr Mills, Newtyle, to come and see the girl. Her elbow was beginning to get yellow and I sent for him.

Statement of Charles Croucher. About fourteen months ago, I bought an old horse for my business; the next day, being in Dundee with it, I was charged by the Inspector of the Society for the Prevention of Cruelty to Animals with working the horse, which, in his opinion, was not fit for work. I was tried before the Police Court, and convicted and fined 10s.6d. with the alternative of seven days' imprisonment. I had the horse only one day. I did not think it was unfit for work. There were no sores on it; it was condemned on the grounds that it was old and stiff. I am a general dealer, and travel throughout the country selling hard-ware. Neither I nor my wife ever beat the children unmercifully. Occasionally they, as well as my own children, need correction, but they are treated in every respect the same as my own children, and with the utmost regard for their comfort and welfare. Never on any occasion were the children required to search dunghills for bones or rags.

Statement of Constable William Shephard. I said to him [Revd Inglis] that I did not think they were proper guardians for the children. I formed this opinion from the appearance of the children, who seemed to be thin and ill-clad. I have seen Mr Croucher two or three times under the influence of liquor, and once I would have said he was drunk.

Statement of Mrs Walker, neighbour and wife of gamekeeper. About a fortnight after the orphan children came to the Crouchers I saw Croucher's boy striking one of the orphans – Jeannie – with a stick on the brow. The child was not chastised by his mother for what he did, which I thought was improper. On one occasion, while passing Croucher's house, I heard a child crying inside, and on looking through the window I saw Mrs Croucher whipping one of the orphan children on the buttocks with a leather strap. I do not know the cause for which the child was chastised, but she chastised it more severely than I chastised my children. On another occasion, about twenty minutes to ten o'clock a.m. on a week-day, I saw the eldest orphan girl at Croucher's door washing herself and crying. Mrs Croucher came out of the house, and addressing the girl, said 'Blackguard, come on'. The girl

dried her face with a towel and hurried into the house, and as she was going in at the door, Mrs Croucher, who was standing there with a strap in her hand, struck the girl with it across her bare shoulders. I have heard Mrs Croucher swearing nearly every day; it seemed to be a general practice with her. I saw Croucher drunk once.

Statement of David M Mills, Physician. Last winter I was called by the Crouchers to attend a girl, one of the orphan children boarded with them. I found her right arm was much swollen at the elbow, and on very careful examination I discovered one of the small bones was fractured. The injury was of such a nature that a non-professional person would not be likely to discover it, for I myself had some difficulty in diagnosing it. A poultice was on the girl's arm, and Mrs Croucher informed me that she had been poulticing the injury since the accident. Her treatment of it was consistent with what I would have expected of a non-professional person, and so far as I saw there was no neglect on her part. I visited the girl two or three times. I saw the orphan children, and they appeared to be healthy and well fed. The house is large, airy and comfortable and with the Croucher's family and the orphan children it is not overcrowded. I am unable to speak of the treatment of the orphan children by their guardians. [Dundee PBM 1.1.89, in *Tayside Regional Archives*]

[Subsequent evidence supplied by Revd. Wilson] *Written and signed statement of Revd Inglis.* I was amazed to learn that five children were placed under the care of a woman who had five children of her own, the youngest of whom was eight months old; and under the guardianship of a man who had been but recently convicted of cruelty to animals. I know the house well. It was, when occupied by farm servants, a two-roomed house, with a closet off the kitchen for sticks, coals, and lumber – a very common arrangement in farm servants' houses. That a man and a woman with ten children should be located under such conditions was scandalous. In my opinion it was simply a business set up for making a living off the children. In the Public Health (Scotland) Act, Part V, the following is the note on clause 62 by Mr Munro,

Advocate. Regarding the overcrowding of boarding houses he says: 'The Board are of opinion that never less than 250 cubic feet should be allowed for each inmate; in certain circumstances even 300 cubic feet may be insufficient; for the dormitories of a poor-house the Board hold 400 cubic feet for each inmate to be the minimum.' On sanitary grounds alone such a house was totally inadequate for such a number of people. As for sanitary arrangements, there were simply none.

When Constable Gibson called my attention to the treatment of two of the children whom he had observed in an open shed at all times of the day and night, and kept outside of the door in the most severe wintry weather, I could hardly credit such a statement. I went, however, to the place as he requested me, and I found the children shivering with cold, poverty-stricken, and neglected. On one occasion I met three of the children at the foot of the Kirkton farm road, returning from Dronley Woods with bundles of fire-wood. This was in mid-winter. They were thinly clad, and blue with cold, and one of them – the youngest one of the three – was crying. I asked them who sent them out to gather sticks in such weather, and they said 'Mrs Croucher'. From their answers to my questions I understood they dared not return to the house without their bundles. It appeared to me to be shocking cruelty to send such children to gather firewood in such severe weather. During the severe snow storm in the month of February I had occasion to return home by the Knowe Head Road; it was quite dark and the road was blocked with snow, and it was snowing heavily. When I was working my way with difficulty around the wreaths and through the draft, to my astonishment I heard children crying and appealing for help. I asked them who they were, and what they were doing there on such a night. I found them to be two of the orphan children. They told me they had been sent for milk, and had lost their way in the storm and darkness. They were in a most pitiable condition from cold and exposure. They had become bewildered among wreaths and with blinding drift. One of the children, somewhat weak mentally, appeared quite stupefied. I got them out of the wreaths, and took them to the village. I considered it a down-right shame and disgrace that two helpless children, one of whom was weak in

mind, should have been sent away nearly a mile for milk on such a night, and through such a storm. I never, in all my experience, witnessed a worse case of cruelty to children than I did that night.

Written and signed statement of J M Gibson, former policeman. I may say that I had occasion to visit Alexander Walker, who was then gamekeeper on Auchterhouse estate, and lived next door to the Crouchers, several times a week during the evenings in the winter season, and there was scarcely a night that I visited Walker's, be it good or bad weather, but what these children were standing at Croucher's door with the door shut against them, say between six and ten o'clock pm. I do not think Croucher a fit and proper person to be a guardian for the children, owing to their being kept standing at the door in the cold on the bitter cold nights. [Minutes 7.1.89., in *ibid.*]

[Letter of Board of Supervision] They [the Board] are of the opinion, on the evidence, that the Parochial Board, in a somewhat exceptional case, acted to the best of their judgement. It appears to have been their anxious desire to keep the Hunter family together, but the difficulty of finding a home where so many children could be safely accommodated was no doubt considerable. The house ultimately selected was a large one, and the Board are of opinion that it was not overcrowded as to be injurious to the health of the children. It appears on the contrary that their health improved during their residence in Auchterhouse, which goes far to indicate that they were not insufficiently fed. It also proved that they attended school with perfect regularity.

In these circumstances the Board see no ground for censuring the Parochial Board; and the children having now been removed from Auchterhouse there is no cause for further action. Their finding must not be understood, however, as implying any censure upon the complainant Mr Inglis, who, they believe, acted in perfect bona fides on the information supplied to him. [Letter, dated 2.11.89, Minutes 5.11.89, in *ibid.*]

EXTIRPATING THE VERMIN: THE VISITING OFFICER'S TWENTY TWO YEARS OF WORK, 1889.

The following is an extract from Malcolm M'Neill's report on his first

twenty two years work as a Visiting Officer. In 1872 the Board had urged poorhouses to improve their sanitary arrangements.

Among the first points which arrested my attention on assuming charge of the Poorhouses was the accidental discovery of the presence of vermin on the persons of the children and on the clothing in the old clothes store; it is not an exaggeration to say that almost every Poorhouse child in Scotland, whom I was able to inspect, was found affected with lice, and that in hardly a single Poorhouse was it deemed necessary either to fumigate or wash the clothing removed from the persons of inmates on admission. Vermin of the kind in question I had heard of but, till I became an officer of the Board, I had never seen; now over and over again I saw old clothing, which I had caused to be unpacked in my presence, glued together with filth of every imaginable description, and studded – sometimes so thickly as to hide the material – with living or dead lice. As to the children, their state was deplorable, but still more so was the complacent apathy with which it was regarded. It often happened that, owing to their absence at School, I was unable to inspect them, but, when they were present, the detection of the ova of vermin on their persons was invariable, and I well remember one Official who, calmly capturing the insects the while, assured me that they were ‘a capital sign of the health’ of those who possessed them. There lies before me a curious document – a list, with dates, of 63 reports on this, and the allied subject of the old clothing, between the years 1869 and 1872, when the Board issued their Circular dated the 26th July, and it is worthy of remark that in no instance in my experience was an Officer dismissed or even reprimanded by his employer in connection with this horrible and, as I take leave to think, disgraceful state of matters, though 10 cases were reported subsequent to the issue of the Circular and before the close of that year. There is now no Poorhouse in Scotland in which the old clothing is stored unwashed, and in nearly all Poorhouses it is also fumigated, while in these houses in which no fumigator exists, dirty clothing is either otherwise treated or burnt. The children too are generally clean through the regular use of carbolic soap, carbolic vaseline, stavesacre, or some other application; now and

then – perhaps once or twice in each year – it becomes necessary to call attention to the presence of parasites in certain houses, but on the whole the officials and Committees have come to understand the ease with which this affection can be extirpated – if not always to recognise its detestable nature. [Report of Malcolm M'Neill, Visiting Officer, for half-year ending 31.3.89, dated 1.4.89, in *Annual Report of the Board of Supervision, 1888-9*. C.5818. (P.P. Vol. XXXVI 1889) App.(A), No.4, pp.8]

THE MEDICAL INSPECTOR ON EDINBURGH'S UNDERFED AND UNDER-CLOTHED CHILDREN, 1903

As part of its inquiry the Royal Commission on Physical Training asked the Board's Medical Inspector, Dr W.L. MacKenzie to undertake a survey of Edinburgh's school children. Some 600 children from four schools, Bruntsfield, South Bridge, London Street, and North Canongate, were examined. The following is an extract from his report.

The lowest percentage of 'stouts' occurs in North Canongate, where also the average weight is distinctly lowest. At Bruntsfield the percentage of 'stouts' was highest and the percentage of 'thins' lowest, while the average weight was distinctly highest. These correlations show that the judgement of stoutness, medium nutrition and thinness was on the whole sound. It is certain that the general impression from careful observation both of the children and of several hundreds of others not examined in detail entirely conforms to the inferences established by the figures. Nor that only. It is important to convey by means of figures the quality of the stoutness and thinness in each school. For example, there was the thinness due to under-feeding, which was the predominant form at North Canongate, and there was the thinness due to high training, both muscular and nervous, which was a common feature of the other schools. The one order of thinness was associated with unhealthiness of appearance, the other form usually was not. Thus, while in London Street the percentage of thin children (32) was slightly less than at North Canongate (38), the percentage of 'good' in health appearance at

London Street (45) was nearly double those at North Canongate (24), and the percentage of 'stouts' (26) was more than double (10). This clearly shows that thinness does not necessarily mean bad health condition.

Cleanliness of clothing and body is somewhat difficult to standardise. Of cases crawling with vermin – and there was an appreciable number of these – there could be no doubt. But of the clean skins showing many fleabites it was more difficult to judge. Only 3.17 per cent were marked bad for clothing, and only 8.5 per cent for body. These, it is to be understood, were very bad. The general test of each school was not difficult to obtain: In handling the children the examiner's hands were fouled in a much shorter time at some of the schools than at the others. The largest percentage of unclean bodies and clothing was found at North Canongate. The percentage would probably have been greater than it was but for the measures taken at this school to secure cleanliness. The washing in the pond (see under Table 1) is optional, but a very large number of boys take advantage of the privilege and a smaller number of girls. The results were reflected in the children examined. The uncleanliness was not, as one might have expected, in proportion to the apparent poverty. The greatest proportion of unclean children was found among the male children of six to nine. In the other schools there were extremely few unclean children of these ages. In a great many cases the weekly bath at home was found to be used systematically. In several cases a daily bath was common.

The contrast between North Canongate on the one hand and Bruntsfield on the other is too striking not to be dealt with in some detail. From other facts in the other tables, the condition and constitution of the school population in each of these schools have been set forth.

It has been found that in North Canongate, the percentage of children in one and two roomed houses is vastly greater than in Bruntsfield. The cubic space per child is less. The percentage of stout children is less. In fact, taken generally, the children of North Canongate have been shown to occupy a worse position than those of Bruntsfield in the following respects – nutrition,

alertness, amount of ear disease, amount of throat disease, cleanliness of body and clothing, and some other minor matters.

These differences are very great. But they correspond with the general impression of the superior nutrition of Bruntsfield. Even if we allow a small difference for the difference in the weights of clothing – and the clothing of North Canongate children were markedly deficient – the margin against North Canongate is still very large. Among the factors that produce these differences, housing and food must be regarded as the chief. Race can scarcely count for much. My impression is that the races are more defined in the Canongate, more amalgamated in the Bruntsfield, population. But the difference of weight cannot be assigned to race. Neither can they be assigned to differences of physical training. So far as I could judge, the amount of training is approximately equal in both schools. But it must not be forgotten that the existence of such a class as these children of the Canongate are drawn from presupposes a long process of social selection. Into that class the thriftless and the inefficient of every variety tend to drift. On the other hand, the population of Bruntsfield School is supplied from a class selected by labour and occupation, which means greater physical efficiency. Consequently, the children of North Canongate are, to begin with, born from a class of distilled inefficiency. The hereditary factor must, therefore, count for something. But even if this is allowed for, the children were underfed and underclothed. The younger children particularly had little of the vigour and buoyancy associated with healthy childhood. As to clothing, flannel was rare among the underclothing. Obviously, the clothing in many cases had been made to fit sizes other than the wearers'.

These inferences, which are founded on direct observation, are confirmed by the Report of the Committee for Feeding and Clothing Destitute Children, 1901, where it is recorded that in North Canongate School 45 children received food and clothing, 137 food only. For the same year, at London Street School, 27 received food and clothing, 36 food only. At South Bridge 12 received food and clothing, 34 food only. At Bruntsfield none received clothing, and only two received food.

Recent facts confirm this. Accordingly, I feel justified in

concluding a large minority, if not the majority, of North Canon-gate school children are habitually underfed and underclothed.

The total number of children showing some form of disease is very large, amounting to 70 per cent of the whole. In mitigation of the conclusions that might be drawn from this enormous percentage, it has to be said that many of the diseases recorded are slight; they are of value rather as indicating the road to prevention of unhealthiness than as themselves constituting a serious disablement of interference with school work. Of this order are many of the enlarged glands, enlarged tonsils, and adenoids. The same is true, but in a less degree, of the recorded ear diseases. These, even when slight, do interfere to a greater extent with school efficiency. The seriousness of heart and lung diseases, both for school efficiency and ultimately for social efficiency, needs no enforcement. If we assume, as we are entitled to do, that the selection of children was representative of the School Board Children of Edinburgh, it follows that if the same rate of disease incidence be applied as in the 600 examined, there exists at present among the 30,000 school children some 700 cases of incipient or developed phthisis, and some 1,300 cases of more or less serious heart disease. By the same reasoning, some 50 per cent—that is the great total of 15,000 children—would be found to show some slight affection of the throat, and some 40 per cent, or 12,000, some slight affection of the ear. Even if we assume that half the diseases found were such as not themselves to interfere with school efficiency—and this is much too large an assumption, since any affection of ear, or throat, or heart, or lung, tends to interfere with efficiency all through the daily life—we should still have some 35 per cent, that is 10,500 children, with some affection demanding more or less attention. [Report on the Physical Examination of 600 Edinburgh School children by Dr W.L. MacKenzie, dated February 1903, in *Royal Commission on Physical Training (Scotland) (Evidence)*. Cd.1507. (P.P. Vol. XXX 1903) pp.82, 87 and 100]

THE HEALTH OF PAUPER CHILDREN, 1910

As part of the Poor Law Commission's investigations, Dr Parsons, the Medical Officer at Fulham Workhouse, was asked to undertake a

comparative study of the condition of children fostered, those living with their parents and those in poorhouses. The first extract from his report is on the foster home environment of 131 Edinburgh, Glasgow and Govan children, the second on the condition of 188 Glasgow children living at home, and the third on Stobhill Hospital, the largest Poor Law Institution in Britain.

[The environment of children fostered in Saltcoats, Lanark and Blairgowrie parishes] The general character of these houses is distinctly higher than that of those belonging to the seventeen out-relief cases in Lanark, the only landward parish which was investigated. That is to say, the children boarded-out live under material conditions on the whole superior to those of the poorest class, but some of the homes are far from satisfactory. There was, for example, one small house with two dark rooms on the same floor, built on to the back of another house. Entrance was gained from a narrow passage, across which the windows looked on to a blank wall. This was not very high but it was higher than the tops of the windows, and very close. The house was old, the repair not good, and the sanitary accommodation (shared by three households) was unventilated, insanitary and a considerable distance away on the other side of the village street. In this house three children with an old and ignorant woman, who took them for the sake of profit.

There is a considerable degree of overcrowding, as in thirty out of the fifty-two homes, or 58 per cent, there are more than two persons for each room. One household contains nine persons living in two rooms. Here the foster-parents are a young married couple, with three boys of their own at school. With them are boarded a boy of thirteen still at school, a boy of eighteen and a girl of fifteen at work, whose wages are being supplemented, and a girl of nineteen for whom payments are no longer made by the parish. In this case the children boarded-out all came twelve years ago – probably before any of the foster-parent's own children were born.

The cases [of children] in which there is no overcrowding and no promiscuous arrangement of the sexes may be taken as satisfactory. These number eighty one, or 62 per cent. Then there

are fifteen cases where there is some such objection, but among them there is no worse overcrowding than three to a bed, or five to a room, and children only are concerned, that is to say, persons under fourteen, so that the conditions are not so serious as they appear . . . There are thirty five children (27 per cent) who share rooms with adults under some desirable circumstances. For the most part, these are children with their foster-parents. In one case, a boy of fourteen and a girl of eleven share a bed in the same room with the foster-mother. Two girls, aged thirteen and fourteen, sleep in one bed in the same room with the foster-father, foster-mother, and a girl of seventeen. Two boys of thirteen and eighteen share a room with two girls of fifteen and nineteen. One girl of seven sleeps in the same bed with her grandparents and one family has no definite sleeping arrangements at all, but each member sleeps where he or she pleases. This is in a two-roomed house with four beds where a boy of twelve and two girls of seven and three are boarded with their aunt and uncle. The other occupants are the aunt's mother and her son of twelve. On the night preceding the investigator's visit the child of three had slept with her grandmother (who had then been several days in bed with influenza) and the three other children had shared a bed.

[The physical condition of 105 boys and 83 girls examined in Glasgow whose parents were in receipt of out-relief]

- (1) The boys' weights at all ages, except five, and the girls' weights at all ages, except six, are markedly below the standard averages, the girls' weights on the whole, however, approximating more closely to the standards than the boys.
- (2) The heights of the boys at all ages, except five and eight, and of the girls at all ages, without exception, are below the standard averages.
- (3) The Anthropometric Committee's records of chest girths are imperfect, but the measurements of the boys' chest girths is much below those standard averages given, and except at the ages eleven and thirteen are below the averages obtained for the artisan class in English towns by Dr Charles Roberts.

- (4) Seventy-three per cent of the boys and 55 per cent of the girls are 5 per cent or more below the standard weights, and practically 37 per cent of both boys and girls are 5 per cent or more below the standard heights; 8 per cent of the boys and 15 per cent of the girls are 5 per cent or more heavier than the standard weights and only 1 per cent of the boys and 4 per cent of the girls are 5 per cent or more taller than the standard heights.
- (5) Thirty per cent of the boys and 26 per cent of the girls were classed as badly nourished.
- (6) Thirty-one per cent of the boys and 28 per cent of the girls looked ill.
- (7) The condition of the teeth was bad – 56 per cent of the boys and 42 per cent of the girls had five or more decayed teeth; the teeth were irregular in 14 per cent of the boys and 6 per cent of the girls, and badly shaped in 19 per cent of the boys and 8 per cent of the girls. Only two boys out of seventy-three [examined] and six girls out of eighty-three showed any evidence of using a tooth brush.
- (8) Thirty-three per cent of the boys and 24 per cent of the girls were very dirty, and 42 per cent of the boys and 36 per cent of the girls were wearing very dirty under-clothes; 14 per cent of the boys and 81 per cent of the girls had verminous heads, and 20 per cent of the boys and 14 per cent of the girls had their skin much marked by vermin bites. Here, as in the other towns visited, it was noticeable that the general character of the school as regards cleanliness and neatness had a distinct influence on the condition in these respects of the Poor Law children attending it. In those schools where the general standard of cleanliness of body and clothes amongst the children was high the condition of the Poor Law children in these respects was distinctly better than was the case in the schools where the general standard was low. In some cases, too, it was evident that the school teachers had by admonition and encouragement been able to do a great deal to improve the general cleanliness of the children attending the school.
- (9) The clothes were often ragged and of a most nondescript character, but were in the majority of cases amply sufficient in quantity, although the weather at the time of the investigation

was very cold. In only 4 per cent of the boys and 8 per cent of the girls were the clothes insufficient in amount. One boy out of seventy-three [examined], and four girls out of eighty-three, were not wearing boots. Here, as in the other towns visited, several of the teachers told me the Poor Law children were better clad than many of the other children attending the school, and my own observations confirmed their opinions.

- (10) Nineteen boys out of sixty-one tested, and twenty-one girls out of seventy-one, had defective eyesight – only three of these children were wearing glasses.
- (11) Six boys and two girls were suffering from conjunctivitis, and should not have been at school. Eleven boys and fourteen girls were suffering from inflammation of the margins of the eyelids; only one of the cases, however, was a bad one, the other were slight forms. Three boys and one girl were subjects of marked squint. One girl had a recent corneal ulcer with intolerance of light, and should not have been at school. She was not receiving any treatment. She also had a scar from an old ulcer on the same cornea. One boy and two other girls had corneal scars from old ulceration. In one of these cases one eye was quite blind from this cause.
- (12) Twenty-two per cent of the boys and 20 per cent of the girls were mouth-breathers, 11 per cent of the boys and 20 per cent of the girls had enlarged tonsils, and 41 per cent of both boys and girls had enlarged cervical glands. Many of the enlarged glands were associated with dirty conditions of the head, or with septic conditions, past or present, of the mouth. One boy had large glands which required operation.
- (13) One boy and five girls were very deaf, 7 per cent of the boys had discharging ears, and 19 per cent of the boys and 29 per cent of the girls had their external ear passages completely occluded by wax.
- (14) Two boys and two girls showed signs of congenital syphilis.
- (15) Three boys and two girls had legs deformed by rickets. In addition, one boy and one girl had marked rickety deformity of the chest, and another girl had one side of the chest much

contracted from an old empyema. In all, 9 per cent of the boys and 13 per cent of the girls had badly formed chests.

- (16) The skin diseases were mostly trivial. One boy had ringworm of the head, and ought not, of course, to have been at school. Three boys and seven girls had small patches of eczema or impetigo. One girl had the excessively dry, scaly condition of the skin known as xerodermia.
- (17) Two boys had ruptures and require operation or trusses.
- (18) One boy and one girl had signs of comparatively early phthisis, and should have been under treatment, and one girl had bronchitis, and was not fit to be at school.
- (19) There was only one case of heart disease, a girl with well marked physical signs of mitral regurgitation. Several of the children had haemic murmurs, the result of anaemia.
- (20) Twenty-two per cent of the boys and 17 per cent of the girls were very slow and stupid under examination, and the teachers reported 9 per cent of the boys and 10 per cent of the girls as being dull. It was very noticeable, not only in Glasgow but in all the other places visited, that those children with uncorrected defective vision showed a high proportion of dull and stupid members.
- (21) Nineteen boys (21 per cent) were employed out of school hours - one was only ten years old, and seven only eleven, the rest were twelve and thirteen. None of the girls went out to work, probably because they were useful in the house.

[The physical condition of children in Stobhill Hospital, Glasgow] In each pavilion is a play-room and a dining-room for the children and the dormitories. The homes are heated by hot water pipes and lighted by electricity. The dormitories and living-rooms are well ventilated by open windows, and the children are encouraged to practically live out of doors. The dormitories contain about 400 to 450 cubic feet of space per bed. The beds are comfortable and the bedding sufficient. The sanitary accommodation is of a good type. The children wash in small basins so arranged as to provide a constant supply of running water, and make it impossible for two children to wash in the same water. There is ample bath-room accommodation, and the

children have a bath once a week and oftener if they like. They are supplied with tooth-brushes and directed to wash their teeth after each meal. The tooth-brushes are not numbered, but each child is expected to keep its tooth-brush in one place, and to remember which it is. Clean towels are given out twice weekly, and each child is expected to keep its own on the foot of its bed. No other precaution is taken to prevent the towels becoming mixed up. The cleanliness of the heads is looked after by the maid in each pavilion. The pavilions are well built and kept very clean. The rooms, however, are very bare and unhomelike. The only furniture in the dining-room is two wooden tables and some wooden forms. There are no pictures on the walls, no ornaments, and no plants. The fires are never lighted, and the rooms are very imperfectly heated by the hot water pipes. The children at the time of my visit had scarcely any toys, though I was told they had had an abundant supply at Christmas. The children are, however, encouraged to play out of doors. The boys have two footballs, handballs and a cricket outfit. The girls play ring games and cricket and have skipping ropes. There is a library in the school room from which the children borrow books. There is a good drill shed where boys and girls drill, and this is also used as a gymnasium, being fitted with a climbing rope, hanging-rings, horizontal bars, and horizontal ladder. The children are also taught dancing here. Most of the playground is covered with gravel, but the children also have the use of a small grass plot.

The clothes of the children are good but considering the severity of the weather at the time of my visit, the boys' clothes were scarcely sufficient. They consisted of a cotton shirt, waistcoat and coat, lined trousers, stockings and shoes. In the winter this should certainly be supplemented by flannel or flannelette underclothes. The girls' clothes were warmer. They consisted of flannelette chemise, two petticoats, a serge frock and bodice and a pinafore. In the winter, however, at any rate, combinations should be added.

I saw the children at dinner in one pavilion and was struck by the general appearance of disorder and the need of more careful superintendence and training. The younger children were not allowed knives, and many of them took the meat out of their broth with their fingers and ate it holding it in their hands.

All the children help in keeping the pavilions clean. They get up at 6 a.m. and work in the house until 9.30 a.m. having their breakfast at 8 a.m. At 9.30 a.m. they go to school where they stay until 1 p.m. with an interval of half-an-hour for play. At 1 p.m. they have dinner and return to school at 2 p.m. They are in school until 4 p.m. with an interval of twenty minutes. They play from 4 to 5 p.m., have tea at 5 p.m. and then play till bedtime which is at 7 p.m. The elder girls seem to have very little liberty. After getting up they go to the nursery and help there until school-time, they work there again in the dinner hour, and in the evening from 4 till 6.30 p.m. They also work in the nursery on Saturdays. Their recreation seems to consist in taking the children from the nursery out to play. There is an average attendance of about 120 children at the school. The staff consists of one head teacher and three assistants, one of the latter being employed in the infants' school who is head in one of the pavilions.

The children go to church in the grounds and practically never go outside until discharged. When it is remembered that some of the children have been in the hospital for years, this arrangement cannot be too much condemned.

There is no dentist attached to the hospital, extractions being performed by the medical staff. The teeth were cleaner than at any other place I visited, but not so clean as one would have expected when told the children brushed their teeth after each meal. As a matter of fact, it was obvious the cleaning was a very perfunctory matter, was neglected completely in some cases, and in others was performed by brushing across the front teeth without touching the back. The condition of the teeth, as regards decay and irregularity, was extremely bad. Many mouths were seen retaining decayed primary teeth which were seriously interfering with the regular development of the secondary set. About 75 per cent of the teeth urgently needed a dentist's attention. This large amount of dental decay is related to the number of cases of rickets and congenital syphilis existing among the children, and to the large number of children of very bad physical type. In this connection, it must be remembered that many of the children remain in Stobhill because they cannot be boarded out owing to physical or mental defect. This explains how it is that the children

not only in Stobhill, but in the other poorhouses visited, compare, as regards their physical development, unfavourably with the boarded-out children and the out-relief children. It also explains the large number of deformities and diseased conditions met with. [*The Condition of the Children who are in Receipt of Various Forms of Poor Relief in Certain Parishes in Scotland*, by C.T. Parsons. Cd.5075. (P.P. Vol. LII 1910) pp.68-71, 82-84, 93-94]

THE LADY INSPECTOR AND THE FEEDING OF INFANTS, 1912

In 1912 the Board sent its Lady Inspector to review poorhouse provision. This extract on infant feeding is from Cunninghame Combination

Feeding of Infants: Bottle-fed infants, of whom there are generally about three in the Poorhouse, one looked after by the paid attendant, the Medical Officer telling her in what dilution the milk is to be given. This diet is not prescribed in writing. Each bottle is made up separately. Water for dilution is boiled before use. Milk as a rule is not heated for purposes of purification. Bottles are boat-shaped and are open at both ends. I was informed that when not in use they are kept filled with water in the infant's bathroom. When I visited, the bottle of the one bottle-fed infant contained milk placed there, I was told, about half an hour before.

In the hospital, the trained nurse received the verbal instructions of the Medical Officer as to feeding. Bottles not in use are kept in a bowl of water in the scullery. When I visited, the one bottle being so treated had the nipple still affixed. I am told that there are as a rule some three bottle-fed babies in hospital, healthy infants being kept in the Poorhouse. On the day of my visit there were four children under a year old in hospital, three of whom were bottle fed; and one in the Poorhouse. The proper cleansing of feeding bottles is of much importance in the prevention of gastro-intestinal disorders, and should receive particular attention.

Nursing mothers though not classed as workers, are on workers' diet, which includes tea twice a day. Frequently they are occupied in another part of the house from their children whom they may see only at nursing hours and at night. As regards

children born in the Poorhouse, the mothers are kept in the maternity ward for ten days. Afterwards they are kept in the hospital for a week or longer according to their health before being dismissed to the Poorhouse.

Milk Supply: Milk is contracted for from a farm about four miles from the Poorhouse. The amount paid per gallon is 8d or 8½d, according to the time of year. Thirty two gallons of sweet milk and 18 of skim are got in the day, with 22 gallons extra on Sunday which is used for rice. Milk is delivered daily at 7 a.m. in a cart coming directly from the farm. It is said to be of good quality and to turn sour on the day of delivery only very occasionally in thundery weather. The milk to be used during the night is scalded on its arrival, the rest being consumed sour. An examination of the milk has sometimes been made by the Governor, who has found it to contain about 5 per cent fat.

On its arrival at the Poorhouse it is stored in a milk house with stone floor, and walls the lower part of which is cement and the upper plaster. Lime-washing is carried out periodically. The milk house is ventilated to the outside by a wall window covered with wire gauge. Milk is kept in large cans, the vessels containing the night's supply being surrounded by cold water.

Milk for poorhouse children is taken from the milk house as required. On the day of my visit an uncovered pail of milk was standing in the infant's bathroom on a shelf beside the bath, which contained a quantity of foul clothing. It is a disagreeable practice for such clothing to be steeped in a bath used also for the washing of babies, and it is most undesirable that clothing soiled with discharges should be kept anywhere near a vessel containing milk. I am told that there is no necessity to wash clothing in the bathroom, as besides the laundry, there are a number of small wash-houses where it can be slung. The Governor has agreed to have this matter put right at once. [Report of Dr E.M. McVail, Lady Inspector, on Provision for Children at Cunninghame Poorhouse, 8.11.12, Cunninghame CPHM 9.1.13, in ADA CO3/65/7]

HOSPITALS AND INFECTIOUS DISEASES

JACK STEWART AND THE ARDROSSAN GRAVEYARD FEVER HUT, 1848

In the Autumn of 1847 an epidemic of fever threatened Ardrossan. The first extract provides Ardrossan's own account of how an infected resident was treated. The second is from the subsequent Board minute passed after the resident had died on returning to private lodgings.

. . . a man of the name John Stewart called at the Inspector's house in the forenoon [of 1st October] and stated that he had been a lodger in one John Linnart's in Saltcoats and who thought he had taken fever and was in consequence turned out to the street, and requested the Inspector for assistance to find lodgings. The Inspector desired Stewart to go to Dr Brown the medical officer of the Board and get himself examined stating at the same time that if it turned out to be fever the almost impossibility of finding a lodging for him, but to come back and tell him what Dr Brown said. Mr Park also told him that the only place he knew of was a wooden shed in the Church yard, which was once intended to be used as a temporary fever hospital, that though it was not quite finished it was roofed in and weather tight and that he would not wish him to go to it, but gave him 1s. and told him to try to find some other place . . . Stewart did not call back at the Inspector's house till the evening when dark and said that Dr Brown had told him that he had caught fever, and that he was unable to find a lodging . . . Dr Wallace was also of the opinion that Stewart had caught fever and was labouring under it and said that since he had gone into the wooden shed, that it would be as well to allow him to remain there and just to give him a little gruel and buttermilk. Dr Wallace also stated that he was attending several cases in the parish of Stevenston of a similar description, and that so great was the difficulty of finding lodgings that the Inspector and he had been obliged to erect sheds with their own hands of a far more inferior kind than the one in which Stewart was accommodated. [Ardrossan PBM 9.2.48, in ADA CO/3/21/1]

1st. The Board finds that a shed was erected in a burying ground in the parish of Ardrossan for the reception of paupers suffering from fever, and is of the opinion, that the selection of a burying ground as the site of a temporary fever hospital, or of any erection for the accommodation of the sick poor is highly objectionable.

2nd. That the shed erected for this purpose in the Church yard at Saltcoats was insufficient, illconstructed, and too small to afford even for one sick Pauper and an attendant, the accommodation and convenience which ought to be provided.

3rd. That although bedding and bed clothes were furnished from the House of the Inspector for the pauper Stewart while he occupied that shed, he was not provided with a bedstead, but lay upon boards placed upon the ground, and that he was not provided with the conveniences essential to his cleanliness and comfort, with which it is the duty of parochial authorities to provide a sick pauper.

4th. That although Stuart was visited regularly during the day by the medical officer, and by an attendant provided by the Inspector, and was supplied at stated hours with Tea toast soup and other suitable diet prepared for him at the house of the Inspector, he was improperly left without any attendant for several nights, during which he was delirious or almost unconscious and unable to raise himself from his bed.

To provide adequate medical relief for the poor is a statutory obligation and every Parochial Board is bound to furnish the Inspector with the means of fulfilling that obligation. It was therefore the duty of the Parochial Board of Ardrossan, more particularly after epidemic fever appeared in the parish, to have made suitable arrangements, as many other Parishes have done for the accommodation of the sick Poor, and especially of fever patients. But this Parochial Board appears to have contemplated sending such patients to the ordinary lodging houses. To place paupers suffering from fever in lodging houses occupied by healthy poor persons or independent labourers is altogether unjustifiable. It tends to propagate disease and thereby to endanger life, to provide destitution and misery, and ultimately to increase the demands on the funds of the parish. Parochial Boards ought therefore with reference to the pecuniary interests

of the parish, as well as from higher motives, to provide the means of separating the poor who are attacked by fever from the healthy part of the population.

This Board is willing to believe that the Parochial Board of Ardrossan being unprepared for the emergency when it occurred, might have found difficulty in immediately procuring a house fitted for the reception of fever patients, but in the months of June and July, when the necessity for providing such accommodation at Saltcoats was apparent, and was brought to the notice of the Parochial Board, the erection in a suitable situation of a shed properly constructed and of sufficient dimensions would have supplied the deficiency; and it is the opinion of this Board, that the Parochial Board of Ardrossan failed to provide the means of affording relief which they were bound to furnish. [BS MB 17.2.48, in SRO HH 23/2]

CHOLERA: ITS DEMORALISATION OF WEMYSS, 1866

When cholera struck Scotland in 1866, one of the worst affected areas was the parish of Wemyss in Fife. On 21st November, after twenty-one deaths in two days, the Board appointed Dr Littlejohn to conduct an inquiry. The first extract is from the parish's own survey taken before the outbreak occurred; the second is from Dr Littlejohn's report. Buckhaven was predominantly a fishing village, Methil a mining, and Methilhill one of miners and distillery workers. Leven was in the neighbouring parish of Scoonie.

Buckhaven. From the occupation of the majority of the inhabitants and the closely packed manner of the houses to each other and the great irregularity of the streets, lanes and closes this village will require particular care in applying sanitary measures. In many cases where middens were found they are placed too near dwelling houses and as too frequently is the custom where such accommodation is not supplied the refuse from the houses mixed with mussel shells are thrown on the sides of the streets, thereby causing very offensive smells and by no means calculated to improve the health of the inhabitants but most injurious.

The feeding and keeping of pigs would seem to form a trade of itself in this populous place. In one yard alone above 20 pigs were

found one of which has attained the estimated value of £10[sic] besides two cows, one horse, ducks, hen, turkey, pigeons etc.

The Committee consider that the swine feeding trade may be carried too far where there is not suitable accommodation provided for them.

Not a little is done, but still more is required to be done to the streets and lanes in keeping them clean. The absence of almost all underground drainage necessarily causes a great deal of filthy soil to be thrown into the open gutters and where these lead down to the Beach through narrow closes they are very offensive especially to the inhabitants at the foot of the close who complain of their neighbours at the top causing the nuisance.

Methil. Is in a fearful state with mountains of ash heaps.

Methilhill. The worst features here are two abominable privies. The Colliery managers have been written to about them. [Wemyss PBM 27.7.66, in *Fife Regional Council Records* 6/56/3]

. . . the first fatal case in the parish occurred at Methil on the 28th September, and . . . the disease made its appearance in Buckhaven on the 13th of the following month; while it was not till the 21st October that Methilhill was attacked. On that day two deaths took place, and another was reported on the 30th of October. Only three deaths occurred in November up to Monday the 19th, when the disease broke out with great violence, and in three days carried off twenty one inhabitants.

When I visited the village on Thursday, 22nd November 1866, it was in a deplorable state. No efficient steps had been taken to check the disease, and from the utter demoralisation of the villagers on account of the panic caused by the alarming nature of the outbreak, refuse of all kinds lay untouched on every side, and the liquid sewage was allowed to collect in the front of every door. It was easy to discover the infected houses, from the heaps of clothes and bedding which had been thrown out into the garden ground behind. In other cases the cottages were closed, and the bedding and furniture lay untouched, the families having either died out, or the survivors, in their terror, having left the village. What added to the distressing character of the scene was the hopeless nature of the disease. The patients seemed stricken by

some deadly poison, which stupefied its victims. They lay helpless in bed and motionless, so that it was difficult to make out whether they were still alive. The relatives, exhausted by watching, and inhaling with every breath an atmosphere laden with the exhalations from the sick and the bed-clothes, appeared to be ready victims to the disease. The urgency of the case at once determined what measures were necessary, and no time was lost in providing additional medical assistance and nurses, and I considered I was but discharging the duties entrusted to me by the Board, when I personally exerted myself in placing such assistance at the disposal of the Local Authority. At the same time I impressed upon Mr Johnston of Wemyss, the chairman, the necessity of instantly providing labourers who would fumigate and disinfect the houses, and also burn all articles of clothing and bedding soiled by the discharges from the sick. I drew his attention to the insanitary condition of the village, and urged upon him the importance of cleaning the drains and removing every nuisance. The schoolroom was fitted up as a temporary hospital for the reception of the sick, or, should it be found impracticable to remove them, for the accommodation of their families as yet free from illness.

Buckhaven lies, about a mile westward, and is well known as a prosperous fishing village . . . The most crying evil is the pig-sties, which abound in all directions, and are the plague-spot of the village. Huddled together against the steep ascent of the elevated shore, the houses have their gardens rising rapidly to the back. Behind the houses there was generally, to each family, a pig-sty, and beside it an accumulation of manure of most unsavoury description; while the animal itself was, as a general rule, not kept in a cleanly state. Wherever the population was dense, the pig-sties were found in increased numbers and crowded together; and it was not to be wondered at, that the existence of such colonies could be detected by the smell at a considerable distance. If to such a state of matters be added most imperfect drainage, and the ordinary accomplishments of a fishing village in the shape of fish offal of all descriptions, one is tempted to marvel, not that cholera infects such a place that the disease is ever absent.

A still greater danger was specially manifest. Wells to the back of the houses were exposed to contamination from adjacent heaps, and also from the garden ground, which was well manured. And instances were pointed out to me in which the use of water, in such circumstances seriously contaminated with organic matter, had determined a localised outbreak of cholera of most fatal character.

Cholera advanced from Methil as from a centre, and it was not to be wondered at that, with the intercourse that exists between the eastern division of the parish and Leven, the disease should spread to Leven on the one hand, and to Buckhaven and Methilhill on the other. Had the early cases been dealt with in the spirit of the instructions of the Board of Supervision, I submit that the operations of the disease would have been limited, and that the scenes enacted at Methil and Methilhill would never have been witnessed. Having once gained a footing in the parish, and the disease raging epidemically in Leven, it gained great strength, and reappeared in Methilhill with renewed vehemence.

In Buckhaven the water supply was so faulty as to induce a relaxed state of the bowels, which in turn directly predisposed to choleraic attacks, and rendered the inhabitants an easy prey to the disease.

It is more difficult to account for the outbreak at Methilhill. The chief water supply of the village has been pronounced by Professor Playfair to be free from any marked deleterious contamination.

But in addition to the free intercourse with Methil and Leven, in both of which places the cholera was raging, there was a great deal want of sanitary precautions. The village was overcrowded; and, on good testimony, I find that there was among the villagers a too free use of spiritous liquors.

It is remarkable that the first cases of cholera should have occurred on a Sunday, and that the great outbreak took place on a Monday. On the Saturday evenings the workpeople betook themselves to Leven, and spent a portion of their weekly wages there. Exposed to infection, they returned to Methilhill, and in many cases continued their debauch. In the village there is unfortunately no place licensed for the sale of liquors, and the

consequence was, that the villagers had either to betake themselves to the neighbouring infected villages in quest of refreshment, or to buy spirits in large quantity from the neighbouring distillery. Both expedients were fraught with danger, and the latter always led to great excesses.

With such proclivities to cholera, the villagers were easily attacked; and in the midst of deficient sanitary arrangements, the mortality became enormous, and the disease was allowed to proceed unchecked.

It is to be hoped that the lessons of the epidemic will not be lost on the populous places of this parish. An improved water supply, satisfactory drainage, the erection of public privies, the abolition of piggeries, and the regular cleansing of all external filth, are absolutely necessary to render them habitable and wholesome. [Report by Dr H.D. Littlejohn on the Sanitary State of the Parish of Wemyss, dated 6.12.66, in *Annual Report of the Board of Supervision, 1867*. (P.P. Vol. XXXIII 1867-8) App.(A), No.11, pp.17-21]

ISOLATING THE SICK: THE BOARD'S HOSPITAL MEMORANDUM, 1871

In 1871, with the prospect of another cholera outbreak, the Board again issued circulars on its prevention; the following is an extract from its memorandum on hospital accommodation. These principles were to apply to other infectious diseases like scarletina, typhus and smallpox.

... In order to prevent the extension of such diseases in neighbourhoods where they have begun, it is of the utmost importance that (in addition to whatever other sanitary precautions may be requisite) every endeavour should be made to separate the sick from the healthy. This object is comparatively easy when the means to attain it are taken early, while cases of the disease are very few; but any interval of delay allows the cases of sickness to multiply, and perhaps at last to become so numerous that endeavours to isolate them cannot succeed.

These considerations are, most of all, important in regard of the poorer parts of the population; because their usually crowded and ill-ventilated dwellings give extreme facilities for infection. And

among these classes the sick, generally speaking, cannot be separated from the healthy, except in proportion as proper hospital accommodation has been provided for the purpose.

A condition of the first degree of importance for the usefulness of any such accommodation is, that the accommodation shall be ready beforehand. . . . it must be remembered that when two infectious diseases are prevalent in one place at one time, patients having the one infectious disease cannot properly be in the same ward with patients having the other infectious disease.

As regards VILLAGES – each village ought to have the means of accommodating instantly, or at a few hours notice, say, four cases of infectious disease in at least two separate rooms, without requiring their removal to a distance. A decent four-room or six-room cottage, at the disposal of the Authority would answer the purpose. Or permanent arrangement might be made beforehand with trustworthy cottage-holders not having children, to receive and nurse, in case of need, patients requiring such accommodation.

In TOWNS – hospital accommodation for infectious diseases is wanted more constantly, as well as in larger amount, than in villages; and in towns there is a greater probability that room will be wanted at the same time for two or more infectious diseases which ought not to be treated in the same ward. The permanent provision to be made in a town, in order to obtain reasonable security against the spread of infectious diseases, should consist of not less than four rooms, in two separated pairs; each pair to receive the sufferers from one infectious disease, the men and women of course separately. The number of permanent beds to be supplied must depend upon various circumstances, chiefly upon the size of the town; but, as no reasonable amount of permanent accommodation could be trusted always to supply the requirements of a place when infectious disease has actually become epidemic, foresight must in the first instance be used, how, in emergency, additional accommodation can be temporarily given, to meet requirements in excess of the permanent provision; otherwise, the authorities may unexpectedly find themselves obliged to leave ill-lodged infectious cases at their

homes, much as if no hospital accommodation had been provided

...
When the pressure of a particular epidemic requires temporary extension of the accommodation, *Huts*, or, in the summer and autumn, *Tents*, erected on the adjacent ground, will sufficiently answer the purpose; and, if the administrative part of the original building have been thoughtfully devised, these temporary structures may be of very simple construction. [Memorandum on Hospital Accommodation to be given by Local Authorities, dated 12.9.71, Contained within circular Letter as to Cholera, in *Annual Report of the Board of Supervision*, 1872. C.681. (P.P. Vol. XXIX 1873) App.(A), No.18, pp.101-3]

TYPHOID AND THE IMPERFECT FILTRATION OF KINGHORN LOCH, 1874

At the end of 1873, Kinghorn's Medical Officer reported an outbreak of 'fever' and advocated the use of chloride of lime and other disinfectants to cleanse the drains. These measures did not appear to have been satisfactory and the Board on the receipt of a letter from an 'inhabitant' dispatched Dr Littlejohn to inquire. The following is an extract from his report.

I learned that this peculiar form of fever had been prevalent in Kinghorn during the last two months and that in a population of about 2,000 there had already occurred 80 cases of this disease. Dr Welsh had still 22 patients on his list. It is a disease which is not caused by overcrowding and is not carried by infection like Typhus. It is due to some local cause such as defective drainage, impure water supply, imperfect cleansing etc. Kinghorn like all small Scotch Towns has the refuse and excreta of the inhabitants collected in Middens behind the houses and these accumulations are only removed to be used as manure for the garden plots of the villagers.

There undoubtedly had been a recent cleansing of the Burgh by the inhabitants. The middens were tidied up – the street gutters were cleansed, whitewashing had been vigorously carried out, and the medical officer had caused to be widely circulated a sheet of excellent instructions for the inhabitants, a copy of which is

appended to this report. While main drains have been laid along the principal streets, there is no house drainage, and thus one great source of Typhoid fever, viz, the contamination of the air in the houses by emanations from *imperfect* drains was excluded.

My next enquiry led me to examine into the water supply, and no one could possibly trace the localities where cases of Typhoid fever had occurred without being at once struck with the fact that they all with very few exceptions . . . were located in districts of the Burgh which were supplied by one of the chief sources of water supply.

Kinghorn is supplied from the south with very pure water obtained from the sandy soil of the Links, no case of fever has been traced to houses solely supplied with this water. The great bulk of the Burgh is supplied from the Kinghorn Loch situated to the west, the water from this source undergoes imperfect filtration, and even after this, had on the date of my visit an unsatisfactory appearance. The Loch itself contains a large amount of organic matter, and is largely covered with a vegetable scum.

Wherever this water is distributed cases of fever occur and instances were reported to me of the disease being at once checked when another water was supplied, and of its reappearance when the original was again substituted. I quite concur in the opinion arrived at by Dr Welsh, a Medical Man of great experience, who has studied the causation of febrile affections in various parts of the world, that this special water supply is tainted, and has been the cause of the present outbreak of fever. The water of the Loch should be reserved solely for the flushing of drains, and scouring of the side channels of the streets. The position of Kinghorn on the side of a hill presents great facilities for efficient drainage and cleansing and a special supply, which has long engaged the attention of the Burghal authorities, of undoubted purity should be at once introduced. It was shown to me by Mr Swan, member of the Local Authority, that a large available amount of water was allowed to run to waste through deficiency in the distribution of the supply from the Links. Were this waste prevented, and a new scheme carried out the water supply of Kinghorn would be highly satisfactory. It could be introduced into houses and various

sanitary conveniences together with domestic drainage would follow to the manifest improvement of the external cleansing of the Town as all the secondary thoroughfares were littered with excreta. [Report dated 7.1.74, Kinghorn PBM 13.1.74, in *Kirkcaldy District Council Records*]

A HOSPITAL FOR MUSSELBURGH; THE RATEPAYERS' IGNORANT OPPOSITION, 1874

In response to the Board's 1871 cholera circulars, Musselburgh agreed to build a small hospital. However, fearing contamination of their property, no landowner would sell them a site. At the same time the Council also embarked on supplying the town with an improved but costly water supply. When the Board pressed the Council for hospital provision a number of ratepayers objected and appealed to the Home Office for clarification of the Board's powers. The first extract is the Home Office's reply and the second, the Board's subsequent minute outlining what it saw as the Local Authority's duty.

I am directed to inform you in reply to the enquiry made in your letter of the 14th inst, that Mr Secretary Cross is not aware that the Board of Supervision have any power to compel a Local Authority to provide Hospital accommodation – except under an Order in Council putting in force Part III of the Public Health Act – as in the event of Cholera approaching but he understands that the Board have in the case of Musselburgh and several other places strongly recommended the Local Authority to erect a small Hospital for the purpose of isolating the first cases of Infectious Diseases occurring in Dwellings where the Patients cannot be properly treated at home as no cases of Infectious Disease can be received in the Poorhouses suggested in your letter and the Royal Infirmary refuses to admit smallpox patients. [Letter of A.F.O. Liddell, dated 26.5.74. to the Secretary of the Ratepayers Association, Musselburgh, in SRO HH 22/5]

The Board have never claimed the power to compel a Local Authority to erect an Hospital, except under an Order in Council as explained in Mr Liddell's letter of the 26th May last to Mr

Bonhill. The views expressed in Mr Liddell's letter are in entire accordance with those of the Board. But the board deeply regret that the Local Authority of Musselburgh although well aware and admitting that the erection of an Hospital is desirable and even necessary for the protection of the health of the inhabitants, should permit themselves to be alarmed by the narrow-minded and ignorant opposition of a portion of the community. The Local Authority are the only body possessing statutory power to erect an Hospital, and as that power was vested in them by the Legislature for the benefit of the community, it appears to the Board that the failure to exercise it for the common good when it is plainly expedient that they should do so amounts to a dereliction of duty which must impose a heavy responsibility upon the Local Authority themselves. The Board of Supervision are only discharging their duty of exercising whatever influence their opinion may possess in urging upon the Local Authority the reconsideration of this important subject. If the Local Authority do not use their Statutory power, the Board are very sure that the time will come when such a shortsighted policy will be condemned by the majority of the inhabitants and be a source of deep regret to the Local Authority themselves. When an infectious or contagious disorder becomes epidemic in the Town, it will be readily but too tardily acknowledged that much preventable disease, and probably many deaths might have been averted by the erection of an Hospital in anticipation of the emergency. If the Local Authority should still fail in the moral courage requisite to exercise their statutory powers in opposition to mistaken popular feeling, the Board will at least vindicate their own in the matter by a full statement of the circumstances in their Annual Report to the Home Secretary for the information of Parliament and the Public. [BS PHMB 18.6.74, in SRO HH 25/4]

SCARLETINA AT WEMYSS: THE INEXPEDIENCY OF CLOSING SCHOOLS,
1874

At the end of 1874 Wemyss suffered an epidemic of scarletina and the Board sent Dr Littlejohn to inquire. On receiving his report the Board

strongly recommended the parish close all its schools. The extract is the Board's Minute on Wemyss refusing to follow this advice.

The Board have learnt with extreme regret and surprise that a majority of the Local Authority have declined to adopt the suggestion that the schools in the Parish should be temporarily closed with a view to check the spread of scarletina which for some time has been alarmingly epidemic among the inhabitants. It appears that the question had been considered by the School Board in the first instance and they were of the opinion that the expediency of shutting up the Schools should be decided by the Local Authority – the body appointed by statute to watch over the Public Health. Thereafter the two Medical Officers of the Parish concurred in recommending to the Local Authority that the schools should be closed for a time in order to diminish the opportunities for the diffusion of infection. This course was still more strongly recommended by the Board's Medical Officer, Dr Littlejohn, one of the most experienced and eminent authorities in sanitary science in this country. Dr Littlejohn carefully investigated on the spot the sources and progress of the epidemic, and in his Report he stated the grounds, local and general upon which his recommendation was based. That Report was communicated to the Local Authority by the Board, but nevertheless the Local Authority, by a majority, have declared that they 'deem it inexpedient to adopt the suggestions of Dr Littlejohn'. The Board have no power to compel the Local Authority to take the step recommended, and the Local Authority must be held wholly responsible for the consequences of their refusal to follow the advice of the Medical Gentlemen referred to. The shutting of the schools for a few weeks at this season of the year would have been a very simple and harmless step, and it might probably have saved many of the inhabitants from illness and some from death. The Board cannot imagine any rational motive for the resolution come to by the majority of the Local Authority, but, whatever that motive was, the Resolution appears to the Board to be far from creditable to the majority either as regards their humanity or their intelligence. [BS PHMB 24.12.74, in SRO HH 25/4]

TYPHOID AND EAGLESHAM'S DAIRIES: A PERFECT MAGAZINE OF INFECTION, 1875

In February 1875 Crosshill's Sanitary Inspector wrote to the Board complaining that infected milk from Eaglesham had caused an outbreak of typhoid. Dr Littlejohn was appointed to inquire and the following is an extract from his report.

. . . There could be little doubt of the formidable character of the disease, when I was assured by the Burgh's medical gentlemen, that since the middle of January 120 cases of Typhoid Fever had been treated by them, and that there must be other cases attended by medical practitioners living outside the burgh. The mortality fortunately had been low, only two deaths having occurred. I visited several cases, and had no difficulty in recognising the ordinary symptoms of Typhoid Fever. Opinions were somewhat divided as to the origin of the disease; while some, from careful analysis of the cases, had come to the conclusion that the disease was propagated by means of milk, others were not so confident, and suspected that the escape of sewage gas, in consequence of imperfect fittings, might have originated the fever. The Local Authority had, on the day of my visit, issued bills calling upon the inhabitants to boil their milk, and to use disinfectants in their sanitary conveniences. I found, on inquiry, that the chief supply of milk in the burgh came from three well known shops, viz those of Colville, Ralston, and Smith, and that a large proportion of the milk sold in these shops was supplied by Mr John Aitken, Polnoon Lodge, Eaglesham. In one of these shops a death had occurred on the day of my visit; and the supply of milk from these premises was at once stopped. From what I learned, in the course of my conversation with the medical men, I considered it my duty at once to proceed to Eaglesham and examine its sanitary condition, and, more especially, to enquire into that of the dairy farm there which supplied milk to Crosshill . . . So far as the water supply of this Wauker Farm was concerned, nothing could be more objectionable. Crossing the meadows, we reached the so-called spring [of its water], the product of irrigation of a field of some acres. The source of the water thus supplied deserves special notice. The southmost cottage in the village has a very

large midden immediately adjacent to it. This mass of manure drains into the ditch at the roadside, and after running a distance of forty-four feet, comes into close proximity to a well within two or three feet of the gutter, and so placed, that on any sudden increase of the sewage in the gutter this overflowed directly into the well . . . on proceeding to take a specimen from the well by the roadside, it appeared that the residents in the nearest house had emptied the well and allowed its contents to escape. On inquiry I learned that two cases of Typhoid Fever had occurred in this house, and one, a boy, æt. 7, had required medical attendance to the end of December 1874; and that the discharges from these patients had been thrown, either on the manure heap or into the ditch already mentioned.

Struck with the number of young persons who had been affected, and learning that the fever had at last attacked the family of the schoolmaster, I was anxious to inspect the schoolhouse premises, and examine its water supply, and sanitary arrangements. I found the house a perfect hospital. Out of eight of a family, six were struck down . . . I inquired as to the place where the excreta of the patients were deposited, and was conducted to a large midden communicating directly with the privy belonging to the house, and, what to my mind was of more importance, with the privy of the public school, so that the one ventilated directly into the other.

As a result of my visit to Eaglesham, I am of opinion that the locality was an infected one, and that the disease, however originating in the first instance, had spread by means of the excreta of the patients contaminating, *1st.*, the air of the houses; *2nd.*, the air of the neighbourhood, from having been exposed on middens and in water-courses; and, *lastly*, the water supply. Each case, so to speak, formed a fresh centre of infection; and the privy of the public school appeared to me a ready means of spreading the disease. As to the cases at Wauker Farm, these could be satisfactorily accounted for by the attendance of the children at school, and the use of the water supply at the farm must have predisposed them to the infection of the fever. The excreta of the patients at this farm were thrown on the midden; the parties in attendance on the sick superintended the arrangements as to the

collection and disposal of the milk; and the connection between the dairy and the rest of the house was free and open. Again, the milk utensils were washed with water of suspicious character.

Learning, accidentally, that some cases of the disease had been reported at Langside, a district the drainage of which is quite distinct from that of Crosshill, being carried directly to the Cart, I considered it of importance to institute a personal independent investigation, which was satisfactorily completed with the following results. The disease, I found, was confined to the villa residences of the district, the village proper of Langside being unaffected, and free from the disease. Out of forty-two villas, the disease had appeared in six. Of the six, five were supplied from Colville's dairy, and one from Ralston's, both dairies getting their milk from Eaglesham; and these were the only villas, in the whole number of forty-two, which had their milk supply from the infected dairies of Eaglesham. In the six infected villas there were sixteen cases of fever, thirteen being children under twelve years, and three being servants. The sanitary arrangements of villas were pretty much alike, and in no case were any serious defects detected. In the village of Langside there are twenty-eight families, consisting of 114 persons above twelve years of age, and forty-three children. The milk supply is furnished by local dealers, and none of it comes from Eaglesham. There was not a single case of illness in the village, although its sanitary condition was inferior to that of the neighbouring villas. These facts speak for themselves.

. . . Local Authorities should be empowered, in town and country districts, to license dairies, with special provision that not only should the presence of disease in the cows be notified to the Sanitary Inspector, but that all illness of an infectious character among the inmates of the farm or retail dairy should also be reported to the proper authority . . .

Here is Eaglesham, for months a perfect magazine of infection, in close proximity to a great city which has enough to do to cope with its own proclivities to disease, without being exposed day after day to its importation in the shape of Typhoid Fever. This disease is allowed to pursue its course unchecked among mill-workers and children in a country village, and none can tell

how large the area of infection may have become. It is notorious that cases of the disease have travelled from Crosshill as far as Dublin on one side, and Edinburgh on the other, and have necessarily exposed these cities to a considerable risk. From neglect of ordinary sanitary precautions, it breaks out in a solitary farmhouse and hence, in my opinion, it was imported into Crosshill. No notice, so far as I am aware, was ever taken of the epidemic quietly spreading during the winter in Eaglesham. The Local Registrar does not notice it in his quarterly or monthly reports to the Registrar-General until the disease has run its course. The medical officers of the parish have not been appointed Officers of Health under the Public Health (Scotland) Act, 1867, and are not called upon to take any sanitary supervision of the villages in the parish. The Sanitary Inspector is also the Poor Law Officer, and has the supervision of a very large parish, and the salary he receives for sanitary work is nearly nominal. The parish school in its turn becomes a fresh source of infection, and with the arrangements common to Scotch villages, of middens, wells, and water-courses, disease germinates freely in all directions. [Report . . . as to the Outbreak of Typhoid Fever at Crosshill, Parish of Cathcart . . . by Dr Littlejohn, dated 28.4.75, in *Annual Report of the Board of Supervision, 1874-5*. C.1382. (P.P. Vol. XXXII 1870) App.(A), No.14, pp.128-35]

RIISING PUBLIC EXPECTATIONS: HOSPITAL PROVISION AT AYR, 1878-82

In 1878 the Police Commissioners of Ayr asked the Board for advice on whether or not it could co-operate with the local Voluntary Hospital in building a new Infirmary. After receiving Dr Littlejohn's opinion, the Board informed Ayr that the 1867 Act did permit a Local Authority contribution. The first extract is from Ayr's memorandum to the Board and the second from Dr Littlejohn's report. The third extract is from his second report of 1882, when Ayr, still not satisfied with its position, again asked the Board for guidance. The following year it agreed to donate £150 per annum for rights of access.

The Local Authority of Ayr have recently been requested by the Directors of Ayr Hospital to co-operate with them in the erection

of a new hospital. They say that a new hospital is essential both in the respect of the situation of the present one and of its insufficient accommodation. The present hospital has the present surroundings viz, the Railway Station, a Foundry and a Tan Works, and a large Carpet manufactory is in the course of construction, and which will shortly be working. These surroundings the Directors of the Hospital are advised by Medical Men to be injurious to certain classes of patients and therefore, and as an addition is, in any event required, they say they are forced to the conclusion that there must be a new hospital. They estimate the cost of the new hospital at £10,000. They have £2,000 they can apply towards its erection; they expect to realise £2,000 from the present hospital, and it is to assist in raising the balance that they have approached the Local Authority.

The arrangement existing between the Hospital Directors and the Local Authority is, that all patients for whose care the Local Authority is responsible are received into the hospital at a fixed rate per case. [Ayr TCM(PC) 11.2.78, in *Ayr Public Library* B6/21/5]

I have no doubt from a description of the site of the present general hospital at Ayr of the necessity of a new hospital being erected on a more suitable site.

In my opinion it would be advantageous to the public and the patients were the two classes of cases ordinary and infectious treated in the same hospital. There would be only one cost for management and a better class of officials would be obtained. Were the modern views as to hospital construction adopted in the present case it would be easy to ensure suitable isolation in the same building of the more common forms of infectious diseases, while such diseases as smallpox and cholera should be treated in separate buildings situated on the hospital grounds. It follows that the Ayr Authorities in choosing a site should take care that it is sufficiently extensive not merely to afford airing ground for the general or ordinary patients and also for those convalescent from the more common infectious diseases, but, especially for the erection in times of epidemic of detached buildings for the treatment of smallpox and cholera.

I would take the liberty of saying that the Authorities of a town like Ayr are *bound* to provide a suitable hospital for all cases of disease but more especially for cases of an infectious character.

Ayr is a County Town and is largely frequented at certain seasons for its Races and its Balls. In addition it is becoming a very favourite seaside resort in summer. It is of great importance in these circumstances to have the means of quickly isolating cases of infectious disease occurring, say in a lodging house, in a hotel, or in a private lodging. [Report dated 9.1.78, contained within letter of Board, 17.1.75, in *ibid.*]

The new General Hospital is rapidly approaching completion. At the rear and occupying a narrow strip of ground by the river side the Hospital Authorities have erected a small hospital consisting of two pairs of wards, male and female, and two small extra wards.

The new Epidemic Hospital is in my opinion sufficient for the requirements of Ayr in years of ordinary sickness. It has been shown that the average number of cases of infectious disease admitted into the Hospital during the last nine years has been fourteen. This estimate, however cannot be strictly relied upon. The force of public opinion is becoming stronger every year in the direction of recognising the necessity for prompt isolation of such cases and there can be little doubt that a very large proportion will now find their way into Special Hospitals. And as the maintenance of such hospitals is provided for by Public Assessment each ratepayer will have the legal right to call upon the Local Authority to remove all suitable cases – just as in a fire the public are entitled to the use of the means provided by public assessment in the shape of firemen and engines.

Keeping this in view the accommodation is ample for the treatment of three different kinds of infectious disease, and with a detached wooden building for smallpox, the housing of infectious cases is, as I have said, sufficient. The sole deficiency is in the *extent of the site* which from its position, is restricted and does not admit of ample recreation ground for convalescents or for a very thorough separation of convalescents, from various kinds of illness. This disadvantage, is however, counter-balanced by

proximity to the Burgh and also to the new Infirmary whereby expense is saved so far as common management and a supply of trained nurses are concerned. [Report, dated 6.7.82, Minutes 10.7.82, in *ibid.* B6/21/6]

SCARLET FEVER AT MARKINCH: PAROCHIAL MEMBER GREIG'S APPEAL TO THE BOARD, 1881

When scarlet fever broke out at Markinch during 1881, one of the Parochial Board members wrote to the Board and appealed for its intervention. The Board immediately asked the local Medical Officer for a report. The first extract is the Parochial Board Member's letter and the second the Medical Officer's report. Markinch subsequently examined the state of the parish's drains.

As a member of the Local Authority of Markinch Parish I feel some responsibility as to the outbreak of Scarlet Fever in Thornton and Coaltown of Balgonie. I have talked to a member of the said Local Authority and I am told in reference to Thornton that on account of the defective street gutters which house proprietors neglect to repair so much sewage lies on the public road that the new water supply actually makes matters worse, whereas it ought to have made them better. Moreover the habits of the people are not entirely cleanly. Within 6 years this is the third outbreak of fever in Thornton. I understand, that sanitary matters in Markinch itself are not much if any better. I have reason to remember with gratitude the vigorous action of your Board regarding an open well used by the villagers of Balgonie when there had been Fever.

The well has remained closed since I appealed to your Board, and the people have since then drawn clean water, through a pipe, which discharges the water at a lower level.

The mason who covered in the well was pretty well abused. [Letter of George Greig, dated 2.8.81, Markinch PBM 17.8.81, in *Fife Regional Council Records* 6/44/9]

The Vale of Thornton has suffered from a severe epidemic of scarlet fever. The infection was brought with some children from

a distance, and the disease spread owing to the children and other inmates of the infected house mixing freely with others. The cases are at present fewer, and the epidemic appears to be on the decline.

The fever spread to Coaltown and Balgonie Square; but in these villages the cases were few, and mild. At present there is one case in Coaltown; which is convalescent and there is some in Balgonie Square.

There were also three cases of Diphtheria in Coaltown, one of which proved fatal, and the other two are now recovered. [Report, no date, by George MacDonald, Markinch PBM 17.8.81, in *ibid.*]

TYPHOID AND THE BALLAGAN BURN, BONHILL, 1882

In the summer of 1882 typhoid fever broke out at Jameston and Haldane's Mill in the northern part of Bonhill parish. The Medical Officer, however, found some difficulty in tracing its origin and the parish, concerned about the effectiveness of its measures, asked Dr Littlejohn to make an independent inquiry. The following formed part of his report.

There have been up to this date 60 cases of Typhoid reported, and of these 6 have died and 8 have been removed to the Combination Epidemic Hospital at Dumbarton. The disease is now believed to be on the decline since the action of the Local Authority in preventing the use of the Burn which flows from Ballagan, a hamlet the sanitary arrangements of which are most imperfect – the whole sewage of the place and the soakage of a large ashpit and privy passing directly into this Burn, which in summer is much reduced in size. I was pleased to observe that the Local Authority had caused the privy and ashpit to be removed from the side of the Burn and to be re-erected in ground at some distance from the houses and the Burn. But as this stream from the manner in which dwelling houses have been erected near it, acts as a common sewer for the district, I have no hesitation in confirming the opinion of the Local Authority that it is now absolutely necessary that its use as a domestic water supply should be prohibited. If this is not done, cases of infectious disease must continue to spread in

an epidemic form through the use of this water for drinking and dairy purposes.

I learned that the affected district was at the time of my visit having an increased water supply introduced quite sufficient for the wants of this populous neighbourhood, and the only difficulty appeared to be the extension of this wholesome gravitation water to such outlying hamlets as Ballagan, Haldane Mill, etc., etc..

I have no hesitation in advising that full advantage should be taken of the increase in the water supply and that at any rate the new supply should be extended to Haldane's Mill, to all the houses there and especially the Dairy which has proved to be the main agent in propagating Typhoid. [Report of Dr H.D. Littlejohn on an Outbreak of Typhoid Fever in Bonhill Parish, dated 16.11.82, Bonhill PBM(LW) 23.11.82, in SRA CO4/12/21]

THE INSPECTING OFFICER AND SMALLPOX PRECAUTIONS, KINGHORN,
1885

In February 1885 smallpox broke out at Kinghorn and after the local Sanitary Inspector reported to the Board that there had been a number of deaths an Inspecting Officer was sent to inquire. The Board subsequently recommended that Kinghorn and its neighbouring Authorities should combine to provide a hospital. But when the agreement floundered the same Officer was again sent to inquire. The following are extracts from his reports. During this period the Town had an influx of labourers constructing a new railway.

Being in the neighbourhood of Kinghorn I considered it advisable to enquire what efforts were being made to stamp out the epidemic of smallpox which has recently afflicted it. I found that up to date of my visit there had been in all 39 cases, 6 of which proved fatal, 4 of the fatal cases were of persons who had never been vaccinated. There were in the town 15 points from which infection might still radiate, at 10 of these the patients were convalescent, at the remaining 5 they were still under treatment. The convalescent patients were strictly enjoined to keep apart from all others, and when proceeding to the sea to walk there, to

keep the centre of the street when passing through the town – a valuable precaution this if attended to. If the convalescent patients could be induced to carry upon them some distinguishing mark as a warning to others not to come in contact with them it would materially add to the safety of the public, more especially as the inhabitants of Kinghorn have become seriously awake to the importance of vaccination and re-vaccination, the number of vaccinations recently made being about 600.

If Kinghorn had possessed a small hospital and the first case of smallpox had instantly been removed to it, the present misery to the inhabitants of the town and expense to the Local Authority would probably have been spared . . . I found that Masons Lodge had been secured as a temporary hospital in the event of its being needed but on visiting the Burgh I found no arrangements made for its immediate occupation. [Report by A. Campbell, Inspecting Officer on an Outbreak of Smallpox at Kinghorn, dated 14.4.85, Kinghorn PBM(LA) 21.5.85, in *Kirkcaldy District Council Records*]

The necessity of providing a joint hospital is greater now than it was during the outbreak of smallpox, as the Masons Hall, the use of which was obtained for a temporary hospital, has been pulled down. There is also every chance of the town being subjected to much overcrowding whereby any introduction of infectious disease would become more dangerous to the inhabitants. An additional danger is the fact that Kinghorn is on the high road for tramps to and from Dundee. [Report by A. Campbell dated 10.11.87, Minutes 20.12.87, in *ibid.*]

SCARLET FEVER AND THE REMOVAL OF NUISANCES, MIDCALDER, 1886

During the autumn of 1886 an epidemic of Scarlet Fever broke out at Midcalder. The Board immediately asked the local Medical Officer for a report detailing the number of cases, the supposed source of infection and the measures taken for the treatment of patients. Although this was quickly dispatched, the Board remained unhappy and sent an Inspecting Officer to inquire. The first extract is from the local Medical Officer's report and the second from the Inspecting Officer's.

There has been an outbreak, in epidemic form of Scarlet Fever, at Pumpherston Village, Midcalder Parish during the last six weeks. It is of a mild type – number of cases 30, no deaths. The undoubted source of infection has been contagion from the villages of Broxburn and Uphall, where Scarlet Fever has been epidemic during summer and autumn.

The drains have been looked to and found in good order – the ashpits have been emptied and orders given to have this more frequently done.

There has been no attempt at isolation and there is no hospital accommodation. Disinfectants have been diligently used. Besides the village of Pumpherston Scarlet Fever has appeared at Pumpherston Farm Cottages – 6 cases – no deaths. In Midcalder Village 3 cases – 1 death.

The Farm cases were traced to infection from East Calder and the Midcalder villages cases to infection from Uphall.

In all within the District of Midcalder Local Authority, there have been within six weeks thirty nine cases and one death. [Report of Dr W. Watson Medical Officer of Midcalder Parish, dated 13.11.86, Midcalder PBM 16.11.86, in *West Lothian District Library* 2/2/4]

An outbreak of Scarlet Fever and Diptheria has occurred at Pumpherston Works, but it is now reported to be diminishing.

A more perfect system of draining in this village seems desirable. I have noticed on several occasions that the present drains are at times choked.

Great care will be required to be given to supervision and strict attention paid to removal of nuisances.

In my opinion it would have been well if the Local Authority had insisted upon the Oil Company having their houses supplied with perfect drainage before allowing them to be occupied. [Report of G. Falconar-Stewart, Inspecting Officer, dated 24.12.86, Midcalder PBM 8.2.87, in *ibid.*]

FOR THE HEALTH OF THE INHABITANTS: THE LOTHIAN HOSPITAL
MINUTE, 1886

At the beginning of 1886 Edinburgh Town Council announced it would

no longer accept 'fever' patients travelling into the City. Immediately afterwards the Board issued a minute calling on neighbouring parishes to combine and provide hospitals of their own. The first extract is taken from a meeting of parishes to the west of Edinburgh who met in response to this minute. The second is the Board's minute after hearing a deputation from these and other parishes. Drumshoreland was opened in 1889 for the parishes to the west of Edinburgh, but the parishes to the south could not agree and it was left to the new District Council to open Loanhead in 1894.

[Statement by Sir James H. Gibson Craig of Currie] He had called the meeting as a matter of great importance and involving much expense. He was not in favour of a number of small hospitals over the Country. In his own Parish the want of an Hospital had not been felt but if anything had to be done he thought there should be an Hospital erected for the County or for a large district of the County and also that it might be well to obtain powers from Parliament so that County or District Hospitals might be erected on the same principal as County or District Asylums. He suggested that they might approach the Board of Supervision on the matter expressing the utmost willingness to do what was necessary but hoping they might see their way to reconsider the terms and conditions of their Circular.

A general discussion followed in which Representatives from all the Boards took part several stated that there had been few or no cases of infectious disease in their parishes for years. The general feeling seemed to be in favour of a large combination. The suggestion of approaching Parliament was also approved of. Several speakers gave it as their own opinion that the number of beds suggested by the Board of Supervision one for every 500 inhabitants was too large. It was also suggested that if an Hospital be erected it should at first be on a small scale and enlarged as needed. [Drumshoreland Combination Hospital Minutes 11.8.86, in SRO CO2/98/1]

The Board now deem it advisable to issue this explanatory Circular, stating – (1) The requirements and provisions of the

Public Health Act. (2) The reasons that have led the Board to be of opinion that some effective and comprehensive action on the part of the Local Authorities of the County is necessary; and (3) Their own views generally.

1. The enactments of the Public Health Act are as follows: [Sects. 39, 48] The Board are advised that the Local Authorities are bound to Exercise their statutory powers whenever it may be necessary for the health of the inhabitants.

2. In urging the Local Authorities to provide Hospital accommodation the Board have been guided by their own experience in other districts where no such provision had been made. To illustrate what that experience has been they will only mention two instances which have occurred during the present year.

In the parish of Craig in Forfarshire, there is a population of 2,589 (census of 1881), always previously reported on as perfectly healthy. A case of Typhoid fever was imported into the parish in the month of May. The result was that the fever spread and became epidemic. Every effort was then made to check it, but with little success. Down to the 13th September, 478 cases of the fever and forty deaths from it were recorded, an amount of mortality, suffering, and expense which in all probability would have been avoided had the Local Authority been in a position to isolate the first few cases which had occurred.

The parish of Middlebie in Dumfriesshire contains a population of 1,927 (census of 1881), and has no means of isolating cases of infectious disease. About the middle of October last a case of diptheria occurred – the germs of the disease having been, it is supposed, imported – and on the 13th November there had been twenty-eight cases and ten deaths.

The Board consider that it is unnecessary to multiply such instances in order to satisfy the Local Authority of the county that it is their duty to make without delay such a provision as shall enable them to cope with a similar state of matters if it should unfortunately occur, and to show them that previous immunity from infectious disease is no argument against the propriety of making preparations for the future.

3. While it is for the Local Authority themselves to determine, subject to the sanction of the Board, the most convenient and effective manner in which their duty shall be discharged, the Board will now indicate generally their views as to what appears to them to be the most economical and satisfactory solution of the question.

. . . It appears to the Board that two additional Hospitals would at present be sufficient, one for the parishes to the west, and the other for those to the south-east of Edinburgh, if so placed as to be fairly available to the population.

. . . The Board would be prepared to sanction the erection of Hospitals for these districts on the most limited scale in the first instance, provided that their site and construction were such as to admit of future extension, when experience showed that enlargement was requisite.

It is not intended that the Hospital should be provided with a staff of trained nurses, as these could always be obtained in Edinburgh when telegraphed for by the Medical Officer.

Each of the Hospitals should be equipped with a light ambulance carriage, and by that arrangement the removal of a patient from any part of the District could be safely and expeditiously effected whenever the carriage was telegraphed for. [BS PHMB 18.11.86, in SRO HH 25/10]

LOCAL AUTHORITY APATHY: AN INSPECTING OFFICERS' VIEW, 1887

The following is an extract from one of G. Falconar-Stewart's half-yearly reports to the Board.

It is often a matter of surprise to me, that many places notoriously in an insanitary state are not more frequently attacked by some sort of epidemic. I fear the immunity from disease of an aggravated form often tends to make the administration defective. If the Authorities would only think occasionally of the responsibility vested in themselves and how much lies in their power to alleviate the suffering of those compelled to live in crowded and insanitary quarters, by simply insisting that the most ordinary rules of cleanliness shall be attended to, it cannot be

doubted but that the effect would be at once apparent in the improved health of the inhabitants. The apathy of many Local Authorities in neglecting precautions until disease breaks out, and then when too late, making an endeavour to remove the cause of the disease, is in my opinion, most unfortunate. It appears somewhat remarkable, and at the same time not very creditable, to Local Authorities, that they do not of their own free will try to improve Districts under their control when it is proved beyond dispute that the sanitary arrangements, etc are very imperfect. They too often appear to avoid all share in the responsibility or, purposely shutting their eyes to the fact that the legislature has vested in them certain duties, they prefer to throw the onus upon the Board of Supervision of making it compulsory to carry out improvements or effect necessary reforms.

There have been outbreaks of measles, scarlet fever and scarletina in several parts of my District, and in some parts the disease has taken the form of an epidemic. In tracing the origin of many diseases, it is not infrequently found that the prominent causes are defective drainage and want of ordinary and simple precautions in dealing with the milk supplies. The Dairies Act of 1886, however, should do much to lessen the danger of disease being spread through the latter channel.

The late outbreak of smallpox at Queensferry has been happily stamped out. I expressed a hope last year that the Authorities would have purchased the ship 'Hougomont' for cases of infectious disease, but I regret this arrangement has not been carried out.

The necessity of providing hospital accommodation in many quarters seems as imperative as ever. [Report of G. Falconar-Stewart, Inspecting Officer, South-Eastern District for half-year ended 31.3.87, dated 20.4.87, in *Annual Report of the Board of Supervision, 1886-7*. C.5118. (P.P. Vol. XXXVII 1887) App.(A), No.9, p.23]

SMALLPOX AT LEITH, THE BOARD'S ANXIETY, 1894

In November 1893, Smallpox spread from Rotterdam to Leith, allegedly through a victim wearing the clothing of his deceased seaman father. Over

the next 10 months there were some 326 cases and the epidemic spread to Edinburgh. Although Dr Littlejohn reported that the quarantining of suspected ships was satisfactory, local reports led the Board to note 'that the prevalence of smallpox has occasioned it much anxiety'. The following extract, from one of the Medical Officer's Reports, indicates the reasons.

1. That the ailment is in the main, still restricted to the poorer parts of the Burgh, and, on the whole, confined to the regions already attacked.
2. But that, while cases occur in the same streets as formerly, and indeed not infrequently in common stairs in which the disease had already appeared there is, in the past week, only one instance of a patient being attacked in a family – other members living in which have already suffered. In this respect the experience of the past week is in keeping with what has occurred throughout this epidemic, and is an evidence of the benefit of prompt isolation of the patient in hospital, with re-vaccination of those who have been in contact with him, and disinfection of his house and personal belongings.
3. That a proportion of the cases now occurring are clearly traceable to cases which have occurred already, and that, of the remainder whose origin have not yet been definitely traced, a large percentage of the patients are either themselves workers in the Docks, or reside in family with, or have frequent association with, those who work there. Throughout the epidemic, when the disease has attacked those residents outside of the poorer parts of the Burgh, the patient has almost invariably been either a Dock worker (shipping clerk, cooper, etc.) or been living in family with those in intimate association with Dock workers.
4. That, from time to time, during this epidemic, a number of patients have been found walking about, or being at work, while suffering from smallpox in a modified form. In two of these cases the patients had been at work for several weeks while in an infective condition, and it was only in the investigation of the causation of other cases due to infection from these, that their suffering from the ailment was detected. It is to be noted that these two cases were both workers in the Docks, and there is little

doubt that the existence of similar cases, now at large, explains many of the attacks of the present outbreak.

5. In conclusion, it is not impossible that some of the patients caught the disease from their own, or their relatives' wilful foolhardiness or reckless culpability. To appreciate this, it is only necessary to refer to the fact that the Sanitary Department has, on the one hand, had to recover infected clothing from pawnshops; and, on the other, had to have the assistance of the Police to keep back from the ambulance waggon, and from the patient, the crowd of idle and inquisitive people who flock to the door of a house when a patient is being removed, and whose curiosity is frequently so great, that they are with difficulty restrained from completely invading the waggon, in their desire to see what is going on.

If the above considerations are correct . . . it may be predicted that, however efficiently the Sanitary Staff carry out the orders I have given for prompt removal of the sick, disinfection, and other evident and necessary precautions, the coming few weeks are likely to see a distinct increase in the number of cases of disease. Especially is this likely in view of the greater intercourse of the inhabitants with each other, owing to the term removals now going on. [Report of Dr J.A. Gray, Medical Officer of Health, dated 24.5.94, Leith TCM 5.6.94, in *Edinburgh Public Library* qYJS 4245 A2L]

KIRKCALDY'S TYPHOID AND SCARLETINA EMERGENCY, 1896

In 1895 after Court action by the Board, Kirkcaldy had hospital plans approved by Dr Littlejohn. However, to delay the necessary building work the Council began to suggest alternative sites. In the middle of 1896 an outbreak of typhoid occurred and Dr Littlejohn was sent to inquire. The first extract is from his report and the second the subsequent minute of J.M. Dodds, Senior Clerk at the Scottish Office. Further Court action was only avoided by the Council agreeing to immediate building work.

This epidemic which has just been brought to a close – the last patient under treatment having been discharged on Thursday 19th November from the improvised Hospital – has been of a severe type and the inhabitants have generally been exposed to

much risk – not to speak of expense – from the totally inadequate provision made by this flourishing Burgh for coping with infectious disease.

In all 191 cases occurred with a mortality of 20 or 10.4 per cent. The first cases of the Disease made their appearance on 17th May and by the 12th June no fewer than 123 cases had been notified to the Sanitary Officials.

On that day I made my first visit to Kirkcaldy by the orders of the Local Government Board when it was at once apparent how very seriously the efforts of these Officials were hampered from the absence of Hospital accommodation.

Luckily Kirkcaldy had a very intelligent and active Medical Officer of Health who, at once from the manner in which the cases were – so to speak – springing up, recognised the gravity of the emergency, and on his own responsibility tried the very hazardous expedient of opening a Shed at the Harbour which had been used some two years previously as a smallpox Hospital. Considering the medical history of this shed there can be no doubt that the patients who were placed in it were exposed to very great risk. It says much for the energy of the Medical Officer, who was ably seconded by the Sanitary Inspector, that the cleansing and disinfection to which these improvised premises were subjected to was so thorough that of the total number of patients treated, not a single one showed any signs of smallpox infection. At the same time I can fully appreciate the terrible anxiety undergone by these Officials when this very dangerous experiment was being made. Most unfortunately no other place for the isolation of the cases was at the disposal of the Sanitary Staff. Its history and surroundings were so unpropitious that the greatest difficulty was experienced in inducing patients to submit to removal, and I was informed that the scenes that occurred were of a distressing character. All this tended to increase the responsibility of the officials and to hinder their efforts to cope with the outbreak.

At the date of my visit I found this Harbour head Hospital filled with patients – its 23 beds being occupied.

Further Hospital accommodation became absolutely necessary, and an empty School was rapidly prepared for the admission of patients – 43 additional beds were thus provided.

I learned that in the course of the following week owing to the hold the epidemic had on the population the numbers affected in the Burgh rose to 158 of whom 70 were under hospital treatment.

In addition to these improvised Hospitals which I inspected I visited along with the Medical officer upwards of 30 patients who, from insufficiency of hospital accommodation, were treated at home. It was too apparent that such a course tended directly to spread the disease and at the same time to lessen the chances of recovery of the patients: for while Typhus is not generally regarded as a directly infectious disease, yet in confined, badly ventilated and too often overcrowded apartments the discharge, if not carefully disinfected and removed, contaminates the air with the special poison. In other cases the spread of infection could only be accounted for by emanations from infected drains.

Where several cases occurred in a household and could not be removed for isolation in the improvised Hospitals, the family became – so to speak – paralysed; and it was evident that the administration of the medicines ordered and the suitable disinfection of the discharges of the room and of the clothes, etc., etc., could not be depended on. Under these circumstances my advice was followed that, in addition to providing skilled nurses from the Hospital, nurses should go from house to house, see that the medicines were properly given and instruction given as to the use of disinfections. In addition, assistance was afforded to the over worked officials in the shape of a second inspector.

The origin of the outbreak was clearly traced to a Dairy – the milk sent out from which was exposed to the contamination of Typhoid. It is to be regretted that the case in this Dairy was not sooner recognised as Typhoid, because, in consequence of this delay, the disease was allowed to spread. But, be this as it may – there can be no doubt that the crowning disaster of this Epidemic was the want of a Hospital where the first few cases could have been rapidly isolated and the disease, in all probability, stamped out.

It is to the credit of the Sanitary Officials that no fewer than 75 patients were treated in the Hospitals, and that the mortality of these was only 9 or 12 per cent. Several of these cases were

moribund on admission owing to the delay in removal from the want of Hospital accommodation.

Meanwhile after the force of this epidemic was broken by the vigorous efforts of the Authorities another Infectious disease became prevalent and assumed epidemic proportions. It found Kirkcaldy quite unprepared with Hospital accommodation to enable the officials successfully to cope with the disease which proved to be Scarletina. There can be little doubt from the history of this outbreak that, had the first cases been promptly isolated, its further progress might have been checked. [There were 132 cases with 10 deaths.]

I have now for more than 20 years had my attention directed by the Board of Supervision to the subject of Hospital accommodation in Kirkcaldy and I have on repeated occasions inspected sites which appeared to me suitable for the purpose of an infectious Hospital. Among the earliest of these occasions was in connection with the death of Dr Morrison, Medical Officer of Health of the Burgh, who died of Malignant Typhus contracted in discharge of his duty as inspecting Medical Officer of Common Lodging Houses. It was generally felt at the time that had this case of infectious disease been isolated in a Hospital, Dr Morrison might not have succumbed but there was no other place than the lodging house where the poor tramp could be treated. [Report, dated 9.12.96, in SRO HH 58.7]

The negligence of the Kirkcaldy authorities to provide suitable hospital accommodation is I fear too typical of some at least among the small Scotch burghs. [Minute of J.M. Dodds, dated 10.12.96, in *ibid.*]

THE FITNESS OF AYR'S TWO BEDROOMED HOSPITAL, 1899

During the late 1890s Ayr suffered repeated outbreaks of smallpox. The extracts are from Board letters pressing the Council to make more permanent provision. Ayr steadfastly refused, believing that such outbreaks were temporary, and the Board felt compelled to petition the Court of Session. Lord Stormonth Darling, the Lord Ordinary, found against Ayr and ordered it to submit plans within fourteen days. An enlarged hospital was opened in 1905.

The Board have for some time past noted the evasive terms of the Local Authority's communication regarding this matter. The question of the necessity for providing a cholera or smallpox hospital was first brought before the Local Authority by the Board so long ago as February, 1893. Since then a site has been secured but satisfactory plans have not yet been submitted, although the Board understand that the buildings erected two years ago as reception houses are now used as a smallpox hospital.

In the opinion of the Board the time has now come when the whole question of hospital accommodation should be earnestly considered by the Local Authority. The present arrangements are far from satisfactory. In addition to the temporary smallpox hospital already referred to, the Board are aware that the Local Authority have the right, along with the County, to send patients to the general hospital for the county and town which contains wards for the treatment of infectious disease, but the Board are advised that these wards are of imperfect construction and that the airing ground space is very defective.

A favourite residential town like Ayr with a permanent population of about 25,000 and a much greater summer population, cannot safely depend upon a County Hospital; nor should the arrangements be such as may tend to discourage full advantage being taken of the hospital by all classes of the community. [Letter of Board, 25.10.98, Ayr TCM(PC) 7.11.98, in *Ayr Public Library* B6/22/15]

These buildings are constructed of wood, weather boarded on brick butts and slated, and there is *now* a water supply and drainage connecting with the Burgh Sewers. Both buildings, the Board are informed, were on 9th instant, in actual use, 'the hospital' containing two cases of smallpox, and the reception house eight labourers who had been removed from a Lodging House in which an outbreak had occurred.

With regard to 'the hospital' it appears that it consists of two rooms of cubic capacity of 2320 feet each, being virtually, therefore, single bedrooms. On 9th instant in the one room there were three bedsteads, two occupied by the smallpox cases, and in the other there were two bedsteads, one used by the nurse in

attendance. There is no other accommodation for the nurse. A 'kitchen' and a w.c. are in an annexe.

The construction of the 'reception house' is similar to that of 'the hospital'. In one room there were three bedsteads and one crib, occupied by four healthy adult inmates, one of whom stated that he slept on a shake-down on the floor. In the other room there were four bedsteads and four healthy inmates. A washing house and w.c. are in an annexe.

There is no mortuary and no disinfector connected with 'the hospital' but these two defects appear to the Board to be trifling compared with the entire want of the most ordinary requisites for the comfort and care of sick persons and the decent accommodation of the necessary staff.

On 15th March 1895, the Board returned to the Local Authority the plans of a hospital on this site and refused their approval on the ground *inter alia* that 'there is absolutely no bedroom accommodation for matron, nurses, or servant', yet the Local Authority proceeded to erect those buildings. On 24th July 1896, the Boards Inspecting Officer [R. B. Barclay] reported that 'as far as the fitness of the buildings is concerned they are destitute of nearly every requisite:

There is no water supply;
There is no drainage;
The ground is unfenced;
There is no nurse's room;
There is no disinfector;
There is no mortuary etc, etc.'

In August 1894, an outbreak of smallpox occurred, and the Local Authority used these buildings as a hospital and reception house.

Throughout, the Board have employed every means of reason and remonstrance to induce the Local Authority to discharge their obligations to the ratepayers under the Public Health Act in a proper manner, and there appears to be no difference between the conditions under which the Local Authority take the responsibility of treating persons ill of smallpox, or of caring for those who have been exposed to the infection *now*, and those existing in

1896 – excepting that there is now a water supply laid on to the buildings, there is drainage, and the field is fenced.

The position, accordingly, at the present moment is, that the Local Authority have erected and caused 'a hospital' and reception house which not only have not been approved by the Board, but which are in themselves wholly unsuitable for the proper accommodation of persons either of patients or in quarantine, and unsupplied with the ordinary requisites for either proper care and treatment, and that the Local Authority have deliberately neglected the lessons of their own experience and the protestations of the Board. [Letter of Board 20.2.99, Minutes 27.2.99, in *ibid.* B6/22/16]

Another matter of cardinal importance is disclosed by the plans and statements, viz: that these are plans of a 'Cholera and Smallpox Hospital' and of a 'Reception House' placed within the same enclosure and to be administered conjointly. This in itself renders it unnecessary for the Board further to consider the plans. The Local Authority seem to imagine that because persons have been 'exposed' to the infection of smallpox, therefore the proper course to adopt is to send them to a smallpox hospital, and continue the exposure. Experience shows that only a small proportion of those who have been 'exposed' to infection are infected. A smallpox hospital is throughout an infected area. Even if re-vaccination is promptly effected, it is indefensible to domicile a healthy person in a reception house within this area. The operation may fail. In their free movements, such persons multiply the chance of conveying infection to the public. Their presence is inconsistent with hospital discipline.

Although it is not advisable to employ a reception house to quarantine persons who have been exposed to smallpox along with persons who have been exposed to other diseases it is not necessary to set aside such a building for smallpox alone. A reception house ought to be a self contained building near the labouring class district of the town, ready for quarantine in the case of any outbreak of disease, but when required for smallpox to be reserved solely for it. After the clothing of persons removed to a properly situated, equipped and managed reception house has

been disinfected, or if clothing is provided there is not reason for confining them to the in-situation.

It being impossible to approve of these plans as those of a hospital *and* reception house, the only remaining question is whether they can be approved as the plans of a *hospital alone*. Regarded as ward units, neither the 'hospital' nor the 'reception house' can be seriously considered as representing the structure, capacity, component parts, arrangements requisite according to the most moderate standard of safety, comfort, convenience, or propriety. [Letter of Board 27.2.99, Minutes 6.3.99, in *ibid.*]

THE URGENT MATTER OF DIPHTHERIA, CALDER DISTRICT, 1904

At the end of 1903, diphtheria broke out at Kirknewton in the Calder District of Midlothian. Most of those affected (some forty cases and six deaths) were children. When the Local Authority failed to control the epidemic the Board sent its Medical Inspector to inquire and the following is an extract from his Report. The Inspector concluded by stating that diphtheria was 'always an urgent matter' and suggested the Local Authority should be more vigorous in isolating infected families and in disinfecting their homes.

In the great majority of instances the houses contained only two or three rooms, and in actual use this means practically one or at most two rooms. In these two-roomed and three-roomed houses the inmates numbered on the average approximately six. In such conditions neither isolation nor skilled nursing is possible. Further, anti-toxin was used in many, if not in most, of the cases. But anti-toxin, while it ensures as a rule rapid recovery of the patients, does not result in sterilisation of the tonsils and surrounding portions of the throat. Hence a patient that has passed out of danger so far as the disease is concerned may remain a potent source of infection . . . The simplest course would have been removal to hospital, where the antiseptic treatment of the throat and nose can be carried out as a matter of routine for several days or weeks according to the severity of the case. But in this outbreak only eight cases out of some forty-three known were removed to hospital, and of the eight, five belonged to a single family.

The Local Authority would have been abundantly justified in enforcing their powers of compulsory removal in the majority of cases. The fact that no systematic toilet of the throat and nose could be efficiently carried out at home is an additional reason for using strong measures to secure isolation, which, in all except one or two instances, was nominal. The officials informed me that there is great aversion to hospital removal. This is natural at all times in such places, but does not constitute a final reason for not enforcing the Act, which has obviously been framed to meet such aversion.

Measures at School – The school was closed for one month from 29th January. It was opened again on 26th February. It was again closed a third time on 3rd June. How far the opening and closing of the school affected the outbreak has been shown more or less in detail in the case-record already given. [*not printed*] But it is plain that where the possibilities of contact are so numerous as they are in this village, the mere closing of the school could not be regarded as a sufficient measure of prevention.

The school was fumigated. Mr Dick informed me that it was proposed now to wash the walls first with a solution of corrosive sublimate, and thereafter to size them in the ordinary way. The woodwork was to be similarly treated. Meanwhile, the old school latrines have been displaced and new water-trough closets provided.

Disinfection – The disinfection of the premises and clothing has been carried out by the local Sanitary Inspector. From the details given by him, I infer that rooms and clothing have been disinfected with reasonable thoroughness. But the difficulty of securing possession of children's clothing must always be considerable. No steam disinfector was available. Steeping and washing have to be relied on. These methods can be made satisfactory if all the infected clothing can be secured. But it is obvious that in small houses the mechanical difficulties in the way of effective washing of all the body clothing of the patients and the contacts must frequently be unsurmountable. I think the disinfection of the houses, especially where overcrowding is considerable, ought to be moist disinfection, either by spraying or hosing, or washing of walls, floors and furniture. In many of

the houses, however, the walls have been stripped and repapered. This is satisfactory, but is, in my opinion, a needlessly expensive measure. [Report of Dr W.L. MacKenzie on the Outbreak of Diphtheria at Kirknewton, dated 8.7.04, in *Annual Report of the Local Government Board, 1904*. Cd.2514. (P.P. Vol. XXXIV 1905) App.(A), No.35, pp.198-200]

THE PUBLIC INQUIRY INTO OVERCROWDING AT RUCHILL HOSPITAL,
GLASGOW, 1908

To combat the problem of isolating infectious disease amongst its over-crowded population, Glasgow opened a second hospital at Ruchill in 1900. At the same time the Public Health Department extended the diseases it treated to include measles and whooping-cough. This policy was maintained during 1907 when the City suffered epidemics not only of these diseases but also of diphtheria and cerebro-spinal fever. The management of Ruchill subsequently broke down and the Board felt compelled to institute a Public Inquiry under Lord Crawford, Professor Littlejohn (son of its Medical Officer) and one of its Senior Clerks. The following is an extract from their report. Although Glasgow did re-organise its hospital management, it does not appear to have revised its policy.

Overcrowding—Except in the first year of its existence, the number of patients in the Hospital has never exceeded the authorised number – 440. In 1907 there was an unusual strain upon the resources of the Hospital at different periods. In December the average number of patients was 695, and on some days it exceeded 800. First there was a large number of cases of diphtheria, afterwards of whooping-cough. Later in the spring there was an epidemic of cerebro-spinal fever, and in the last months of the year an epidemic of measles. It is not possible to separate completely the questions of overcrowding and under-staffing . . . Accordingly when a much larger number of children is put into a ward above the normal number of beds, it may happen that the ordinary ward staff is not sufficiently numerous or experienced to give them all the treatment and attention which they require. We think, however, that there is conclusive evidence of

excessive overcrowding, irrespective of the number of staff, at least in the whooping cough, cerebro-spinal fever, and measles wards. In May there were 51 patients, both adults and children, suffering from cerebro-spinal fever, and 30 of them unconscious, in a ward constructed for 15 beds. In December there were 74 children with measles, many of them suffering from broncho-pneumonia in a ward of the same size; while in Ward 7, was a small ward, we were informed that there were 62 patients in it on one day at least. The air was polluted and the smell most offensive, notwithstanding the excellent ventilation of the wards. The results of this overcrowding were manifold. In the first place, such large numbers in a ward meant that the floor area was so taken up by beds and cots that, however large the staff of nurses, they could not carry out their duties without great difficulty and impediment from the proximity of the cots to each other. On some occasions, in addition to the number of beds, children were lying two in a bed, and even two in a cot, during some nights. Secondly, the number of nurses was insufficient for such a large number of cases in a single ward, with the result that the children – some of them not more than a year old – lay entirely unattended for hours, and did not get the treatment prescribed for them. It was impossible to feed so many at the proper times. Patients were left for long periods in an unclean condition, and the doctors were sometimes unable to tend them on that account. We do not think that any staff could have coped with the severe overcrowding of which these wards are probably the most salient examples.

Understaffing – . . . Complaints of overwork in his [one of the resident doctors] wards were frequently made to him by the Sisters and Nurses . . . He gives, as an example that when he visited an Enteric Fever Ward – Ward 32 – with a large number of cases he found a Sister alone on duty struggling with a patient who was trying to get out of bed, and, while he was there, another patient came out of bed delirious. We heard other instances, though they were rare, of a Nurse being left alone for a considerable period with a very large number of patients requiring constantly to be tended . . .

With the exception of an interval in the autumn, the congestion in the Hospital actually increased to the end of the year, and the

insufficiency of the nursing staff became more and more acutely felt. The Nurses' hands were sometimes so full that they could not give the patient the treatment prescribed by the doctors, and the difficulties experienced led to the Nurses in a ward being frequently changed. During the epidemic of measles, the patients remained in the Hospital for a long time – much longer than at Belvidere – and there is some evidence that that was due in part to the inexperience of the Junior Nurses in the convalescent and dismissing wards, though also, no doubt, to the undesirable conditions existing in the overcrowded wards retarding convalescence.

Responsibility for Overcrowding . . . We bear in mind that in the management of the Hospital it has been the practice, under the advice of the Medical Officer of Health, fully concurred in by the Physician-Superintendent, in seasons of epidemic disease, particularly of measles, to send to the Hospital a number of patients far in excess of the nominal standard of accommodation, and that the same course has been followed at the Belvidere Hospital without any bad consequences. The opinion is held that that practice is at all events the less of two evils; that, especially in times of extensive epidemics in the City, the children have a better chance of recovery in the Hospital than at home, even if there is a certain amount of crowding. We are willing to accept the theory within limitations, that the amount of cubic space required for adults is not necessary for young children, who at such times compose the great majority of the patients in the Hospital. Accordingly, we do not express an opinion adverse to the view that in times of stress during an epidemic considerable relaxation of the usual rule may be permitted. But such relaxation must be kept within reasonable limits and ought not to be continued for more than a short time. Last year, however, there was great overcrowding in some of the wards for long periods at different times. On such occasions there was no attempt to approximate to the standard of the 10 to 15 beds in a ward. That standard was not relaxed, but entirely discarded. The number of beds was multiplied by 4, by 5, and even by 6, and the total absence of any standard has, even in the hands of experienced medical gentlemen in charge of this Hospital led to unfortunate results.

The overcrowding resulted chiefly from two classes of patients, measles and whooping-cough, diseases which recur at short intervals in epidemics of great extent. It is impossible for any municipality to make provision for isolating more than a fractional number of such patients, and it seems to us therefore that it was an error of judgement to disorganise the administration of a hospital and to cause overcrowding not only in the wards devoted to these two diseases, but also in wards for the reception of other diseases in which hospital isolation is of even greater importance, by admitting such large numbers of cases of measles and whooping-cough. [Report by D. Crawford, H. Littlejohn and A. Murray on Complaints of Over-Crowding and Understaffing of Ruchill Fever Hospital and on its Administration and Management, dated 19.2.08, Glasgow TCM 9.3.08, in SRA C1/3/38]

SCARLET FEVER AND TEMPLEHALL FARM: DISCOVERING THE CONNECTION, KIRKCALDY, 1908

During the spring of 1908 Kirkcaldy suffered an outbreak of scarlet fever and the Board sent its Medical Inspector to inquire on the use of its hospital. Subsequently it became apparent that there had been a dispute between the Sanitary Officials over the outbreak's origins and the Board again sent its Medical Inspector to inquire. The extract is from his second report which Kirkcaldy accepted.

The town was free from scarlet fever from 4th till 24th April inclusive, a period of 25 days. Between 30th April and 4th May inclusive fifteen cases of scarlet fever were notified to the medical officer of health, of which three had their whole milk supply from Templehall dairy while the same dairy formed part of the supply of ten of the others. Two cases received no milk from the suspected dairy, and the source of infection cannot be traced in one of them. The second one was probably infected by contact with the one of the other patients, as he was beside him after his [i.e. the other patient's] illness began.

The connection of Templehall farm with the epidemic is evident throughout the whole course of the epidemic and, as Mr

Braid stated in his letter to Dr Mackay of 23rd May, 'the same thread was running through nearly every one of the cases'.

The epidemic prevalence of the disease was most marked in that part of Kirkcaldy where the customers of Templehall dairy lived, and most of the cases arose among the dairyman's customers.

The discovery of scarlet fever among the dairymaids employed at Templehall removes any doubt that might exist as to the causation of the outbreak. The first case was not discovered at the farm till 26th May, the date of Dr Dewar's [the new County Medical Officer] first visit, and, though the evidence of scarlet fever in this case was at that date slight, there can be no reasonable doubt, considering what occurred at Kirkcaldy among the dairyman's customers, that this girl had had scarlet fever, and was on 26th May convalescent. The circumstances that no history of sore throat or rash or indeed of any illness was obtained is not in my opinion of much moment. Early symptoms may have been slight and not of such a nature as to attract marked attention. The case was rightly removed to hospital, and kept isolated for fifteen days in a scarlet fever ward. She did not take the disease in the hospital, and the presumptive evidence that she herself suffered from it is hereby strengthened.

The second case of scarlet fever at the farm was removed to Kirkcaldy Burgh Fever Hospital on 12th June, and about her there is no doubt that she passed through an ordinary typical attack of scarlet fever. She came to the farm in good health on 28th May and felt out of sorts two days subsequent to her arrival, and also suffered from sore throat early in the disease. There can be no doubt that she was infected at the dairy, and this circumstance by itself strengthens the theory that the dairymaid - removed on 26th May - had also suffered from the disease.

The dairy was stopped selling milk on 12th June by order of the Sheriff, and remained closed till 27th June when, no further case having arisen among the inmates, and the premises having been thorough cleansed and disinfected, the sale of milk was resumed.

The only criticism I have to offer on the closure of the dairy is that it was not closed earlier in the course of the epidemic. It might have been closed a month earlier, and the only reason why this

was not done is that neither Dr Mackay, the Burgh Medical Officer of Health, nor Dr Nasmyth, at that time County Medical Officer of Health, would certify that there was any evidence of scarlet fever there. The connection of the dairy with the epidemic was recognised at an early date by Mr Baird, Burgh Sanitary Inspector, and he did all that he could to impress others with his views. The event has proved that he was correct.

The cases in the burgh were nearly all isolated in the local Infectious Diseases Hospital. Owing to the numbers the hospital soon became full, and all the cases could not be accommodated as they arose. The difficulties of prompt isolation were increased by extensive building operations, which were going on in part of the hospital at the same time, but of the first ninety-seven cases eighty-five were ultimately removed to hospital. The sanatorium, recently built for the treatment of cases of phthisis pulmonalis, was made use of for isolating cases of scarlet fever, and the building alterations being now completed the whole of the hospital has for some time been available for the purposes of isolating all the cases of scarlet fever as they arose.

Disinfection of houses by spray and of bedding, etc., by steam was carried out by the Local Authority's officials. [Report by Dr F. Dittmar on the Epidemic of Scarlet Fever in the Burgh of Kirkcaldy, dated 21.7.08. Kirkcaldy TCM 10.8.08, in *Kirkcaldy District Council Records* 1/2/26]

CROSS INFECTION AT HAMILTON'S HOSPITAL, 1909

Part of the Board's Medical Inspector's Report on the Sanitary Condition of Hamilton (see page 223) also dealt with the Burgh's Hospital. The following is an extract.

In the plans approved by the Board of Supervision in 1876 there are shown a central administrative block and a ward block to the right and another to the left of it besides laundry and outhouses blocks etc. The ward block figures to the left of the administrative building with accommodation for 10 patients in each of two large wards and for 2 patients in side wards does not exist. The other parts of the Hospital have been erected.

Ward Block. The ward block has a passage in the centre communicating by doors with the open air on each side; an air-space thus separates one half, from the other.

Present Use of the Ward Block. One half of the ward block is used for the isolation of cases of Scarlet Fever. The other half is used for cases of Enteric Fever and Diphtheria.

The facilities in the form of slop and slunge sinks are meagre and not up to modern requirements.

The wards are small and there must be a tendency to overfill them in epidemic times, though they were not over-full when I visited.

The ward block is not suitable for the isolation of three different infectious diseases. Cross-infection is liable to occur, and has lately occurred in one child who, sent in with diphtheria, developed Enteric Fever, and then Scarlet Fever in the Hospital.

It appears from the plans that in 1876 it was proposed to erect a 22 bed pavilion as well as the existing ward block. This is more urgently required now, and Scarlet Fever cases should be housed in a separate pavilion.

The Local Authority would be well advised to consult an architect familiar with Fever Hospital construction and have the existing administrative and other buildings re-arranged on modern lines. There need be little structural alteration; but more and better bed room accommodation should be provided for nurses and servants in the administrative block. This might be done in the upper or attic floor.

Up-to-date slop and slunge sinks should be provided in connection with the wards, and the existing unsatisfactory ones removed.

A new block for dealing with cases of Scarlet Fever should be provided as well as a discharge block, and the laundry block and outhouses should be reported on with a view to their improvement.

As there may be some risk from mineral workings under the site, new buildings could be built of wood and galvanised iron.

Disinfection. House disinfection is carried out at present by the antiquated method of burning a certain weight of sulphur in the rooms, and leaving the subsequent washing up to the tenant.

There is no spraying of infected rooms the Local Authority possessing neither the apparatus nor a staff to conduct the process. [Report on the General Sanitary Condition of the Burgh of Hamilton, dated 6.4.09, in *Hamilton Public Library* L352.6(4143)Ham]

CONTAINING SMALLPOX IN THE EDINBURGH AREA, THE SPECIAL COMMISSIONER'S INQUIRY, 1910

In 1909 the Leith and Midlothian Hospital Authorities sold off their old Smallpox Hospitals and the Board, concerned about the adequacy of provision within the Edinburgh area, appointed Dr J. C. McVail to inquire. He concentrated his attention on Edinburgh's Smallpox Hospital at Colinton where the City's own Hospital, a Poorhouse, an Asylum and a Hydropathic were closely situated. The extract is from his report, which for reasons of cost, Edinburgh and the surrounding authorities rejected.

Edinburgh has certain wooden buildings reserved for smallpox on a piece of ground adjoining the City Hospital for infectious diseases. . . . These were originally built in the Queen's Park, Edinburgh, where they were used for smallpox. They were afterwards transferred to Colinton Mains . . . Much of the internal woodwork is stained with rain, and there is an odour suggestive of damp. The wall boards are not lined with any material giving a smooth internal surface. The lighting is defective, nearly all the windows being small and placed high in the wall, perhaps with the purpose of preventing escape of delirious patients. Heating of the wards is by hot water pipes and by small iron stoves, set along the centre line of the ward, each with the usual iron funnel through the roof. Ventilation, when the wards were in use, is said to have been sufficient. Pail privies are provided for the use of patients, and there are also bathrooms. *Extent of Hospital Accommodation required.* The increasing tendency to neglect of vaccination in this country presents an interesting problem as to the degree of control which sanitary authorities may in the future be able to exercise over the spread of smallpox . . . It may be safely said that, owing to the tenement system of housing which so largely prevails in Scotland as compared with

the cottage or self-contained system of England, Scottish sanitary authorities will be severely handicapped in their efforts to control epidemics, and nowhere will the handicap be greater than in Edinburgh and Glasgow, where huge 'lands' abound, very many of them four or five storeys high, with multiple dwellings opening on common passages in each flat, so that when infectious disease exists 'on the stair' it has every facility for increase. Looking to all the circumstances I am persuaded that large city populations should have abundance of ground available for immediate extension of their smallpox hospital accommodation in presence of a spreading epidemic.

. . . I think it quite possible that, in emergency, accommodation might be obtained for 140 or 160 smallpox cases . . . One must, of course, hope that at no time in the course of an epidemic would this number be exceeded, but the future is very uncertain, and quite conceivably there might be several hundreds of cases requiring isolation at the same time. If the accommodation were to prove insufficient, then, as a last resort, the Corporation might be compelled to do what has been elsewhere done more than once, namely, to send home all the patients from the infectious diseases hospital and devote the whole institution to smallpox. That would mean further that all subsequent cases of enteric fever and diphtheria and scarlet fever and measles, and whatever other diseases the hospital is used for, would have to be left at home, whilst the hospital was given up to smallpox. It would be a desperate measure, justified only by desperate circumstances.

Situation and Surroundings . . . The general position is as follows: Protection of inmates of Craighouse Asylum could be depended on. In the Poorhouse there is already a large amount of vaccination and revaccination, and very few of the inmates requiring operation would at any time be unfit for it, but the control is in the hands, not of the Sanitary Authorities, but the Parish Council, and inmates objecting to the operation would have to remain unprotected. The inmates can also leave the Poorhouse whenever they wish. Already in its statistics there is indication of much neglect of infantile vaccination, 18 of 57 children under 10 years of age having been found certainly unvaccinated. At the City Hospital there is also at present a

considerable degree of vaccinal protection, but not so great as in the Poorhouse. There would always be some proportion of patients unfit for vaccination, and, at the time of the census, no less than 33 children under 10 years of age were found to be certainly unvaccinated. At the Hydropathic the effect of a smallpox scare would almost certainly be to empty the institution of visitors.

Looking to all the facts, it seems to me that the prospect as to various insusceptibility of the population in the City Hospital and in the Poorhouse in future years is uncertain and unsatisfactory.

As regards other than institutional population, Colinton Mains is situated in a suburban district which seems very certain to increase. Already, in a field on the left of the road approaching the hospital, villas are being erected, and the main road, of which there is a branch, has a tramway service which must encourage building. In course of years the locality appears likely to become much more populous.

Looking to all the facts, I have no hesitation in recommending a joint hospital for the whole area in question, rather than that Edinburgh and Leith and the two County Districts and the various small burghs should be asked to make their own provision. [Report dated 11.6.10, Edinburgh TCM 29.11.10, in *Edinburgh Public Library* qYHV 251]

THREATENING POVERTY: TUBERCULOSIS IN GLASGOW, 1911

In 1905 the Board declared T.B. an infectious disease and urged local authorities to take action for its control. However, comprehensive schemes to provide treatment failed to become universal and in 1910 to increase public awareness, the Board's Medical Inspectors were sent to review procedures in Glasgow. The following extract is from their report. In 1912 the Government passed new Regulations making T.B. a compulsorily notifiable disease.

[Dr Dittmar on the treatment of Pulmonary Phthisis in the Parish of Glasgow: those in two apartments receiving outdoor relief] Among the very poor the cost of light is a consideration, and the kitchen gas (usually on the penny in the slot system) is the only

one in regular use. It was so in all houses I visited. The only room, therefore, that had any claim to be regarded as cheerful and comfortable was the kitchen, where there was fire and light. The patient, therefore, sits in the kitchen all day long, except when weather conditions are such as to tempt him outside for a little.

Speaking generally, therefore, one may conclude that during the night most, if not all, of the cases of phthisis probably slept in separate beds in one apartment, while the rest of the family slept in the other apartment. In a proportion of cases, however, the patient did not have the room to himself at night, as where a young lad could not sleep in the kitchen with the rest of the family. In such cases the lad would have a 'shake down' in the patient's sleeping room.

But, during the day, the patient, if able to be up, is in the kitchen where there is a fire, and he may (and doubtless often does) lie down on the kitchen bed to rest. And he will remain in the kitchen till the light goes out at night. For the greater part of the twenty-four hours he will, therefore, be in the common living room. Whether, in every case, he leaves the comfortable room, with a fire, to undress and to go bed in the cold, dark, and as a rule, uncomfortable bedroom, it is not possible for me to say. But, I, at least, doubt it.

In two instances, there was no pretence whatever of sleeping apart from the others. Thus, in one case visited, where the father was suffering from phthisis, there were, in the two-apartment house, besides himself, his wife and 7 children from 17 years to 1 year of age. The father had been phthisis for some 4 years, and had been several times in Stobhill Hospital during that period. His wife was paralysed on one side, and had been in this state since the birth of the first child. Of the children, the eldest (a girl, whom I saw) had facial lupus, a skin disease of tubercular nature; and a second child of five years suffered from hip-joint disease, also of tubercular origin; the other children were said to be healthy. They slept as follows: in the kitchen bed were the father, with phthisis, the half-paralysed mother, the little girl with tubercular hip-joint disease, and the baby one year old; in the bed in the room slept the others, one of them facial lupus.

There was obviously not even a pretence at isolation in this

instance. In another two-apartment house were a widow and her four grown-up daughters, one of whom was phthisical. I saw her lying in bed with well-marked hectic flush of phthisis on her cheeks. She was very ill, and I could well believe her mother when she told me that Mary coughed 'an awful lot'. I asked if the patient slept by herself, and was informed by her mother that she slept with her – shared her bed, in fact. On my pointing out that this was uncalled for, and in their case unnecessary, as the house was well furnished and they could evidently afford to purchase a sofa or some kind of collapsible bed, the mother replied that she 'had no fear'. 'Infection 'll no' touch me; I'm ane o' them that disna tak' infection', were her words to me. In this case also, no sufficient precautions were being taken to prevent the spread of infection, at least to one member of the family.

Method of dealing with Sputum – The method of dealing with the sputum is of importance – indeed of supreme importance – in phthisis, as it contains the bacilli of the disease. Investigation of how the sputum was actually being dealt with in these 20 cases is, therefore, of interest.

With few exceptions, all had been in hospital; some of them for more than one period of several weeks or even months. All had pocket spit-cups, in the use of which they had been instructed: and most of them, especially, those with little spit, made use of these spit-cups. But in cases where the amount of spit was large (and it is very large in some cases of phthisis) the pocket spit-cup was of no use. Thus, in one case, that of a young man far gone in phthisis, there was a domestic washing-pail (about half the ordinary size) standing under his bed. This pail, on examination, proved to be *more than half full of sputum*. It was explained to me that the pail had not been emptied for two days. And here was the poor wretch in a cheerless room, by no means clean, with no furniture in it but the rickety bed in which he lay, coughing his very life out into this pail; a pitiful and even disgusting sight. I asked him if he would not go to hospital, the parish authorities being ready to take him there, but he replied, 'No, it would break my heart to go to hospital'. I was informed that he had never been in hospital, though repeatedly urged to go by the officials of the Parish Council.

In another case (that of the tubercular family where several slept in the same bed), the patient had a spit cup, but explained that he kept it in his pocket, for use when he was outside. At home, he spat into a broken breakfast-cup, which I saw resting in an insecure position on a footstool beside the kitchen bed, and with a dirty reddish fluid in it, due, I was told, to permanganate of potash crystals, which had been put in the cup to disinfect the sputum.

In another case (that of the young girl who coughed 'an awful lot', and whose bed her mother shared), the sputum was collected in an ordinary domestic jug which was standing at the bedside.

[Dr McVail on cases under the supervision of Glasgow Sanitary Authority] *Mrs B.*, aged 55: married. Patient's illness began with a cough about two years ago, and eight months ago she was obliged to give up work as an office cleaner. During this time she has had frequent haemoptysis.

One of her brothers died fifteen years ago at 18 years of age, and another about ten years ago at 24 years of age, both from the same disease. A sister died four years ago at 30 years of age from the same disease.

The house consists of two back rooms on the ground floor of a tenement. There are four occupants, namely the patient, her husband aged 46, and two children aged 17 and 13 years. The rent is 13s. monthly. The husband is a labourer and can earn about £1 weekly, but for two months, he has been out of regular work. Lately they have been selling their furniture and blankets, and have been receiving help from the Church. The husband and wife occupy a set-in bed in the kitchen, the rest of the family sleeping in the other room. The bedding is very poor, and consists only of sheets and bedmats as all the blankets have been sold. The house was fairly clean.

The diet consists mainly of tea and bread and butter. Twopence worth of milk is bought in the day. Patient has her own eating utensils. She has a very bad cough, and a copious spit. When inside she expectorates into a bowl, the contents of which are burned, and when outside into paper or into a handkerchief. The washing is done by the sanitary authorities. Patient attends regularly at the Sanitary Dispensary.

[Dr Dewar on measures adopted by Glasgow Local Authority for the administrative control of Pulmonary Phthisis] *Cases illustrating defective conditions. Female, aged 41; domestic.* This patient resided in a very dark and dirty tenement, which was in a bad state of repair. I understand that it has been condemned by the Public Health Authority, and I am not surprised. It gives shelter to the very lowest and most abandoned class. The case was notified by a private practitioner. As in all the other cases of the series, notification was made during the first fortnight of January 1911. The patient took ill about a year ago, and was in an advanced state of illness and confined to bed when I visited her on 11th April. She died a few days afterwards. Owing to her loss of voice it was very difficult to elicit detailed information. She denied actual poverty, but there was profuse evidence, not only of her helplessness, but of her destitution. Her husband was alive, but she had not lived with him for several months. The house was of one room, for which she paid a rent of 2s.3d. a week, was dirty. With her, apparently sharing her bed, lived her son, a school-boy of 13 years. I found her window open about an inch at the top. The water-closet could not be used on account of filth. The stair is very dark, in disrepair, and foul beyond description.

Male, aged 17 months. Private notification. The patient, a twin, had whooping-cough when 2 months old. He was never robust thereafter. He died in January 1911. House consists of two rooms. Six occupants – parents and four children, the youngest born 9th January 1911, the day the patient died. Patient slept in crib with twin brother. The father is a miner. His work is irregular. Thus he drew 4s. last Friday! But his average earnings are 18s. or so. It takes 15s. to 17s. to keep the house, and the rent is 11s.1d. a month. The house is very dirty, bare, and poverty-stricken; extremely close, and with a very foul and offensive atmosphere although the window is open about six inches. The 'bed' in the 'room' consists of two boxes, which are to be burned. The flock was out to be washed. It was extremely dirty. The other children were all well at the date of my visit. It is probable that pulmonary phthisis in children is not a very infectious disease.

Male, aged 36. Parochial notification. Patient was a sailor, he has been ill for eighteen months, but worked till November 1910.

Both lungs are now affected. He is in Poor Law Hospital. His house of two rooms is very bright and airy and extremely clean. Till he went to hospital he slept in the kitchen bed with wife and child; his three other children in the 'room'. Here poverty is threatening – indeed, has arrived, the savings of several years being exhausted. This case is one of those where neither laziness, intemperance, nor thriftlessness has conduced to privation, but in which the poverty directly results from the phthisical illness of the bread-winner.

Male, aged 30. Parish notification. Patient a surfaceman; has been ill for two years and ceased to work six months ago. The house is of one room. Here there is poverty – nay, starvation. The room is empty, except for a cupboard and an apology for a bed. The cupboard contains food, and is also used as a dog-kennel. The windows are shut and the house offensive. The patient, his wife, and child live here with his brother and his brother's wife. The latter says that the patient and his wife slept on the floor, but I doubt it. The emphasis with which she assured me of it convinced me of her untruthfulness. The patient and his wife had left before my visit; his sister-in-law said she did not know where they had gone.

[Description of the Methods of Disinfection] The Spray, in fine diffusion, was applied freely, even to profuse wetting of roof, walls, and other exposed surfaces. The bedding, furniture, and interior of cupboard and coal-box were all very conscientiously sprayed. In the house I first visited two gallons of cyllin and water mixture (1 to 320) were used in the kitchen alone. Thus the process is very general and very thorough. The first house in which we watched the performance of disinfection was fairly clean. The furniture, pictures, ornaments, wall-brackets, and the articles on exposed shelves remained in situ during the process. It is obvious that even the most careful, most conscientious disinfection falls short of the object aimed at, unless the apartment to be dealt with is emptied of all furniture and decorative objects – indeed of all its contents. Yet in houses of one or two rooms, in which life must necessarily continue without interruption, it entails extreme inconvenience, or may even be impossible, to secure the disuse of the room for the necessary period.

The second house, except for the old couch, stuffed with hay in place of hair, and with the dust of decades, and a cupboard was empty. Here the sofa was the difficulty. Short of complete destruction by fire, or actual passage through a steam disinfecter – if that be possible – I do not think it could have been disinfected! The walls, the roof, the shelves of the press, and the drawers of the cupboard were all freely sprayed. The process was good and thorough in its way; but I felt that before I should care to occupy the room I should like the sofa removed, the floor and woodwork scrubbed with soft soap and hot water, and the walls and roof whitewashed. [*Reports to the L.G.B. on the Administrative Control of Pulmonary Phthisis in Glasgow* by Drs Dittmar (dated 20.1.11), McVail (dated 22.2.11) and Dewar (dated 29.5.11), with foreword by Dr W.L. MacKenzie, dated September 1911]

HOUSING AND SANITATION

CHOLERA PRECAUTIONS AT SCOONIE: THE UNEXPECTED AMOUNT OF FILTH, 1866

In response to the 1866 Board circulars on cholera precautions, Scoonie undertook a survey of sanitary conditions. The following is an extract. Later in the year cholera spread from Wemyss.

Springfield. Houses generally dirty and very much in need of thorough cleaning and whitewashing, and tenants impressed with the urgent necessity of immediately attending to this. Pig styes and middens in the most filthy conditions, orders given for the immediate cleaning of the former and removal of the latter. Pig sty at the end of William Mackenzie's house, so injuriously affects the dwelling which it adjoins, by the liquid manure pervading the wall, and creating serious dampness and offensive smell in the bed and house, that a removal of the Nuisance is rendered imperative. Saw Mr Meldrum on the subject, who promised immediately to have a drain made in the sty, to carry off all the liquid manure effectually, and to co-operate with the Board to the utmost of his power in securing a thorough cleaning of the interior of the Dwellings.

Broom. The houses generally in fair order as to cleanliness, but the floors and walls are so excessively damp, that under any circumstances, be the tenants however cleanly, the houses must all be most unhealthy . . . Pig styes and middens in front of houses, although not very bad, ordered to be cleaned and removed respectively. Pig sty at the back of Alexander Brown's house and immediately adjoining a window of Brown's, creates such an intolerable and noxious stench, as might be the means of originating typhus fever, and certainly make the dwellings scarcely fit for human beings to live in, than the pig sty from which the nuisance emanates. Its immediate removal ordered and the site of it to be thoroughly deodorised with Chloride of Lime. It is suggested as most essential for the Board to see that this is attended to.

Bankhead. Northmost Cothouses very filthy. Found the inhabitants totally regardless of cleanliness, in confirmation of which it is simply necessary to mention that at the end of one of the cothouses, a hillock of ashes lay studded with human excrement. The interior of some of them were so close and stinking that it was impossible to breathe in them. The south cothouses were all closed, the workers being out, but from what could be seen through broken windows they are something akin to those above referred to. The bothy, seen through a broken pane presented such a scene of filth and confusion, absolutely incompatible with the health, comfort and well being of any human creature.

. . . Called on Mr Adamson . . . his attention was especially directed to the filthy state of the cothouses and bothies and urged upon him the necessity of inculcating upon his servants to have a thorough cleansing of their dwellings, and to pay more attention to cleanliness in future.

With reference to the foregoing Report, the Medical Officer and Inspector venture in consequence of the unexpected amount of filth which they found existing both in the interior and exterior of farm cothouses and bothies to remark that there appears to be a considerable laxity on the part of the tenants and landowners in regard to the sanitary condition of their servants, some of whom acknowledge that they had actually never entered nor inquired into the state of their cothouses or bothies, and in reference to the latter, they being occupied solely by male servants, a supervision on the part of the masters is not only desirable, but if they could be convinced of the fact, a bounden duty. [Scoonie PBM 15.7.66, in *Fife Regional Council Records* 6/52/1]

AUCHTERDERRAN'S FEUARS AND THEIR USE OF THE MINE WELL, 1867

As part of its cholera precautions Auchterderran agreed to have Lochgelly's wells analysed by Dr Macadam (a chemist from Surgeon's Hall). The first extract formed part of his report. The second is a petition submitted by eighty-nine miners. When the Board heard that Auchterderran was not intending to close the wells it sent Dr Littlejohn to inquire and the last extract is taken from his report.

The employment of either of the first series of waters, viz, Nos II, IV, V, VI, VII, VIII for domestic purposes, such as drinking or cooking is dangerous, and therefore the use of these waters for such should be instantly prohibited.

The second series of waters, viz, I, III and X are less impregnated with sewage matters, but are still sufficiently so to confer unwholesome properties upon the waters, and I would also recommend the disuse of these waters for all dietetic purposes.

The water IX is much less contaminated than either of the other waters, and whilst at ordinary times, the small proportion of impurity contained therein, might not materially affect the quality of the water, yet I am of the opinion that at the present season, it is not desirable that such should be present in domestic waters, and accordingly that water in question should only be used in the absence of the purer and better water.

Taking all these observations into consideration I am decidedly of the opinion that the habitual employment of the waters under examination by the town of Lochgelly will predispose the inhabitants to Choleraic attacks and I would recommend that immediate steps be taken to supply purer water by cart or otherwise. The better water should alone be employed as a beverage, for cooking purposes, and in the baking of bread. [Report of Dr S. Macadam, dated 8.12.66, Auchterderran PBM 18.12.66, in *Fife Regional Council Records* 6/5/2]

We the undersigned Feuars and other inhabitants of Lochgelly having learned that the Chairman of the Parochial Board of the parish of Auchterderran has called a Special General Meeting of said Board to consider the sanitary state of Lochgelly and particularly the water supply thereof and having observed that an attempt was recently made to condemn the principal wells in Lochgelly apparently with the view of shutting them up, beg leave respectfully to request that the Board will not sanction any proposal or take any steps to condemn or shut up said wells as they are the only sources from which the inhabitants can obtain a supply of water. Some of these wells and particularly the Mine Well have been used by the people of Lochgelly from time

immemorial and the water has been found by long experience to be wholesome. [Minutes 7.2.67, in *ibid.*]

. . . As a result of my inspection, I can fully corroborate the statements of the three local doctors as to its imperfect sanitary state. The drainage is very defective, and nuisances abound, in the form of middens, piggeries and privies. In addition the gardens of the cottages are heavily manured, and the soil must be saturated with decomposing animal matter, accounting for the startling results obtained by Dr Macadam in his analysis of the various wells.

The well to which the villagers flock is the 'Mine Well', compared with which, for the purposes of water supply, the other wells are insignificant. This is the well of the village, and the chief source of water for drinking purposes. It is of no great depth, and opens directly into one of the old coal-pits, about 70 or 80 feet below the summit of the [village] hill. It drains an area of which seven-eighths of the population of the village live. Although the season of the year was not unfavourable for a supply of water, at the date of my visit the overflow of the well was scanty. The source of contamination is easily seen. The drainage of parts of the village higher levels, as at South Street, loses itself in the garden ground behind the houses, and from the defective state of the drainage in the very street (the principal one of the village) in which the 'Mine Well' is situated, it is manifest that sewage must find its way in large quantities into this well. These dangers have not escaped the notice of the committee of the Parochial Board, and certain measures, in the shape of intercepting drains, have been proposed in their Report of 7th February.

I carefully considered these proposals on the spot, and came to the conclusion that they would not provide a suitable remedy. I have no hesitation in expressing my opinion, that the source of the water supply for this well must always be impure. It is a fact there are only two water-closets in the village, and the refuse of a population numbering nearly 2,000 must be thrown on the surface. And we have already stated that a large proportion of this population live on the drainage area of this well. But even were Lochgelly to be put in a good sanitary state – were the drainage,

for example, to be satisfactorily completed, and the various nuisances already specified to be abolished – so long as the soil remained soaked as it is with sewage, and manured yearly, this 'Mine' well must contain a large percentage of impurities, and its use must be attended to with danger, more especially when cholera and allied disorders are present in this country. [Report of Dr Henry D. Littlejohn on the Water Supply of Lochgelly, dated 28.2.67, in *Annual Report of the Board of Supervision, 1867*. (P.P. Vol. XXXIII, 1867-8) App.(A), No.16, p.29-31]

TRANENT: ITS UNWHOLESOME AND DANGEROUS WATER SUPPLY,
1866-72

As in many other parishes Tranent responded to the 1866 cholera crisis by undertaking an analysis of its water supply. The first extract on Cockenzie's wells is from a report by Dr Macadam. Tranent, however, could not agree on the necessity of introducing an alternative supply and only two wells were closed. The second extract is from the Visiting Officer's report of 1870 and the third, the resulting parish survey. Apart from extending Tranent's water supply (from a disused mine) little appears to have been done and the fourth extract indicates the Board's response. Tranent continued to disagree over Cockenzie's wells and the last extract is from a further Board minute on the parish's problems. Later, filtered water from a nearby burn was introduced.

Cockenzie's Wells

The above waters contain an excessive proportion of saline matter and are grossly contaminated with organic matter which are indicative of the presence of the products of decomposition of animal refuse matter such as may be obtained from house sewage. I am decidedly of opinion that either or all of these waters are unwholesome and dangerous, either when taken as a beverage, or when employed in cooking or baking. The habitual use of such waters will influence deleteriously the general health of a community and will predispose the individuals to Choleraic attacks. I would therefore recommend the Local Authority of Cockenzie to cause the immediate disuse of these wells for any dietetic purposes; and considering the hardness of these waters,

and their consequent unsuitability for washing operations I consider that their employment for such might also be advantageously dispensed with.

The Local Authority of Cockenzie should at once proceed to supply by cart or otherwise a purer water to the inhabitants of the village and such better water will probably be obtained from a running stream in the neighbourhood. No time should be lost in organising a better water supply as at the present seasons the employment of either of the well waters under examination, for domestic use is dangerous. [Report of Dr Stevenson Macadam, Surgeon Hall Laboratory, Tranent PBM 22.12.66, in SRO CO7/20/3]

The Visiting Officer's Report

1. The attention of the Local Authority should be directed to the defective drainage, water supply, scavenging and privy accommodation of the town portion of the Parish.
2. Under Section 60, Public Health (Scotland) Act 1867 householders should be prevented from harbouring lodgers without first obtaining the approval and registration of their houses. [Report of Malcolm M'Neill, Visiting Officer, dated 2.4.70, Minutes 30.4.70, in *ibid.*]

The Parish survey, Tranent District

- 1st. Murrays Close in a foul and filthy state from not being cleaned out daily.
- 2nd. Johnston Smith's property, the drain leading from it to the Main Street, is completely choked up for want of proper declivity and sufficient outlet.
- 3rd. Drain at Ed. Dickson's property said to be choked up, would require to be opened up.
- 4th. Privy at Royal George in a foul and filthy state, the drains leading from it to the street is choked up and the houses of the tenants generally dirty and offensive.
- 5th. Drain in Back Street leading to common sewer needs repair.
- 6th. Marion Wilson's lodging house and other houses of the same kind should be declared unfit for the purpose.

7th. Margaret Mack and Rose Donahod's (paupers) houses in a most offensive state; there being no furniture of any kind in the one and only a bed in the other in a dirty and loathsome state, with bed clothes. She has five children staying with her. These three houses are situated in Dow's bounds in which there are neither gutter or drains to carry off the refuse water from the houses.

8th. Drain at Mrs Black's property choked up, should be cleaned out.

9th. Mr Walter's property choked up, should be cleaned out.

10th. Gutter at Thos. Neill's from its construction being too narrow and having no declivity would require to be reconstructed in order to carry away the superfluous refuse water of his and adjoining tenants.

The other portions of this district with the exception of Dr Vallance's where a gutter is at present forming seemed sufficiently supplied with drains and channels to carry off the water.

11th. The main gutter and strands are in a foul and offensive state from not being thoroughly cleaned and swept daily.

Tranent District continued.

1st. Drain leading from Mr Williamson's property on the Ormiston Road has no outlet except into the Loch, which cannot but pollute the water which is used for watering horses; to prevent this, Mr Williamson will require to form another outlet for the refuse water of his tenants.

2nd. The Wellwynd. The middle of the road would require to be raised and at least a side gutter with curbstone formed on one side of it.

3rd. New Road. No gutters whatever, merely a stripe formed by the inhabitants pouring their water into it, from the situation of Archibald and Thomas Neill's properties which are at a considerable height above the road; a parapet wall would require to be built in front of them; and stairs made leading to the gutter, so as to enable the inhabitants to supply their water into it, which they are at present throwing out of their doors having nowhere else to empty it into.

4th. The privies in Tranent tolerably clean, but too few of them. Two additional would be required and the site thereof fixed on by the Commissioners.

District of Elphinston

1st. School and Public privies in a very foul state with the exception of the one used by Durie and Nisbet's workmen, which was in a tolerably clean state.

2nd. There appeared to be no gutters whatever, and the drains without exception were all choked up. [Report by Dr I.H. Watson, Medical Officer, North District, and H. Murray, Sanitary Inspector, in *ibid.*]

[After some correspondence with the Board, the survey was continued.]

Tranent District

[1st. and 2nd. entries restate part of earlier Report]

3rd. Anstruther Smith's property in the New Row, the Scavenger should call every day, the drain between it and Mrs Rodger's choked up.

4th. Well for watering horses at the end of the New Row should be causewayed in front and a channel led into the heugh.

5th. Mrs Forsyth's property, a pig in too close proximity, back court in a dirty state, necessary and dung pit too near house.

6th. Strand in front of Mrs Trainor's Lodging House should be repaired.

7th. Wellwynd from top to bottom in a dirty state, the strand leading past the back of the Co-operative Store choked up, and in a foul and filthy state (Mr Cornwall promised to clean it out).

The insides of the houses in Mr Glass' property should be washed out with hot lime.

The drainage behind Mr Nisbet's property is insufficient as also Mr Black's . . .

From the present state of the water supply in the Town of Tranent there is every reason to apprehend epidemics as the inhabitants are prevented from having what is as necessary to them as their food viz. a sufficient supply of water. [Report by Dr D. McGregor, Medical Officer, South District, Minutes 16.8.70, in *ibid.*]

Tranent District ctd.

1st. Drain at Mr Johnston Smith's property, choked up and the smell arising therefore obnoxious.

2nd. William Neill's property, choked up and the smell arising therefore obnoxious.

3rd. Mr Drummond's property adjoining the Coal Neuk, no roans, in consequence of which the houses are in a damp state.

4th. The property belonging to the late Mr William Leslie might be kept more cleanly.

5th. Mr Clark's property, one or two houses are in such a ruinous state, as to be uninhabitable and ought to be condemned as such.

6th. The common sewer opposite Mr Fowler's property should be cleaned out and properly repaired.

7th. The property belonging to the late Mr Seymour's representatives, is tolerably clean with the exception of the privy, which was in a very dirty state and would require to be cleaned every day.

Cockenzie District

1st. Gardiner's Close, strand leading to Main Street in a very dirty state and would require to be re-causewayed in order to give it a proper declivity. Peter Robertson's house unfit for the residence of a human being.

2nd. Close next Barclay's Inn in a very dirty state from an accumulation of Clam Shells and other filth, there is a drain leading from the Streets choked up with the shells, and from which a most offensive effluvia arises which cannot but be injurious to the health of those living in it.

3rd. The accumulations of clam shells etc., ought to be removed to a distance from the Village, otherwise disease may originate.

4th. Mr Gourlay's property, from the confined and dirty state is almost unfit for the habitations of human beings.

5th. Mrs Palmer's property may be put in the same category as the above.

6th. The strands in the village should be properly cleaned daily.

7th. The water supply to the Town of Tranent is grievously deficient and gradually becoming less. [Report by Dr I.H. Watson, dated 1.8.70, in *ibid.*]

The Loch of Tranent

Agreeable to the request of the Parochial Board of Tranent, we the undersigned certify we have this day examined the Loch at the

east end of Tranent, and for the following reasons do not believe it injurious to the inhabitants in the immediate proximity.

1st. We never have had more disease in that locality than in any other part of the Town.

2nd. We had at least four times the amount of fever in the lower part of the Town before it appeared at the upper part.

3rd. The fact of seven cases existing in Mr Cadell's Square might be a mere coincidence referable to other causes than the Loch, for instance, there is an ashpit at the north west corner of Garden, at the back of George Kinnaird's house, which is in a most disgraceful condition, as the ashpit which appears to be common to the Square, and from the decomposition of vegetable and faecal matter gives forth effluvia which if not directly the cause of fever, is to say the least of it insupportably disgusting. We cannot help thinking that some better arrangement might be carried out in the Square, both for depositing effete matter, and for its more regular removal, especially in the Summer Season.

4th. There are no emanations of noxious gases from the Loch at this date, and we cannot conscientiously recommend it to be closed as a nuisance.

5th. Doubtless George Kinnear's family was first attacked near the Loch, but Mrs Charles and Mrs Stevenson evidently caught the infection through attendance on the Kinnears.

6th. While we had twenty nine cases of fever and two deaths in the lower part of the Town, we had only seven cases and one death at the upper part.

As there is at present so very little water in the Loch, we do now think this is a very favourable opportunity for deepening it, for a twofold reason.

1st. There would be a larger supply of drinking water for cattle, and secondly a better guarantee for a supply of water in the event of a fire taking place in the town. [Report of Dr McGregor and Dr Watson, dated 1.8.70, in *ibid.*]

[Board's first minute]

Call upon the Local Authority to take immediate steps to remove the several nuisances specified in the Report by the

Medical Officer and Sanitary Inspector. Direct special attention of the Local Authority to Sections 16(a), (b) and (c); 24 and 25 of the Act.

Further call upon the Local Authority to take measures without delay to provide a supply of wholesome water for the inhabitants of Cockenzie, Port Seaton, Meadowmill and Elphinstone.

The Board recommend the Local Authority take steps at once to form these several villages into special water supply districts in terms of Section 89(5), and to cause their neighbourhood to be surveyed by a competent engineer with reference to suitable resources of water supply. [BS PHMB(CH) 14.12.71, in SRO HH 25/6]

[Board's second minute]

Call upon Sanitary Inspector to report to further steps taken and their results on 1st March next.

Inform Local Authority that in town and villages where the whole soil is charged with animal matter from houses and highly manured gardens, experience has shown that the well water cannot in general be restored to a state of purity by any improvement of sewerage or abatement of surface nuisances. [Minutes 18.1.72, in *ibid.*]

DYSART: THE INSPECTING OFFICER ON ITS DISGUSTING HABITS, 1870

In early 1870 Malcolm M'Neill, one of the Board's newly designated Inspecting Officers visited Dysart. The first extract formed his report, with the second and third from subsequent parish minutes. The fourth extract is from the Board's response. Later Dysart agreed to establish special drainage districts.

The Town portion of the Parish which includes Dysart, Pathhead, Sinclairtown and Gallatown, is amply supplied with water but very imperfectly drained and carelessly scavenged, nuisances abound and there appears to be no systematic effort to procure their removal or to prosecute their authors.

These remarks apply generally to the whole but especially in those portions called Gallatown and Sinclairtown, of which the

former presents within a small compass more sanitary defects than I have observed in any town or village in Scotland.

The habits of the population seem to be disgusting; the only means of disposing of filth of every description is to cast it from the doors of the houses, the side gutters are thus constantly foul, manure is freely accumulated sometimes by the roadsides, there is no provision for the inspection of privies.

The West Row in Gallatown is particularly unfortunate; the roadway here is unmade and in many places my wheels sank nearly to the axle in soft mud composed evidently of earth and liquid sewage.

Unless the attention of the Local Authority is seriously directed to the disgraceful condition of the Parish, I shall anticipate at the next visitation of cholera, a considerable mortality. As draining operations must be undertaken with deliberation, an efficient body of scavengers under energetic superintendence should be engaged forthwith and the inhabitants should be compelled to remove their manure at short intervals and to abandon their filthy habits. [Report by M. M'Neill dated 30.3.70, Dysart PBM(LA) 28.4.70, in *Kirkcaldy District Council Records* 1/8/12]

With reference to my remarks on the absence of systematic inspection of privies in the Parish of Dysart, I have to inform you that the duties of the Inspector of Poor are such as to render it impossible that he can pay regular weekly visits of Inspection to every Public and private privy in the Parish, the force of scavengers is also insufficient for this purpose. [Letter of M. M'Neill dated 9.4.70, in *ibid.*]

The Sanitary Inspector stated that in his opinion Dysart and Pathhead were fairly scavenged, but many of the Inhabitants persist in laying down, in a loose manner on the streets, ashes, refuse and other filth after the manure carts have completed the work of removing all such nuisances.

Gallatown and Sinclairtown are not so regular, nor so well scavenged and the gutters and refuse, after being collected, and in the absence of a Manure Cart, frequently trodden down.

The portion of West Gallatown to which the Reporter evidently refers is much improved by the removal of Middens and Ashpits, and were a proper water channel laid down in the East and West Row to convey the water or sewage from the premises, it would very much improve the sanitary conditions, as well as the road in that locality.

The Gutter along the Turnpike or Main Road at the North End of Long Row Sinclairtown, as well as at Hawklymuir, Parkhead and West Gallatown should be causewayed.

The Local Authority having considered the Report of Mr M. McNeill and the statement of the Sanitary Inspector relative thereto, instructs the Clerk to state for the information of the Board of Supervision that the question of Drainage has already been contemplated and will receive due consideration, as well as the other sanitary defects reported on by Mr McNeill.

The Local Authority would beg to submit, however, that inasmuch as Sinclairtown and Gallatown are situated on a large area of ground and thinly populated, bearing more of the characteristics of country village than of a town, they do not require to be so frequently scavenged. [Minutes, in *ibid.*]

I have to acknowledge the receipt of your letter dated 30th ult. respecting Report by the Visiting Office of the Board of Supervision on the execution of the 'Public Health Act' in the Parish of Dysart which I have submitted to the Board and I am directed to point out to the Local Authority that it is their duty to remove every nuisance as defined by the Act, wherever situated in the Parish. [Letter of J. Skelton, Board Secretary 11.5.70, Minutes 12.5.70, in *ibid.*]

KETTLE: ITS WELLS AND THE INHABITANTS' IRRELEVANT VIEWS, 1871

The first extract is from the Inspecting Officer's report on sanitary conditions in Kettle. The parish, although it appointed a sanitary inspector, refused to take any further action. The second extract is the Board's response, the third is Kettle's reply and the fourth, the Board's clarification. Kettle subsequently approached Cupar for access to its water supply.

There is no sanitary inspector and no scavengers are employed in the Village. The water supply is derived entirely from wells: in some of which still in use the water has been shown by analysis to be of bad quality. [Report of Malcolm M'Neill, dated 22.11.70, Kettle PBM 24.12.70, in *Fife Regional Council Records* 6/12/1]

Call upon Local Authority immediately to prevent further use, as a beverage or for dietetic purposes, of the five waters in Kettle and Kettle Bridge ascertained by Dr S. Macadam to be unwholesome, and to provide in lieu of them a supply of wholesome water for the use of the inhabitants.

It has been conclusively proved by analysis that the supply of water referred to is of a dangerous quality, and the Board cannot incur the responsibility of permitting or sanctioning its further use. They would be guilty of failing to discharge their statutory duty, if they did not insist upon the proper remedy being applied.

It is irrelevant to say that the inhabitants or a large portion of them, or even that the Local Authority themselves are satisfied with the present supply. In a matter of this kind the paramount consideration is the safety of the people, not only in the villages where the water supply is impure, but in the surrounding districts to which epidemic disease might spread if promoted by the use of unwholesome water in the villages. Against such a consideration as this, the cost of providing a supply of pure and wholesome water is of no weight. In many other places the inhabitants have cheerfully submitted to the requisite assessment and the Local Authority of Kettle must use the powers of assessment conferred upon them by the Act, in order to discharge their duty.

As regards the immediate supply of water for the villagers' use when the deleterious wells have been shut up, the Local Authority must provide it by conveying it in water casks or in some other temporary manner until they have brought in a permanent supply in terms of the Public Health Act.

The Board call upon the Sanitary Inspector to report, at the end of 14 days from receipt of this Minute, what steps have been

taken to comply with the Board's directions in this matter. [BS PHMB(CH) 28.9.71, in SRO HH 26/5]

Unanimously agreed to warn inhabitants against using the water for drinking or dietetic purposes of the several wells referred to and respectively known as McGlashan's Kettlebridge, Banktonpark, Mr Edies and J. Grieves well, Kettle and the Factory well at Rumdewan and instructed Inspector to issue large posters to this effect. [Kettle PMB 9.10.71, in *loc. cit.*]

The Board cannot consider that a mere notification by the Local Authority forbidding the use of the unwholesome wells is a compliance with the directions of the Board to prevent the use of these wells. If the wells referred to are not shut up, there can be no security that they will not continue to be used for dietetic purposes. [BS PHMB(CH) 18.10.71, in *loc. cit.*]

THE IGNORANT AND RECKLESS USERS OF BEITH'S PUBLIC WELLS, 1872

The first extract is a minute passed by the Board on Beith's water supply. The second indicates the Parochial Board's response, the third and fourth, the Board's subsequent minutes and the last two Beith's reply. After being warned of possible Court action, Beith proceeded to supplement its remaining wells from sources outside the town.

Looking to the statements made to the Board by the Police Commissioners of Beith on the 1st November 1867 as to the deficiency and impurity of the water supply and to the terms of Dr Wallace's Report of 27th December 1870 upon the water of the wells, the Board are of the opinion that the wells, Nos. 3, 4 and 6 should be shut up as soon as possible, and that the wells 1, 2 and 5 cannot be relied on for pure and wholesome water. [BS PHMB(CH) 19.1.71, in SRO HH 26/4]

They the Sub-Committee on the wells had had 18 meetings since their appointment in October last, and that the amount expended on wells during that time was £92. 15s. as per statement produced. The well has been completed on the Glebe lands,

outside of the town and a pipe has been conducted from it, to a fountain in Shand Street, and is now in full operation with an abundant supply of good water. The rock in the other two wells had turned out to be not so near the surface as was expected from the two bores put down, and it may be necessary to try out at new places on the lands of Cumnock or Hill of Beith to take the place of these two wells which will involve a greater cost for conducting pipes . . .

Mr Hugh Crawford of Cumnock moved . . . that these wells Townhead, Braehead and Wilson Street, Nos 3, 4 and 6 be shut up for dietetic purposes, according to the orders of the Board, and remit to the General Committee of the Board as the Local Authority, to see that this is properly done. On. . . being put to the vote, 38 voted for and 17 against. [Beith PBM(LA) 16.2.72, in ADA CO3/26/7]

Call upon the Sanitary Inspector at the end of a month for this date how far the wells ordered by the Local Authority to be closed for dietetic purposes have ceased to be used for such purposes. Ascertain whether the wholesomeness of the water obtained from the new well sunk in Glebe Lands has been tested by analysis. [BS PHMB(CH) 28.2.72, in SRO HH 26/6]

Intimate to Local Authority that the Board having considered the Report of the Sanitary Inspector are of the opinion that it is the duty of the Local Authority without further delay to shut up the wells referred to entirely. In this case, as in others, it is found that ignorant and reckless persons will even after warning, persist in using unwholesome water for dietetic purposes, and it is as much the duty of the Local Authority to protect the health of such persons as that of those who are better instructed and more careful. [Minutes 22.3.72, in *ibid.*]

After due consideration, it was moved by Mr John Kerr that with all due respect to the opinions of the Board of Supervision this Local Authority do not feel warranted absolutely to shut up the wells referred to, there being many purposes other than dietetic for which they are well fitted and largely used. [Beith PBM(LA) 29.3.72, in *loc. cit.*]

The Local Authority are not in a position to say definitely how far the wells referred to have ceased to be used for dietetic purposes, but from observation and report are aware that the new well lately approved by the Board of Supervision is very extensively used by those who were formerly dependent on the closed wells for their supply [21.5.72, in *ibid.*]

THE INSPECTING OFFICERS AND INTRODUCING WATER INTO LOCHGELLY, 1870-81

The extracts are from three Inspecting Officer reports on Auchterderran, the latter two also enclosing the standard schedule of questions used. In 1879 the parishes of Auchterderran and Ballingry secured a Public Works loan for the introduction of piped water from Lochornie Burn. Lochgelly attained burgh status in 1877.

It appears to me that the subject of water supply in the village of Lochgelly demands immediate attention.

At the time of the last outbreak of Cholera in the district Dr Macadam reported on the water of the ten principal wells from which the village is supplied as follows; Binniebrae North, Trotter Row, Mine Well, Grainer Square, Binniebrae S.E., Knockhill, are grossly contaminated with sewage matters and are decidedly unwholesome. Binniebrae West, Rotten Row, J. Gray are contaminated with sewage to a less degree but are still unwholesome. Laucherhead is slightly tainted with sewage matters.

He therefore advised the immediate closing of these sources of supply. On this subject also Dr Littlejohn states his opinion that no efforts on the part of the Local Authority whether by drainage or alternative otherwise will materially affect the character of the water.

Under these circumstances I learned with surprise and regret that the wells in question are still in use and that the effect of the drainage and other sanitary measures which have been undertaken by the Local Authority has not been determined by any subsequent analysis of the water.

The county being covered with snow at the time of my visit I was unable to ascertain the results of the efforts which have been

made by the Sanitary Inspector to improve the cleanliness of the village. [Report of M. M'Neill, dated 28.2.70, Auchterderran PBM(LA) 10.3.70 in *Dunfermline District Council Records* 1/3/1]

Parish of Auchterderran County of Fife Local Authority of Parish

Date of Visit: 1st October 1873

Name of Sanitary Inspector: John Small

Date of Sanitary Inspector's appointment: 1868

Salary of Sanitary Inspector: £5

Has Sanitary Inspector any other occupation? and if so, what?

Inspector of Poor, Kinglassie and Auchterderran, Collector, Registrar

Clerk of School Board and Parochial Officer in Kinglassie

Has Sanitary Inspector any assistance? and if so, state nature and cost of such? Help from Constabulary

Dates of last two previous reports: 28th February 1870

Population: 4017

Are Common Lodging Houses registered: Yes

Number of such: Two

Are Common Lodging Houses systematically inspected? and if so, how often has such been inspected in past 12 months? Nightly by police and twelve times a year by Sanitary Inspector

Has Hospital Accommodation been provided under Section 39. If so in what manner? No

Has any special District been formed for water supply or drainage? Yes. If so state results: Name of District. Lochgelly. Population: 2400. Water or drainage. Both. Operation undertaken. Survey completed.

Cost of operations: £4000 for water.

Number of prosecutions of all kinds under the Act since last visit: None.

Report

1. Negotiations are in progress with the Parish of Ballingry with a view to the joint introduction of water into the villages of Lochgelly and Lumphinnans.

2. The Local Authority should endeavour to provide hospital accommodation for infectious diseases either alone or in

conjunction with neighbouring parishes. [Report of M. M'Neill, dated 11.10.73, Minutes 24.11.73, in *ibid.*]

Parish of Auchterderran County of Fife

Local Authority of Lochgelly Burgh

Date of visit: 17th January 1881

Name of Sanitary Inspector: William Herd

Date of Sanitary Inspector's Appointment: 1878

Salary of Sanitary Inspector: £5

Has Sanitary Inspector any other occupation and if so, what? No

Has Sanitary Inspector any assistance and if so, state nature and cost of such? No

Population: 2600

Are Common Lodging Houses registered? Yes

Number of such: 1

Are Common Lodging Houses systematically inspected? and if so, how often has each been inspected in the past 12 months?

Yes. Present Lodging House was licensed in December 1880

Has Hospital accommodation been provided under Section 39?

If so, in what manner? No

Has any Special Drainage District been formed for water supply or drainage? If so, state results

Name of District: Lochgelly Burgh

Population of District: 2600

Water or Drainage: Water

Operations undertaken: Water is being provided

Cost of operations: Estimated cost £8000

Number of Prosecutions of all kinds under the Act since last visit:

Section 60. Result: Convicted

Report

Water is now being introduced into the village. The drainage is questionable, and may be taken into consideration after the introduction of the water. A written sanitary report should be made by the Sanitary Inspector at least half yearly after careful inspection of the entire parish. [Report by A. Campbell, dated 29.1.81, Lochgelly PCMB 14.2.81, in *Dunfermline District Council Records*]

BLANTYRE: ITS SANITARY EVILS, 1876

During 1873 the Visiting Officer called the Board's attention to Blantyre's sanitary condition. After failing to persuade the Local Authority to take its duties more seriously, Dr Littlejohn was sent to inquire and the following is an extract from his report. Subsequently the Board, using the threat of Court action, insisted that the drainage and water supply be improved.

I visited in succession, Blantyre Works Village, Stonefield, Dixon's Village, Barnhill, Braehead, Hunthill, Blantyre Village, Causeystone and Auchenraith. The first circumstance that attracted my attention was the state of the surface-drainage. (a) The condition of the roads, although after some days of continuous dry weather, was very bad. The footpaths were not properly maintained, and the gutters were generally absent, or so filled in with mud as to be practically useless. (b) In the neighbourhood of dwellings these sanitary evils were greatly increased, as all the sewage and liquid refuse from the houses was generally thrown on to the road in front, and there generally it lay, where, from the total absence of fall, it could not pass to a lower level, polluting the atmosphere as it lay. (c) On the other hand, where, as at Barnhill and Braehead, from the arrangement of the houses, it was easier for the tenants to throw their slops to the back, this fluid-refuse was, in many instances, allowed to flow over the bank behind, spreading as it went, and gradually losing itself in the soil, or ultimately reaching the Calder. The second matter to which I directed my attention was the character of the water-supply – which consists mainly of wells, in nearly every case placed in dangerous proximity to manure heaps and privies. It is also defective in quantity. This was a general complaint. At Stonefield, I saw villagers coming from a distance to draw water from a spout which in summer is often dry, and the water of which is contaminated at a farm a little higher up, as the farm utensils are washed in it. Nothing could be worse than the surroundings of the water-supply. A large quantity of sewage from the houses in Stonefield at a higher level passed into a pool formed by a small burn and the water from this spout. I was informed by the villagers that in summer here was most

disgusting – that the water itself, if present, was equally so. The water-supply at Barnhill, supplied by the Nether Well, was almost equally objectionable, the ground in its immediate neighbourhood being soaked with sewage, which a slight amount of supervision could easily have diverted. Nowhere was the very faulty state of the surface-drainage more noticeable than at the Auchenraith Check-bar, where a large quantity of sewage had collected by the wayside, and from some impediment to its free escape had become dammed up, forming a collection of fluid which tainted the air at the time of my visit, although the weather was cold.

Drainage – The parish of Blantyre, in a large portion of its area has lost the character of a rural parish, and is fast becoming a very populous township. The population in 1861 was 3002; in 1871, 3472; and from a census which was made by the police a short time ago, the population was found to be upwards of 7000. Within the last few years mining villages have been built, none of which are to be seen on the Ordinance Survey. For example, Dixon's Village consists of 55 blocks, each block containing four houses. For this population there is only one well; and those living farthest from this source of supply betake themselves to a burn, the water of which is contaminated higher up by the entrance of sewage. Again, the liquid refuse passes along the front of the houses, and finds its way toward the burn. Before actually reaching it, the refuse is interrupted by being passed into large cesspools of enormous size. The wooden cover of one of these was deficient, and the contents were seen to be decomposing rapidly. These cesspools were in dangerous proximity to the town, and, from their position, I have no doubt, contaminated it by overflow and soakage.

Water Supply – I am also of opinion that it is imperatively necessary that a suitable and constant supply of pure water should be introduced. The well water, at present largely used is, to say the least, of most doubtful quality. In Dixon's Village, just alluded to, the proprietors propose to introduce a large quantity from some pits in the immediate neighbourhood. Such an addition is urgently required. The source, however, is liable to contamination, and the quantity to great diminution, should any

deeper pits be sunk in the neighbourhood. When one sees such a large population only supplied with one well, it comes to be a question whether the Legislature should not interfere, and prevent the erection of houses under a certain rental until satisfactory evidence has been afforded that a sufficient and wholesome water-supply has been supplied.

In conclusion, I beg to express my opinion, that the present juncture is a most important one in the sanitary history of this important parish. It is rapidly being built upon. I observed houses of good proportions being erected in almost every quarter; and those which were first inhabited, as at Stonefield, opposite the new school-house, were discharging their sewage into a quagmire. Allow a few years to elapse, and the building operations to progress, it will become matter of great difficulty to drain efficiently without incurring an enormous expense; and I need hardly add, that this rapidly-increasing population imperatively demands an abundant supply of wholesome water. [Report by Dr H.D. Littlejohn on the Sanitary Condition of Blantyre, dated 5.1.76, Reprinted in *Sanitary Journal for Scotland*, Vol.1, 1876-7, pp.16-17]

MIDCALDER'S RATEPAYERS AND SCAVENGING AMONGST THE POORER CLASSES, 1878

In 1878 Midcalder suffered from an outbreak of typhoid and its Medical Officer complained about the poor state of the parish's streets. The first extract is from the Chairman's subsequent letter to the Board and the second its reply.

I would be obliged by your informing me if a portion of the assessment raised for sanitary purposes might be applied towards cleaning the streets of Mid Calder Village.

For many years a fatuous pauper acted as scavenger (the employment being beneficial to himself and the Parish) receiving 3s. per week, half-paid by the Parochial Board and half by the Road Surveyor. This man died in May last, since when no scavenger has been appointed owing to the opinion of some of the ratepayers – 'That householders in a country village are bound to

remove dirt, or whatever may be considered a nuisance, from the fronts of their respective dwellings' and consequently no scavenger's services are necessary.

The population of Mid Calder being too small – the Lindsay Act cannot be adopted – the better class of houses have drains, and ashpits and every convenience. Whatever dirt accumulates upon the streets is from houses occupied by the poorer class, who actually have nowhere but the street to place any rubbish upon. The space in front of their dwellings is public ground and does not belong to the proprietors of the houses, the generality of the titles specifying the measurement from the front wall backwards.

The small supply of water in the village would cause any increase of drains an evil instead of an advantage – the only way therefore to insure the streets being in that state of cleanliness and order so desirable is to have a scavenger.

I have therefore to request that you will be so good as to inform me if we are not authorised under the Public Health, Scotland, Act to employ a person for this sanitary purpose and as the Road Trustees are agreeable to pay as formerly, the burden on the Parish will be exceedingly small and no increase from that of former years. [Letter of Robert A.B. Tod, dated 10.1.78, Midcalder PBM 5.2.78, in *West Lothian District Library (Bathgate)* 2/2/3]

... I have to state in reply that the question has never been decided in a Court of Law, and different opinions have been expressed. But as the only other practicable course would be for the Local Authority in each case to prosecute the Authors of the nuisances that would arise if a scavenger were not employed, thereby entailing large expense on the Ratepayers, it appears to be for the interest of the Ratepayers that the Local Authority should employ a scavenger. [Letter of John Skelton, dated 28.1.78, in *ibid.*]

THE RATEPAYERS OF ST ANDREWS AND THEIR DETRIMENTAL WATER SUPPLY, 1879

The first extract is a letter sent to the Board by eleven ratepayers of St Andrews. The Board duly sent Dr Littlejohn to inquire, and the second

extract is from his report. The Council subsequently agreed to install extra filters.

We the undersigned residents and ratepayers of the Burgh of St Andrews beg to call the attention of the Honorable Board of Supervision to the inadequate and faulty supply of water within this Burgh, which is highly detrimental to sanitary purposes and domestic convenience, and to request that your Honorable Board will be pleased to take the matter into serious consideration, and take such steps as you may deem to remedy the fault. [Letter of 31.2.78, St Andrews TCM(PC) 13.1.79, in *St Andrews University Library* B65/13/6]

. . . I am certain that at the west end of the town, especially in houses of more than one storey, there was not only a deficiency of water, but that when it was turned on in the mains, it did not rise to the cisterns on the upper flats, evidently from deficiency of pressure. This led to great inconvenience as in modern houses, to provide a supply of warm water in all the flats, it is necessary that the cistern should be at the top of the house, and in addition there was great risk of the kitchen boiler exploding from want of pressure. To obviate this risk additional inconvenience was occasioned by the necessity (to avoid accident) of putting the fire out in the kitchen grates. On all sides in the course of my inspection of individual houses, I had strong representations made to me as to this, and as the prosperity of St Andrews depends (firstly) on strangers attracted by its many advantages, to settle there as permanent citizens; secondly on summer visitors who occupy the lodging houses scattered throughout the burgh, the higher priced ones being situated in the west end, where most complaints are met with; and last and not least on numerous pupils and students who attend the various schools and the University, (in many instances large boarding establishments exist) it can easily be seen that any scarcity of water supply must act injuriously on the interests of the Burgh. From all these three classes complaints were made to me on the subject. But, not only is the water supply defective in quantity, it was urged again and again in my presence that the filtering appliances must be

defective, as the water was, especially after rain, delivered with a deep colour. Lastly the medical practitioners, without one exception, not only endorsed these two complaints, but stated that, in their opinion, the water, besides being defective in quantity and filtration, contained also objectionable ingredients of an organic nature which operated injuriously on the health of the community. Under these circumstances I considered it my duty not merely to collect evidence as to the character of the water supply in the town itself, but also to visit the gathering ground, the collecting reservoirs, and the filters. The gathering ground consists in great part of cultivated land, and as the refuse of adjacent farms also reaches the burn, which is the source of supply, my suspicions were at once aroused as to the constituents of this water supply. In addition the filters were deficient in size, and it was easy, after inspecting them, to account for the complaints as to the colour observed in the water after rain. For the purpose of analysis I took two specimens of the water supply of St Andrews. 1st. From the burn just as it enters the pipe which conveys the water to the reservoir. 2nd. From a tap of a newly erected house in the centre of St Andrews. I sent these samples, without any indication as to their source, to our City Analyst and . . . Mr King's Report . . . clearly shows that the water in question cannot be regarded as a good potable water, containing as it does a dangerous amount of objectionable organic matter. I was startled at the results of this analysis and I felt that were I to submit my Report to the Board, with Mr King's opinion of the character of the water supply, and were the Report published as in all probability it would be, such a mistrust of the healthiness of St Andrews, as a summer resort, would be occasioned as could not fail to operate most injuriously on the material interests of the ratepayers of the Burgh. It is well known that let a watering place once acquire a bad name, it takes years, notwithstanding the best directed efforts of the Municipal Authorities for it to regain its reputation. Accordingly I have delayed reporting to the Board, expecting, from the prevailing low temperature, and the abundant rain fall, that the injurious effects of such a water supply would be greatly mitigated, and that the only inconvenience would be the effect of the imperfect filtration. I have no doubt that

two sets of objections may be urged against the advice I am about to give. The one is, that looking to the past sanitary history of St Andrews, there have been of late years no marked outbreaks of such diseases as generally depend on an impure water supply. But on this point the experience of the local medical men is to the effect, that while there has been no great mortality from such diseases, still there is a constant presence of sore throats, and obscure febrile conditions, which give anxiety to the medical attendant as they are attributable to one well recognised cause, and as such ailments only require the introduction of a stray case of typhoid and diphtheria from without, to give rise to the appearance of these diseases in an aggravated form, I need hardly remark that it argues something very defective in the sanitary arrangements of St Andrews, with its free exposure and excellent situation, when there is such a consensus of medical opinion. The second is that the Local Authority is aware of a considerable loss of water at their reservoirs, and that they are taking steps by the laying of a fresh and larger pipe to render this water available for ordinary supply. I saw this pipe being laid. While water in sufficient quantity may be brought by this means into St Andrews the filters remains as defective as ever, and of course the character of the water supply remains the same as indicated in Mr King's Report. After giving the subject my best consideration, I beg to suggest for the consideration of the Board, that the Local Authority be called upon to cause a survey of the neighbourhood to be made by a competent water engineer, who should report on the available streams which are as yet unappropriated. It is a truism to state in the present day that an abundant water supply is essential to the well-being of any community, however poor and unprovided it may be with sanitary appliances. But in a University town like St Andrews with a large amount of valuable buildings liable to suffer from fire, and with a population which depends mainly for its subsistence on the salubrity of the Burgh as a place of residence, the question of the water supply is one of paramount importance and should be dealt with by the Municipal Authorities in a decided and satisfactory manner. [Report of Dr Henry D. Littlejohn on the Water Supply of St Andrews, dated 29.7.79, in *ibid.*]

DUDDINGSTON'S WATER SUPPLY: THE COMMITTEE OF PROPRIETORS
ON UNNECESSARY EXPENDITURE, 1879-81

In 1879 one of Duddingston's proprietors complained about its poor sanitary condition. The first extract is the reply of a local committee of proprietors. Although the Board of Supervision sent Dr Littlejohn to inquire, Duddingston took the side of the proprietors and refused to implement his suggestions. Two years later, on complaint of another proprietor, a University professor, the Board again sent Dr Littlejohn to inquire. The second extract is from his report. Duddingston subsequently approached Edinburgh's Water Trust for an improved supply.

In the first place, I attended a meeting along with a number of other proprietors in the Parish Church called by you [the Inspector] on the 12th February last, when a committee was appointed, the Rev. Mr Paton Convenor.

We agreed to the suggestions made in a report you got from Messrs. Smith and Son, Portobello, who had inspected the drains. I myself saw from 12 to 15 openings made into the main drain all round the village and they were found to be all running well. I then issued a circular and sent to all the proprietors.

We then engaged a man to clean all the gutters and remove the ashes, etc. and clean the cesspools out once a week when Messrs. Smith and Son had put them in, which they did shortly after – 7 in number – and have given great satisfaction . . .

We, as residents, consider his complaints quite uncalled for, as there is no village in Scotland has a better supply of good water, nor a healthier one – on that subject I can speak for myself, family and a number of resident friends . . . The Committee of Proprietors will continue to do everything in their power for promoting the health of the village, but will not be dragged into unnecessary expense. [Report of Mr Henry Seaton, Treasurer of the Western Duddingston Committee of Proprietors, Duddingston PBM 28.8.79, in EDA]

On a former occasion at the instance of the Board, I reported generally of the Sanitary State of these villages and especially drew attention to the worst of cleansing observable and also to its deficient water supply. At my present inspection I found the

village on the whole cleaner, accumulation which I had formerly noted had been recently removed and in addition considerable improvement had been made in the surface drainage of the streets. The villagers, however, confided to me that during dry weather offensive smells came from the various gratings communicating with the drains. This was not to be wondered at considering the defective water supply so far as mere quantity is concerned. It cannot be too strongly impressed on Local Authorities that drainage and an abundant water supply must be combined and that to incur the expense of a system of drainage without at the same time securing a plentiful supply of water is a great sanitary mistake not to insist on the great risk to the community when it is exposed from the want of regular flushing of the drains.

At Duddingston the rainfall is the only water available for the purpose. This is quite inadequate and after a few days of dry weather the drains become a source of grave nuisance. In my former report I alluded to the difficulties experienced by the villagers in getting a supply of wholesome water. They have to depend on wells which in many cases, from the unwholesome character of the water, are unused, and other water having a better reputation has to be procured from a distance. That the water supply of this village is, generally speaking, impure from organic contamination of a serious nature is placed beyond doubt, not only from the private analysis obtained by Mr Beattie but also from the accompanying Report of Mr Falconer King, City Analyst of Edinburgh, to whom I have submitted specimens of four of the wells of the place. I entirely concur in the opinion expressed by Mr King – I would beg to recommend the Board urge on the Local Authority of the Parish the necessity of introducing a new and wholesome water supply and of restricting the use of these wells to gardening and to such domestic purposes as washing and there is no difficulty in indicating the proper course for the Local Authority to pursue. No suitable water supply is available within a reasonable distance and I have no hesitation in recommending that advantage should be taken of the Edinburgh Water Supply, the pipe of which en route for Musselburgh, etc., passes in the immediate neighbourhood of Cairntow Toll. [Report dated 4.5.81, Minutes 7.6.81, in *ibid.*]

THE CONSTANTLY RECURRING NUISANCES OF IRVINE ROYAL BURGH,
1884

In 1884 the Board was alerted by press reports to an outbreak of fever at Irvine and the first extract is its subsequent minute. The second, third and fourth extracts are from the resulting local survey and the fifth, from another survey taken after a proprietor had complained of the Town's piggeries. Later that year typhoid fever broke out.

. . . The attention of the Board having been called to the prevalence of Fever and the existence of sanitary defects in the Burgh, as alleged in the 'Glasgow News' and 'Irvine Herald' newspapers, the Board called for a copy of the Medical Officer's Report therein referred to. It would appear from these documents that in some respects, the execution of the Public Health Act has not been as energetic as it should have been. The Board would point out that whenever the Medical Officer or Sanitary Inspector reports a nuisance effective action should immediately be taken. It is quite right that, in the first place, the author of the nuisance should receive extra-judicial notice, and be called upon to remove it. But, if this warning is not promptly attended to, it is the duty of the Local Authority to enforce obedience to the Law by proceedings before the Sheriff in terms of Section 19 et. seq. of the Act. The Board would recommend the Local Authority instruct the Medical Officer and Sanitary Inspector to make a careful examination of the whole Burgh, and to furnish them with a detailed Report thereon. Having received that Report, the Local Authority should take the necessary steps to have all sanitary defects remedied. The Sanitary Inspector to report to this Board what steps have been taken at the end of the month from this date. The Board also recommend the Local Authority to make Byelaws for the duties of the Medical Officer and Sanitary Inspector in terms of Sect. 8 of the Act. [BS PHMB 27.3.84, in SRO HH 25/8]

Nos. 1 to 5 Townhead belonging to Mr Mackie. The Ashpit and privy accommodation is defective and there does not seem to be any drainage in Nos. 1 to 3 while the drainage of No. 5 is defective and not in good working order. There seems to be a constantly

recurring nuisance here. (All right). [The text in brackets refers to statements made after a second inspection later in the year.]

Nos. 12, 14 and 16 Townhead (Mrs Margaret Young of Park, Dreghorn). The state of this property has been improved and the accumulations of offensive matter have been removed, and there is little to complain of, in this respect in the meantime.

The great fault is apparently the want of cleanly habits on the part of the tenants and their total neglect of cleansing operations except on compulsion. The Inspector will require to give constant attention to this property by insisting on the tenants doing the requisite cleansing regularly. The property is old and is not drained properly. No water supply has been introduced. (same state).

No. 7 High Street (James Barr and Mrs Frew and David Dickie, proprietors). The properties of these three owners are mixed up. Mr Dickie has over and over again intimated his desire to have water introduced and drainage provided for the use of his own and the other properties but Mrs Barr declines to do anything and Mrs Frew neglects to do anything. If the surface syver is left in a cleanly state by being swept daily a great improvement would be made on the sanitary state of the close in the meantime, but a water supply and proper drainage should be introduced to put the properties in a good sanitary state. (same state).

No. 29 High Street. The front tenement belongs to Mrs Peters. There is an open privy and Ashpit which are in a disgraceful state. They are quite close to one of the windows of the front dwellings, and the stench which will be sometimes very great must be most offensive, not only to the inmates but to the neighbours. These must be removed or completely transformed. The back property belongs to Mrs Gillies, one of the tenants keeps a number of pigs and although they seem to be kept in a cleanly state they are, from the number and proximity of the sty to the dwellings house, a nuisance under the Public Health Act. The Privy Ashpit are also requiring attention. (same state).

No. 4 and 6 Kirkgate. No. 4 – Mr Dunlop's Trustees, No. 6 – Mr John Gilmour. The Privy Ashpit seems to be common to the two properties and the suggestions formerly made to the Council have not been carried out although Mr John Gilmour says he is

quite willing to do what is wanted and offered to pay his share of the expenses necessary. The premises are not in good sanitary state and in summer weather must be offensive. (all right).

No. 5 and 7 Kirkgate (Miss Bruce, proprietor). There is no drainage and the privy and ashpit accommodation are most defective. A pig sty in which two pigs are kept is from its close proximity to the dwellings houses a nuisance. (nothing done).

No. 9 Kirkgate. There is no drainage and no privy and ashpit accommodation. This property is under charge of the Parochial Board of Irvine. (same as before).

No. 10 Kirkgate (Mr W. Little, proprietor). The proprietor has done something to remedy the former state of matters, but the structural alterations do not seem to be quite satisfactory. In the Dungstead, from the amount of dung, the accumulations of filthy and stagnant water must be offensive and will be source of a nuisance, especially in warm weather. (same as before).

No. 31 High Street (Mr David Holland, proprietor). Nothing has been done to remedy the state of matters here which is most unsatisfactory. It is necessary that something be done to abolish the nuisance. (all right).

No. 8 Eastback Road (Messrs G. & J. Steele, proprietors). There is no privy or ashpit accommodation and the accumulation of filth and ashes are very offensive and constitute a nuisance to the neighbours. (same state).

No. 10 Eastback Road (Mr R.H. Caldwell, proprietor). The drainage of this property is defective and the privy and ashpit accommodation is badly constructed. At present the premises are in a very unsatisfactory sanitary state and their conduct is a source of a recurring nuisance. (same state). [Irvine TCM(LA) 7.4.84, in *Irvine Burn's Club* Gr1/4/2]

No. 34 High Street belonging to Mrs Gillies. A complaint has been made to the Inspector by Miss Laud and Mrs Rose, adjoining proprietors, as to a nuisance which they allege arises from this property. There seems to be no necessity for the privy and ashpit accommodation which are situated nearest the

houses and the Council would recommend that these be shut up and the floor raised to a proper level as the privy and ashpit further up the garden seem sufficient for the property. (shut up).

No. 13 High Street (Mr L. Mathieson, proprietor). The ashpits are full and require to be emptied and unless this is done the floor of the ashpits should be brought up to a proper level. There is also a cesspool in the close which seems completely choked and the result is a pool and overflow of stagnant water in the Back Court which causes a nuisance. (all right).

No. 69 High Street (Mr Wilson McColl, Kilmarnock and Mr Lawson, proprietors). The ashpit of these properties requires to be emptied and thoroughly cleaned out. (all right).

No. 71 High Street (Miss Silver, proprietor). There is no proper ashpit in this property and parts of the ground being at a lower level than others, the consequences is a nuisance exists which will be most offensive in certain states of the weather. (all right).

Nos. 73 and 75 High Street with small house having no frontage to West back road (Francis Frew, proprietor). There is no sufficient or proper ashpit and privy accommodation and this should be provided to prevent a constantly recurring nuisance. (same state).

No. 6 Seagate (Mr Robert Jack, proprietor). There is a pig sty which is not at present used and which should be removed. An accumulation of manure should also be removed and proper privy and ashpit accommodation provided. (attended to).

No. 7 Seagate (Mr W. Miller, proprietor). This property is in a very unsatisfactory condition. There is a want of proper ashpit and privy accommodation and it is necessary to have a water closet provided as the erection of a privy would cause a nuisance, there not being sufficient space available in the property for this purpose. (same state).

Nos. 1 and 3 Eglinton Street (Dr A. Howe and Nathan Jaffrey, proprietors). The Back Court seems to be common to both properties. The sanitary managements are very unsatisfactory. The Committee recommended that a water closet and ashpit for the use of the tenants of both properties should be provided. (same state).

No. 7 Eglinton Street (Mr W.L. Miller, proprietor). There is no proper privy and ashpit accommodation and there seems to be a want of drainage in the Back Court of this property. (same state). [Minutes 27.4.84, in *ibid.*]

Peter Street. The cesspools in these properties are choked and not in working order and are a source of constantly recurring nuisance. The necessity for general cleaning operations at stated periods in these properties is apparent and should be insisted on. (very bad case, same state).

House near Shipyard occupied by Robert Thomson. In a part of the building access to which is had by the same entrance a pony is kept. Between the dwelling house which consists of one apartment is a partition. The Committee insisted upon the pony being removed and the occupant undertook to have accommodation provided for it elsewhere by 1st June next. (same state).

No. 92 Montgomery Street (Mr Samuel Fairgrieve, proprietor). This property requires drainage and proper ashpit privy accommodation. (all right).

No. 86 Montgomery Street (Miss Shanks, proprietress). There is no water supply in this property and drainage and proper ashpit and privy accommodation are required. (promised).

No. 76 Montgomery Street (Miss Bruce, proprietress). This property requires drainage and proper ashpit and privy accommodation. (same state, very bad).

No. 39 Montgomery Street (Mr Wilson Orr, proprietor). There is no water supply here and no proper drainage. There are several pighouses which are in a filthy state and in warm or wet weather these must be source of a great nuisance. (same state).

No. 4 Montgomery Street (Mr Robert Lawrie, proprietor). The dungstead requires to be properly constructed by having the floor there raised and drainage introduced. (same state).

No. 2 Montgomery Street (Corner of Loudoun Street) (Mr David Smith, proprietor). There is much want of proper drainage and the ashpit and privy accommodation is very objectionable. The ashpit should be removed and the privy transformed into a water closet and proper drainage provided. (same state).

From Nos. 23 to 27 Fullarton Street (Mr Andrew Robertson, proprietor). There is total want of drainage here so that in wet warm weather there must be a constantly recurring nuisance. (repairs are ordered).

No. 65 Fullarton Street (Mr James Forrest, proprietor). The cesspool is not working and the drainage is defective so that a nuisance is likely to arise. (same state).

No. 48 Loudoun Street (Mr Alexander Hamilton, proprietor). There are several pighouses in this property and there is no proper drainage from these. The dungstead arrangements in the back court do not seem to be satisfactory and as the premises are occupied as a Dairy it is necessary that the sanitary arrangements should be put in good order before the warm weather sets in. There is an accumulation of manure in front of the premises and it should be removed and in future no accumulation of manure should be allowed to take place in front of the premises. (same state). [Minutes 23.5.84, in *ibid.*]

No. 92 Montgomery Street. David McCartney, one of the tenants, has 7 pigs. Daniel McCafferty, one of the tenants, has 2 pigs. Mrs Mack, residing in the Eastwood Close of large property in Peter Street, has 4 pigs. Harry Laing residing in Mrs Andrews' property adjoining the Smith, has 2 pigs.

No. 90 Montgomery Street. Charles Graham, one of the tenants, has 2 pigs. William Hunter, one of the tenants, has given liberty to David Johnstone residing in the Eastwood Close of the large property in Peter Street and he has 2 pigs.

No. 88 Montgomery Street. Donald McQueen, one of the tenants, has 2 pigs.

No. 86 Montgomery Street. Mrs Elliot, one of the tenants, has 3 pigs.

No. 78 Montgomery Street. Charles Scullion, tenant, has one pig.

No. 76 Montgomery Street. Patrick Moonie, tenant, has 2 pigs. There is no drainage in this property and it seems to be in a bad state.

No. 39 Montgomery Street. Mrs Nelson, tenant, has 5 pigs. There is no drainage and the premises are in a filthy condition.

No. 35 Montgomery Street. Charles Cousar, tenant, has one pig. Mrs Allan Syme, tenant, has one pig.

No. 7 High Street. Samuel Elliot, one of the tenants, has a piggery in which 5 or 6 pigs are kept. [Minutes 4.9.84, in *ibid.*]

LEADHILLS' BYRES: THE SANITARY INSPECTOR'S REPORT, 1885

The first extract is a letter sent to the Board in 1885 by Crawford's Medical Officer complaining of the parish's poor sanitation. The second is the subsequent Board letter asking for the Sanitary Inspector to report. The third is from that report. The parish agreed to employ a part-time scavenger, half paid for by it and the local proprietor, Lord Hopetoun.

The sanitary arrangements of this district are very imperfect as regards dunghills and pig styes being far too near dwelling houses and dangerous to health. There are as such no privy for the inhabitants. One or two of the inhabitants have one attached to their houses, but there are no public ones for the working classes. [Letter of Dr W. McDonald, dated 3.8.85, Crawford PBM 1.9.85, in SRA CO1/34/1]

(Urgent) I enclose herewith an excerpt from a Report obtained by the Board from the Medical officer of the Local Authority and I am to call upon the Local Authority in view of the possible introduction of cholera into this country, to take immediate steps to remedy the defects pointed out. You will report to me in a month from this date what action has been taken. [Letter of J. Skelton, in *ibid.*]

Dr McDonald has reported to the Board about the want of privies in Leadhills which no doubt there is, but I think that after a little consideration the Board will see that these are not so greatly wanted as the Doctor would make out.

The village is favoured in respect of the large number of byres serving the purpose of privies. There are 264 houses, 13 privies, and 111 byres, so that there is a byre or a privy to every 2 houses,

nearly which I think is not to be found in many mining villages in Scotland.

Dunghills: I have examined every dunghill in the Village last Thursday, and find that only two are objectionable on account of the wash having a tendency to run out on to the road . . . At this season of the year the dunghills are larger on account of the hay being on the ground.

Pig styes: There are 47 pig styes in the village, all of which I examined last week and measured their distance from the nearest dwelling house and find that:

- 8 are under 10 feet from the house.
- 6 are between 10 and 20 feet from the house.
- 4 are between 20 and 30 feet from the house.
- 10 are between 30 and 40 feet from the house.
- 4 are between 40 and 50 feet from the house.
- 8 are between 50 and 60 feet from the house.
- 4 are between 80 and 90 feet from the house.
- 3 are between 90 and 100 feet from the house.

Sanitary Improvement: During the last two years Lord Hopetoun has expended £135 on sewerage and other sanitary improvements in the village, and in addition a large amount of voluntary labour has been done by the miners and others.

There is a great want felt in the village of a scavenger to look after the drains, roads, etc. which I would recommend to the consideration of the Board whether they should appoint one.

I may state that Lord Hopetoun is willing to give £5 yearly if such a man is appointed. [Report of John Williamson, Inspector of Nuisances, Leadhills, dated 31.8.85, in *ibid.*]

KILMARNOCK: SOLVING ITS SANITARY DIFFICULTIES, 1886

The first extract is from an Inspecting Officer report on Kilmarnock. The Burgh Medical Officer was instructed to inquire and the second extract is from his report. He also approached the Board for advice and received in return a letter enclosing Dr Littlejohn's opinion, the final extract. The Burgh left the matter for further discussion.

I strongly advise the Local Authority to provide a plan of an ashpit with detached privy and gradually to promote its introduction elsewhere. [Report of Malcolm M'Neill, Inspecting Officer, dated 10.6.86, Kilmarnock TCM(PH) 29.7.86, in *Kilmarnock and Loudoun District Council Records* 1/5/1]

The actual condition of things in Kilmarnock is in many cases very bad. Heaps of rotting filth are accumulated in back courts, exposed to the fermenting action of sun and rain, while around them little children play unconcernedly, rolling about on the poisoned soil and inhaling the disease-laden air, and so laying up for themselves a store of ill-health, which, even where it does not kill, saps and undermines the whole foundations of a vigorous life; and the dwelling houses, where the warmer inside air acts as a sucker on the colder surrounding atmosphere, draw in foul effluvia both from air and soil.

It is quite true that matters are not so bad as at one time they were. Ashpits have been removed a few yards further from homes, are on the whole better constructed than formerly, and are oftener emptied than of old, while at least the older children find recreation in the Kay Park or Barbadoes ground and spend less time in the immediate neighbourhood of the dung-hill. But these advances useful as they may be, do not effect the evil at its root. [Report of Dr J.C. McVail, dated 26.11.86, Minutes 26.11.86, in *ibid.*]

With reference to the queries of the MOH of Kilmarnock, I beg respectfully to submit to the Board that, in my opinion, the difficulties of this Burgh would be solved by the introduction of the pail system, which involves the use of two receptacles, one being kept on the removal of the other.

With regular daily collection of house refuse and its conveyance to a depot, the mixture of excreta with ashes, etc., etc., could easily be effected. In Edinburgh the mixture, or rather the addition of the excreta is made after the ashes and the refuse have been placed in the railway truck, the contents of the privy pails being emptied into the middle of the truck. There can be no doubt that the health and amenity of a Burgh the size of Kilmarnock

depends greatly on the speedy removal of all domestic refuse; and the system inaugurated in Edinburgh and very successfully carried out in Montrose, is that which gives the most satisfactory results. [Opinion of Dr H.D. Littlejohn, contained within letter of Board of Supervision, dated 8.9.86, in *ibid.*]

AYR: THE STRIKING EVIDENCE OF DIRT AND OVERCROWDING, 1892

At the end of 1891 the Rev Thomas Dykes, an Ayr minister, complained to the Board of an outbreak of typhus. The Board promptly sent Dr Littlejohn to inquire and the following is an extract from his report. The Council ordered it to be printed.

During the past year, with the exception of the months of January, February and April, Ayr has not been free from Typhus – a fever which is rarely seen and which is practically unknown to the present generation of medical men. It is not, therefore to be wondered at if there is some difficulty in arriving at the exact number of cases, from the uncertainty attending the diagnosis in the early states; thus one case, reported as Meningitis and sent to the Hospital, was afterwards pronounced to be Typhus, and two cases certified to me as having occurred in February and therefore regarded as the first victims, were afterwards satisfactorily shown to have been cases of Typhoid or Enteric Fever. But so far as I was able to make out, there have been at least 29 cases with a Monthly distribution as follows: March 5, April 0, May 7, June 2, July 2, August 1, September 4, October 3, November 4, December 1.

As to the Locality, we find that with the exception of this last case (which was that of the respected Medical Officer of Health, Dr Dobbie) all the cases occurred in the poorer districts of the Burgh, viz: in Newton and Wallacetown. So that with this exception, not a single case has been reported to the south of the river, i.e. in Ayr proper.

Reference to the Rental gives the following distribution:

£1 10s to £5	£5 to £10	£10 to £15	£15 and upwards
17	9	11	1

So far as Age is concerned, we have 10 cases under 12 years, and 19 above that age. The Mortality was 4, or 14 per cent.

All the houses in which cases had occurred were either, in my opinion, unfit for human habitation owing to age, structural defects, and deficiency of sanitary conveniences, or, if of more recent construction, there was striking evidence of dirt and overcrowding.

Ayr is unfortunately placed in this respect – that all its attraction can easily be seen and enjoyed without the poverty and wretchedness of many of its poorer inhabitants being obtruded on the visitor – thus differing widely from Edinburgh, where, luckily, none of its sights can be inspected without the travellers being unfavourably impressed with the housing of the poor.

In making my inspection of the poorer districts the wonder was, looking to the combustible elements of disease which abounded on all sides, that the epidemic had been restricted to such comparatively small dimensions. In almost every case direct contact with parties from infected houses could be made out, and the smouldering character of the outbreak was fully explained by the laxity with which the measures adopted for the disinfection and cleaning of the infected houses and the isolation of the sick were carried out.

The wider question remains – How can Ayr be protected from future outbreaks? This can only be accompanied by a thorough survey of the poorer districts – the condemnation of all houses certified as unfit for human habitation – the steady enforcement of the law against overcrowding as ascertained by periodical nocturnal visits of the Police, the frequent whitewashing of the closes and alleys, and more satisfactory cleansing of the Burgh generally, involving the abolition of ash-pits, and the introduction in the poorer districts of the pail system.

Before my arrival, a Committee of the Local Authority had already been formed to take up the various points which I have mentioned, and with them was associated the Medical Officer of Health. It is to be hoped that their Report will be followed by decisive action. Of course there will be the difficulty of providing the dispossessed with suitable house accommodation. I saw few unoccupied houses during my inspection; and the evils of overcrowding must not be intensified by sanitary measures. [Report of Dr H.D. Littlejohn on the Outbreak of Typhus Fever at Ayr, dated 11.1.92, in *Ayrshire Post* 12.2.92, p.3]

DEGRADING THE LOWEST CLASS: LEITH'S INSANITARY HOUSING, 1893

At the end of 1892 the Board received reports that Leith was not implementing its newly issued cholera precautions. When a local doctor complained of the Burgh's insanitary housing conditions the Board sent Dr Littlejohn and an Inspecting Officer to inquire. The first extract is from the latter's report. Leith refused to accept the report and the second extract is from the Board's subsequent minute, issued after consulting the Lord Advocate about possible Court action. Leith agreed to comply.

Some ten years ago, the Corporation purchased a lot of property, and about that time promoted an Improvement Act, under which the greater portion of the said lands has been feud, streets improved, etc. There still remains untouched the following property:

21 Lawrie's Close	4 houses
25 Lawrie's Close	2 houses
1 Meiklejohn's Close	18 houses
1 Lamb's Court	4 houses
15 Coalhill	Lodging-house
18 Coalhill	15 houses
56 St Andrew's Street	10 houses

It is alleged that the provisions of the Special Improvement Act do not entitle the Corporation to remove dwellings without substituting other places of habitation; but no Act entitles the Local Authority to keep open dwellings which are uninhabitable. I understand that the tenants are weekly occupants, and that the caretaker is entrusted with the responsibility of evicting, on eight days' notice, any who do not comply with certain regulations embodied in an agreement which is signed before entry.

From this it will be seen that the Corporation do not conform to the provision of the Improvement Act, but treat the tenants as a source of revenue, ejecting them as circumstances arise.

Dealing with the plea put forward by the Corporation that it would not be fair to turn out the occupants of their property, I do not think they are justified in looking upon the question as one entailing hardship upon the individual occupant alone – nor do they, as a matter of fact, as I have already shown in my previous

remarks. The real question is, are they justified in allowing the premises to be used as dwelling-houses when they are admittedly in an unsanitary state? Although it is said that the class who occupy these houses are of the lowest, there is no reason why the Corporation should assist in degrading them still further, and endanger their health by allowing them to live in insanitary houses. Gardner's lodging-house, 15 Coalhill, is not a satisfactory place to be licensed as a common lodging-house.

We visited the Corporation property, and I can only describe the dwellings as being, with one exception (21 Lawrie's Close), damp, dirty, dark, overcrowded and badly ventilated, with almost every room filled with smoke. This one exception is certainly in better order than the rest of the property, but that is not saying much. I have no hesitation in characterising the houses generally as not, in my opinion reasonably fit for habitation. In 56 St Andrew's Street we found several rooms untenanted, which were in a very dilapidated state, and which seemed to be made use of as a receptacle for all kinds of refuse from within and without.

After visiting these premises, the question naturally occurs is there really anything in the plea put forward that, of necessity, new dwellings must be erected for those who are turned out of houses which are to be pulled down? Assuming that new houses are erected, can it be proved that those who occupied the slum property will remove into better-class houses? I fear not. The rents are probably too high, and the result will be that they will probably remove to dwellings similar to those they have left, and never reach the better-class accommodation at all. I find the rents paid by the tenants run from 1s to 2s a week, and they seem to grumble at having to pay even these small sums . . .

The Medical Officer informs me that he has never, on his own initiative, drawn attention to insanitary defects in the Burgh, nor has he ever made, or caused to be made, inspection of the bakehouses, in terms of the Board's circular. His duties have been confined to examining and reporting, when called upon to do so by the Local Authority or Sanitary Inspector.

Has the Housing of the Working Classes Act ever been perused by the Medical Officer? With regard to unhealthy houses, sections 30/31 clearly state that it is the duty of the Medical

Officer, either on his own initiative, or on complaint from four or more householders, to make a representation to the Local Authority with regard to any house, and so on. Also, by sections 4 and 5, re. unhealthy areas, the responsibility is thrown on the shoulders of the Medical Officer.

It will thus be seen from the foregoing that more important duties devolve upon the Medical Officer, with regard to insanitary dwelling areas, etc., than this gentleman realises, and I would specially draw attention to these responsibilities to strengthen a suggestion offered later on . . .

It seems necessary to draw attention to one other feature in the case, viz. the number of members of the Local Authority, who possess property reported upon by the ex-Sanitary Inspector as being – sanitarily speaking – defective. It is a matter of regret that so many sitting members of the Local Authority should be so deeply interested in this class of property.

I . . . would point out what I consider are the duties of the Local Authority. (1)The Corporation dwelling-houses should be closed. (2) Owners of insanitary property should be called upon to put their property in a sanitary state. (3)The Sanitary Inspector should be provided with a staff sufficient to enable him to carry out a systematic and regular supervision of the Burgh. (4)The Medical officer's Department should be reorganised, and the Medical Officer should not engage in private practice. [Report by G. Falconar-Stewart, dated 31.1.93, Leith TCM 7.3.93, in *Edinburgh Public Library* qYJS.4245 A2L]

It appears to the Board: That the inspection of the insanitary operations made by the officers of the Local Authority has not been followed by any immediate measures to secure adequate sanitation – the Local Authority having informed the owners of houses unfit for human habitation that the Local Authority themselves would not take action on the failure of the owners, until after the term of Whitsunday.

That a considerable number of these houses are the property of the Local Authority, that they are occupied by weekly tenants, and that it is in the power of the Local Authority to close them at once.

That it is the duty of the Local Authority in terms of the Public Health and Housing of the Working Classes Acts to close dwelling houses dangerous or injurious to health or unfit for human habitation and that [the Medical Officer] is bound in every case to make such representation and that the absence of complaint does not excuse him from inspecting any dwelling-house unfit for human habitation and making the statutory representation . . .

That in the event of cholera appearing as apprehended during the spring months any delay in executing the Acts may seriously affect the public health . . .

The Board therefore call upon the Local Authority: to close forthwith the houses belonging to the Local Authority that are unfit for human habitation, and any others that the Medical Officer may certify to be unfit for human habitation in terms of the Acts, and to take immediate measures to secure adequate sanitation in those houses which have been reported to be in an unsanitary condition, but which are capable of improvement . . .

To transmit a report from the Medical Officer as to the measures taken by the Local Authority and by their officers . . . [BS PHMB 2.3.93, in SRO HH 25/12]

KIRKINTILLOCH'S DINGY DWELLINGS, 1894

In early 1894 an Inspecting Officer, K.J. Mackenzie reported on the poor state of Kirkintilloch's 'one and two room dwellings' and the Board called on the Burgh's sanitary officials to report. The first extract is from their report. The Board subsequently asked what action the Council proposed to take and the second extract is from its reply. The Board appeared satisfied.

In compliance with and acting under instructions received through you the Town Clerk from the Board of Supervision. I have made a careful and complete inspection of each house named and herewith beg to submit for your consideration my report therein based upon information given me by the inmates of the houses and from my own observations during many visits. The whole of the houses reported on I consider them injurious to health from defective structure, defective ventilation, and

excessive dampness, greater part of them being old ruinous buildings, there are a great many more houses of same size inspected which I cannot in the meantime say are unhealthy.

Factored by Miss B. Martin

1st. Charles Cowan, miner, Backcauseway, large single apartment, damp walls, no ventilation by windows, entrance lobby damp earthen floor.

2nd. Mrs Cowan, widow, Backcauseway, five apartments, used as a lodging house, very damp and greatly out of repair, entrance by lobby with damp earthen floor.

3rd. Mrs Whitelaw, widow, Backcauseway, single apartment, damp earthen floor, damp walls in very bad order.

4th. John Docherty, labourer, Backcauseway, two apartments, wooden floor in kitchen, small room damp earthen floor, walls of house very damp, beds, water running down back, very bad state.

5th. Patrick Quinn, miner, Backcauseway, two apartments, very damp house, otherwise in fair order.

6th. Alexander Brown, hawker, Backcauseway, single apartment, damp floor and walls very bad order.

7th. Agnes McKay, widow, Backcauseway, single apartment, very damp.

8th. Bridget Kildare, outdoor worker, Backcauseway, small garret, very damp walls, very bad order.

9th. Mrs Boyle, widow, Backcauseway, small garret, very damp walls, very bad order.

10th. Richard Letford, hawker, Backcauseway, two apartments, damp walls, otherwise in fair order, entrance damp earthen floor in lobby.

11th. John Guthrie, labourer, Backcauseway, two apartments, damp walls otherwise in fair order, entrance same as No 10.

The whole of the above houses are plastered on the walls without lathing, the floors are all damp with low ceilings and bad ventilation and in their present condition unfit for human habitation.

Miss Allan, Proprietor, East High Street.

12th. George Sawyers, labourer, East High Street, single apartment, very damp, bad ventilation, bad order.

13th. William Kinniburgh, labourer, East High Street, single apartment, very damp, bad ventilation, bad order.

14th. William Stark, boatman, East High Street, single apartment, very damp, bad ventilation, bad order.

15th. John Jarvie, labourer, very damp, house in fair order, single apartment.

The above houses in their present state are unfit for habitation.

Niven Weir, Proprietor, East High Street.

16th. John Carr, miner, East High Street. Occupies two houses, first two apartments, second one room and two attics, this house is very damp in every corner, out of repair and in a wretched condition.

Mrs Gibson, Clerk, Kilsyth Road, Factor.

17th. James Carrol, miner, Eastside, two apartments, room damp earthen floor, walls very damp, surroundings damp, old decayed building.

18th. Mrs Wilson, widow, Eastside, single apartment, very damp, old decayed building.

19th. Mrs Wilson, widow, Eastside, single apartment, damp entrance by damp earthen lobby, old decayed building.

20th. Patrick Docherty, labourer, Eastside, single apartment, very damp entrance, very damp old decayed building.

21st. William Wilson, pitsinker, Eastside, single apartment, damp earthen floor, walls damp, old decayed building.

22nd. Ann Gibbon, spinster, Eastside, single apartment, damp, well kept, old decayed building.

23rd. Robert Wood, labourer, Eastside, single apartment, damp, well kept, old decayed building.

24th. Mrs Millar, widow, Eastside, single apartment, damp, well kept, old decayed building, stair in very bad order and walls of same full of damp.

25th. Michael McGregor, labourer, Eastside, single apartment, very damp, old decayed building.

26th. William Hammet, labourer, Eastside, single apartment, very damp, old decayed building.

27th. William Logan, minder, Eastside, very damp, single apartment, old decayed building.

28th. William Burke, weaver, Eastside, single apartment, very damp.

29th. Robert Smith, weaver, Eastside, single apartment, very damp, old decayed building.

30th. John Ferns, miner, Eastside, two apartments and small shop very damp, old decayed building.

The above houses are factored by Gibson and are not fit for human habitation.

Miss Woods, Factor, Broadcrofts, Kirkintilloch.

31st. Robert McAusland, miner, Eastside, single apartment a little damp, but otherwise in fair order.

32nd. George Murray, labourer, Eastside, single apartment, a little damp, otherwise in fair order.

33rd. Alexander Hamilton, miner, Eastside, single apartment, very damp and in bad order.

34th. Mrs Steen, weaver, Eastside, single apartment, very damp and in bad order.

Factored by D. Thomson, Joiner, East High Street.

35th. George Nugent, labourer, Eastside, three apartments, very damp.

36th. Mrs McGill, widow, Eastside, front a shop, lives in back room which is very damp, very unhealthy, small.

Factored by Wm. Edgar, Clerk, Canal Street.

37th. Patrick Quinn, miner, Eastside, two apartments, very damp, bad ventilation.

Factored by Robert Graham, Joiner, Townhead.

38th. James Dodds, labourer, East High Street, single apartment, damp in very bad repair, old decayed building.

39th. James Quinn, labourer, East High Street, single attic, small dingy damp hole.

40th. Roderick Ross, labourer, East High Street, single attic, small dingy damp hole.

41st. Archibald Cassels, labourer, East High Street, two apartments, damp, fair order, old decayed building.

42nd. William Fitzpatrick, hawker, East High Street, small attic, damp miserable hole.

43rd. Robert Patrick, weaver, East High Street, small attic, damp dingy hole.

44th. Walter Simple, engineman, East High Street, two apartments, damp, old decayed building.

Miss Freeland, Proprietor, Spinster, West High Street.

45th. Mrs Brown, widow, Distillery Square, single apartment, damp, entered by a long dark lobby, no light or ventilation.

46th. Mrs Rankin, widow, Distillery Square, single apartment, entered as described above and damp.

47th. Elizabeth Craig, hawker, Distillery Square, very damp entrance as above.

48th. Alexander Muir, moulder, Distillery Square, single apartment, very damp.

49th. James Wallace, miner, Campsie Road, very damp, no ventilation, single apartment.

50th. Mrs Thomson, widow, Campsie Road, single apartment, no ventilation.

51st. Peter McFarlane, moulder, Campsie Road, single apartment, very damp, no ventilation.

Factored by Miss B. Martin

52nd. Alexander Scobie, miner, Martins Square, single apartment, very damp, bad ventilation, damp earthen floor, very bad order.

53rd. Mrs Rodden, widow, Martins square, single apartment, very damp, no ventilation, earthen floor and very bad order.

Factored by Wm. Edgar, Clerk, Canal Street.

54th. John McGregor, miner, Martins Close off Cowgate, single apartment, very damp, close standing in water, bad ventilation.

55th. Joseph McFarlane, labourer, Martins Gate, off Cowgate, single apartment, very damp, no ventilation, bad order.

56th. John Mooney, miner, Martins Close, off Cowgate, two apartments, damp and in bad repair.

57th. Patrick Freel, labourer, Martins Close, off Cowgate, single attic, a little damp, in fair order.

58th. Mrs Kirkwood, widow, Martins Close, off Cowgate, single apartment, damp, no ventilation.

59th. Peter Colligan, miner, Martins Close, off Cowgate, single attic, a little damp, in fair order.

60th. Mrs Garvie, widow, Martins Close, off Cowgate, single attic, a little damp, in fair order.

Factored by J. Crossley, Sheriff Officer.

61st. Alexander Reid, moulder, Cusheyrre Close, off Cowgate, single apartment, damp, no ventilation, very bad order.

62nd. Robert Cooper, weaver, Cusheyrye Close, off Cowgate, single apartment, damp, no ventilation, very bad order.

63rd. Mrs Tennant, weaver, Cusheyrye Close, off Cowgate, small attic, damp, no ventilation, dingy hole.

64th. Thomas Clark, weaver, Cusheyrye Close, off Cowgate, single apartment, very damp, bad ventilation and in very bad order.

65th. Thomas Hunter, miner, Cusheyrye Close, off Cowgate, attic, very damp, bad ventilation.

66th. Mrs Pinet, widow, Cusheyrye, off Cowgate, single apartment, damp and bad ventilation.

The above houses are unfit for habitation.

William Muirhead, Proprietor, Spirit Merchant, Townhead.

67th. William Dickson, miner, 11 Townhead Street, single apartment and attic, damp, no ventilation.

68th. Mrs Watson, widow, 13 Townhead Street, single apartment, damp and no ventilation.

69th. Patrick O'Brien, labourer, 13 Townhead Street, single apartment, damp and no ventilation.

Factored by Mr Watson, Banker, Alexander Street.

70th. Mrs Dunlop, widow, 15 Townhead Street, single apartment and no ventilation.

Factored by E. Stirling, Cornfeeder, Barley Bank.

71st. Mrs Murray, widow, 36 Townhead Street, single apartment, damp earthen floor, no ventilation.

72nd. Mrs Monaghan, widow, 36 Townhead Street, small attic, damp dingy hole.

73rd. Mrs McWhannel, 38 Townhead Street, single apartment, damp, earthen floor.

74th. George Foster, labourer, 40 Townhead Street, two apartments, very damp.

Factored by R. Graham, Townhead.

75th. James Walls, moulder, 42 Townhead Street, single apartment, very damp.

Mrs Stewart, Proprietor, Merchant, Cowgate.

76th. William Reid, miner, 183 Townhead Street, two apartments, damp and in very bad order.

77th. Peter McWilliam, labourer, 185 Townhead Street, single

apartment, damp and in bad repair, the above two houses are old decayed buildings.

Factored by Colin Graham, Joiner, Townhead Street.

78th. Elizabeth Wilson, weaver, Backrow, Townhead, single apartment, very damp walls and floor.

79th. Mrs Davidson, widow, Backrow, Townhead, single apartment, very damp.

80th. Robert Wilson, weaver, Backrow, Townhead, single apartment, very damp, water running on floor.

81st. James Shaw, bricklayer, Backrow, Townhead, single apartment, very damp and in bad order.

82nd. Robert Baird, weaver, Backrow, Townhead, single apartment, very damp and in bad order.

83rd. Wm. Findlay, weaver, Backrow, Townhead, single apartment, damp but well kept. The above are all unfit for human habitation.

Factored by Miss Wood, Broadcroft, Kirkintilloch.

84th. Mrs McKenzie, hawker, Hopkins Brae, single apartment, damp, in very bad order.

85th. Miss Todd, weaver, Hopkins Brae, single apartment, damp in very bad order. The above two are not fit for habitation.

Factored by Wm. Edgar, Clerk, Canal Street.

86th. Mrs Hutcheson, widow, 40 Hillhead Street, single apartment, damp and no ventilation.

John Cluggie, Proprietor, Hillhead.

87th. Mrs Gray, widow, Hillhead, single apartment, very damp.

88th. William Cluggie, boatman, 41 Hillhead, single apartment, very damp.

89th. Robert Rae, weaver, 71 Hillhead, two apartments, very damp.

Factored by Miss B. Martin

90th. James Dempsay, miner, 76 Hillhead, single apartment, very damp, bad order.

James Ker, Proprietor, Labourer, Hillhead.

91st. John Donald, mason, 79 Hillhead, two apartments, very damp.

John Stark, Proprietor, 81 Hillhead.

92nd. William Stirling, engineman, 81 Hillhead, two apartments, very damp.

Factored by Miss B. Martin

93rd. Mrs Fisher, widow, Hillhead, single apartment, very damp old building.

94th. Wm. Stewart, weaver, 87 Hillhead, single apartment, very damp old building.

95th. Alexander Cooper, moulder, Hillhead, single apartment, very damp.

96th. Mrs Foulton, widow, 87 Hillhead, two apartments, very damp.

97th. William Clark, coal merchant, Cowgate Street, two apartments and attic, very damp, low ceiling, dingy hole.

98th. John Fyfe, barber, Cowgate Street, two apartments, damp dingy places.

[Owned] by Miss Allan, East High Street.

99th. William Brown, gardner, Hill Townhead, single apartment, very damp, untidy, unfit for habitation.

Factored by R. Graham, Joiner, Townhead.

100th. James Ross, gardner, East Greens Rows, two apartments, damp and in bad repair.

101st. Michael Murphy, gardner, East Greens Rows, two apartments, damp and in bad repair.

102nd. David Docherty, gardner, Easter Greens Rows, single apartment, damp from roof, fair order.

103rd. Wm. Freel, gardner, Easter Greens Rows, two apartments, very damp and in bad repair.

104th. William Downie, Easter Greens Rows, single apartment, bad repair.

105th. Alexander Downie, Easter Greens Rows, single apartment, bad repair.

106th. John Malcolm, miner, Easter Greens Rows, single, in fair order.

107th. Bernard Grant, labourer, Easter Greens Rows, two apartments, fair order, bad ventilation.

108th. Mrs Bryce, widow, Easter Greens Rows, two apartments, very damp in very bad order.

109th. John Curran, labourer, Easter Greens Rows, single apartment, in fair order.

110th. Henry Rankin, miner, Easter Greens Rows, single apartment, a little damp.

111th. Janet Lang, washerwoman, Easter Greens, single apartment, very damp and in very bad order.

112th. Jane Bennet, outdoor worker, Easter Greens, single apartment, damp and in bad repair.

113th. James Millan, labourer, Easter Greens, two apartments, damp and in bad repair.

114th. George Brown, miner, Easter Greens, two apartments, damp and out of repair.

Gilbert Lang, Proprietor, Cowgate Street.

115th. Archibald Leitch, labourer, 24 Cowgate Street, two apartments, very damp. [Report of Wm. Gray, Sanitary Inspector, dated 5.3.94, Burgh of Kirkintilloch Letter Book, Incoming Letter dated 12.3.94, in *W. Patrick Library, Kirkintilloch*]

I concur generally with the opinions expressed by Inspector Gray in the foregoing Report.

The houses referred to are chiefly thatched, and some of them have earthen floors, and the windows are often without opening sashes.

To eject the people from these houses in a summary manner would cause great hardship and a domestic revolution, for they could not get houses elsewhere in Kirkintilloch. But if the best of the indifferent houses are to be tolerated for a few years, then wooden flooring should be substituted for the earth floors, and the windows or some of the panes made that they could be opened to admit fresh air.

Many of the houses, owing to the recent continuous rains, appear just now very damp but at all times they have a damp appearance—owing to the absence in many instances, of standards and lathe with smooth plaster in the walls, not a few of the old dwelling houses being formerly occupied as workrooms by handloom weavers.

These houses should be limewashed annually, outside and inside.

They would also have a less repulsive appearance, if the inmates would make more effort to keep them clean and likewise keep their own persons and clothing clean. Even in a crowded town a cleanly sober-living householder will in course of time get into a better house: but, so far as I know, while the State has the power to shut up hopelessly unhealthy houses it cannot compel proprietors or municipalities to provide good housing for defaulting rent-payers. [Letter of Dr Wm. Whitelaw, D.P.H. and Fellow of the Faculty of Physicians and Surgeons of Glasgow, 7.3.94, in *ibid.*]

. . . by instructions of the Local Authority, I sent an excerpt from the report to each landlord or factor whose property was dealt with in that report, along with an intimation that the houses would require to be put into a proper habitable condition, otherwise that Local Authority would be compelled to take steps to have the houses shut up. [Burgh of Kirkintilloch Letter Book, Outgoing Letter, dated 11.7.94, in *ibid.*]

PORT GLASGOW: THE BAY AREA, ITS 2,000 POPULATION, THIRTEEN WATER CLOSETS AND TWO OBJECTIONABLE PRIVIES, 1903

In 1901 Port Glasgow's MOH declared the Bay Area of the town 'an unhealthy area' within the meaning of the 1890 Housing of the Working Classes Act. After an Inspecting Officer report, the Council agreed to an Improvement Scheme and the Scottish Secretary, Lord Balfour, ordered a public inquiry under the Sheriff of Inverness. The following is an extract from his report which approved the scheme. By 1912 some 400 houses, mainly two-apartments, had been built.

The present scheme under the Housing of the Working Classes Act 1890 deals with an area of about 43 acres lying between the Railway and the river near the east end of the town. The population is about 2007. Out of 438 dwelling houses only 55 have more than two apartments and the third apartment, where there is one, is generally a mere closet. It is estimated that fully three-quarters of the inhabitants of the area are well to do working people in regular employment and earning good wages.

The remainder belong more or less to the residual class, but there is no regular criminal population.

There are some dwelling houses of recent date, but so far as I was able to judge from appearance, the bulk of the dwelling houses date from the 18th and some from the 17th century.

After perambulating the area and visiting the different closes and a number of the houses and after listening to the evidence led at the Enquiry, I have no hesitation in affirming that the area is insanitary – insanitary to a degree that could hardly have been imagined as possible now-a-days, in a British town. Except round part of its outskirts there are no streets in the area and the only access from place to place is through narrow dark and filthy lanes and closes. The houses are crowded on to the area without any order or arrangement, or any consideration of light, access, or ventilation. Many of the houses are damp; in more than one I saw water trickling down the walls – the result of the floors being as they are, in many cases, a number of feet below the surrounding earth, and of bad drainage and bad building. The windows are mostly small and often look into a blind wall at the distance of a foot or two, so that in many houses it is necessary to keep a light burning all day. In a number of cases there are small wastes between the houses into which the windows look, and which are too small to be utilised for any purpose and are simply receptacles for rubbish and filth of every description. The interior construction of many of the houses is extremely bad. The stairs are badly constructed and in some cases it is necessary to crouch in ascending and descending. Much of the wood work is rotten and the masonry worn and crumbling. Many of the apartments have no fireplace, being merely corners partitioned off, and very often the second apartment of the house is just a receptacle for rubbish and abominations. Box beds, unhung windows, and dark narrow passages, are other obstacles to proper ventilation. To a population of upwards of 2,000 there are only 13 W.C.s and 2 objectionable privies. As there are no gardens, woods or waste grounds, in the immediate neighbourhood, this means that the great bulk of this large population have to perform the offices of nature within the precincts of their narrow and crowded dwellings, with consequences to the sanitation and *morale* of their

households which can well be imagined. The contents of the domestic utensils are often kept in the house until the evening when they are emptied into one of the gulleys or thrown out at the window, or carried to one of the ashbins, provided by the town. These ashbins which are emptied every two or three days, are sinks of feculent corruption, standing open in the closes, often beside the doors of dwelling houses and with children playing around them. I noticed one which was leaking and from which a disgusting stream was trickling down the cobble stones of the close. In one house which I visited and in which I found 2 men, a woman, and 4 children in a front room about 9 ft. square, I was at first denied admittance to the back room until the woman of the house had performed some office there, which as I ascertained from the medical officer, was emptying certain utensils out of the window, and the appalling atmosphere of the inner chamber fully confirmed this explanation. Very many of the houses have no water supply, and the water has to be carried from outside taps, some of which are at a considerable distance from the houses. This is not in itself, of course, sufficient to condemn the area as insanitary, but the carrying of water in this way amidst such insanitary surroundings and the meagre supply which it encourages, tend to aggravate the general insanitary and filthy condition of life in the area. [Report of Sheriff C.N. Johnston on Port Glasgow's Improvement Scheme, dated 1.5.03, in SRO DD 6/157]

KIRKCALDY'S WATER SUPPLY: TESTING THE CONSUMERS' TOLERATION, 1904

In 1903 Kirkcaldy's Medical Officer of Health reported that the Town's water supply presented a 'grave danger to public health'. Although some protection was subsequently provided, continued doubts by the Council led it to ask the Board 'to send over their Inspector'. The following is an extract from his report. Afterwards the Council agreed to further protection.

Holl Reservoir – Holl Burn or northmost feeder. This stream is

also exposed along its whole course. At a point about 150 yards from the reservoir, there is greater evidence of habitual access of cattle to the water. This stream, however, is also to be fenced along part of its course.

It is unnecessary to detail by name all the spots where cattle have access. It is enough to say that with exception of the small portion now or about to be fenced, the streams are exposed to pollution along their whole course. I have not been able to discover any good reason for this. Doubtless the cost of fencing the streams along their whole course would be considerable and I was informed that the consent of the various owners and tenants would be necessary. But it is obvious that, short of complete fencing, a great deal more might be done at the parts most frequented by cattle. I was asked to indicate any special portions that, in my opinion, should be fenced, and I was informed that all places formerly indicated by Dr Mackay [the M.O.H.] had been fenced. But, so long as the streams are at any point open to cattle or horses, it would be futile to indicate this or that frequented part as a place to be fenced. On the fencing of one portion cattle, unless otherwise provided for, would forthwith frequent another convenient portion of the stream. Consequently, I should recommend that all the field be provided with a sufficient water supply for cattle; that all places at present frequented by them should be fenced; that a regular inspection should be made from week to week during the summer months with a view to discovering any new places frequented by them, and that these places should also be fenced. The proper remedy is the fencing of all such portions of the streams as are not otherwise inaccessible to cattle or horses.

It was argued that the amount of pollution from cattle was so small as not appreciably to affect the quality of water as supplied to the town. Carried to its logical conclusion, this argument would mean that any degree of pollution may be admitted so long as its effects are not shown in the chemical analysis of the water. This argument is unsound; the standpoint of it is entirely wrong. Instead of seeking to justify known pollutions by the failure to demonstrate them in the water as ultimately supplied, the Water Commissioners ought rather to

be guided by the principle that no water supply can be regarded as satisfactory so long as any known and preventable pollutions have access to it. Doubtless, all surface waters are in varying degrees exposed to pollutions, some preventable, some not directly preventable. In the present case, the access of cattle is preventable by the simplest of means, and ought unconditionally to be provided.

Spring near Ballo Reservoir – The spring emerged at the corner of a field and there was abundant evidence of the habitual presence of cattle. Cow droppings were found at the very margin of the spring. If this spring is again to be used for drinking purposes, it ought to be properly built round and completely protected from the access to cattle. Why it had not been so protected when previously used for drinking purposes, I was unable to discover. The outlay involved would have been trifling. The defence that such pollutions as might arise from this spring was not sufficient to pollute the whole water supply to a dangerous degree, I have already dealt with. The purpose of a public water supply is to provide the purest water obtainable, not to test what degree of pollution will be tolerated by the consumers.

Report by J. Falconer-King, Edinburgh City Analyst

The only point, . . . , in the composition of these waters to which any objection can be taken is the slight excess of albuminoid matter which is present in each of the three samples sent. This circumstance, together with all the other analytical results, leads me to the conclusion that, though none of these waters can be regarded as being of a very high degree of purity they are all in my opinion suitable for domestic use.

It is right that I should add that the waters, especially No. 2, do not appear to be very perfectly filtered. If this operation were found in a more effective fashion the results would be, I believe, to lessen materially the amount of albuminoid matter which at present exists in all of the three waters. [Report by Dr W.L. MacKenzie on Kirkcaldy Burgh and District Water Supply, dated 10.11.04, enclosing Report by J. Falconer-King, dated 14.10.04, Kirkcaldy TCM, 20.4.05, in *Kirkcaldy District Council Records* 1/1/22]

A NUISANCE OF RECURRING TYPE: THE MEDICAL INSPECTOR'S REPORT ON LONGRIGG, 1905

The Board in early 1903 received complaints about the sanitary condition of Longrigg mining village, Lanarkshire and R.B. Barclay, the Inspecting Officer was sent to inquire. Two years later, after little had been done, the Board sent its Medical Inspector to make further inquiries and the extract here is from his report on the west village. After the Board subsequently informed the Local Authority that it was failing in its statutory duty, the mine owners agreed to pay for the village's scavenging.

Out of 66 houses, 54 or 82 per cent, were occupied; most are of one or two apartments, a few of three apartments.

The houses are of brick, one storey in height, a considerable proportion being back to back, and of the cheapest type; the floors are only a few inches above the ground, and there does not appear to be any under-floor ventilation. The country around is bleak moorland.

Most of the houses were remarkably clean, well kept, and well furnished, while the people were tidy and respectable. Only a few of the houses were decidedly untidy.

There is no paving in front of the houses or at the back; surface water runs down the sloping ash pavements at the front and back of the houses to open tide channels that lead to a ditch.

Population – Assuming that each family was composed of five inmates, the number of people living in West Longrigg was 270, or nearly 300, in March 1905.

Water supply – On 9th March 1905 one stand-pipe was provided in West Longrigg, to which everyone had to go with a pail for the household supply of drinking water. The house furthest from the stand-pipe was about 130 yards from it. Some of the houses have barrels for catching roof water, which, on account of its softness, is used for washing purposes.

Wash-house Accommodation – There is no wash-house accommodation.

Coal-house Accommodation – No coal-houses are provided.

Domestic Sinks – There are no domestic sinks provided in any house.

Privy Accommodation – The 'conveniences' provided for this

population on 9th March 1905, the date of inspection, were as follows:

For the 34 inhabited houses (with approximately 170 people) on the north side of the public road, two sets of public privy ashpits, each divided into three privies, have been provided.

For the 20 inhabited houses (with about 100 people) there are two sets of public privy ashpits, one with two privies and the other with a single privy. All the privies are of the same structure, and as described in Mr Barclay's report to the Local Government Board of 23rd April 1903, which was to the following effect: 'These erections are of brick, with brick floors and wooden roofs, and wooden unlocked doors: a low brick wall with wooden cope provides a seat for the users of the privy: a large ashpit behind receives the droppings and the refuse of the houses'.

It might be added that not only are there no locks on the doors, there are not even catches or hooks or any means provided to close them from the inside. The ashpits behind the privies are large, and enclosed by brick walls about two feet high, with earth floors and without any roof.

The floors of the privies were littered with faeces on the day of my visit. They constituted a nuisance of recurring type. [Report on the Sanitary Condition of Longrigg, Lanarkshire, by Dr F. Dittmar, dated 13.3.05, in *Royal Commission on Housing in Scotland, Evidence*, Vol.IV (1921), Evidence of Dr F. Dittmar, dated 12.3.13, p.45]

THE SANITARY CONDITION OF HAMILTON, 1909

In 1908 Hamilton's Sanitary Officials reported on the pollution through farmland manuring of the town's water supply and after an outbreak of scarlet fever the Board sent its Medical Inspector to inquire. The following is an extract from his report.

Household Refuse: Most of the town is now on the portable bin system, these being emptied daily in the commercial part of the town, and twice or thrice weekly in the residential parts. Tenement property that is on the bin system is also attended to daily. All this work is finished before 10.00 a.m. In addition to the 'Bins' there are still some ashpits in the town (234 at 15th May,

1908) but most of these are dry and contain no excreta. Ashpits are emptied once a week or once a fortnight depending on circumstances. There are still some privy ashpits in Hamilton, of which I saw those at Earnock Rows. They are emptied by the Burgh Authorities fortnightly as a rule, but weekly during warm weather. The Colliery Company keep them clean and regularly disinfect them.

Nuisances: Privy middens are the cause of recurrent nuisance unless attended to; but they appear to receive attention in Hamilton, and those remaining will be abolished as opportunity offers. But there is evidence of nuisance, and that of a kind that should be dealt with, in the Burgh. In this connection I would draw special attention to the backyard in Burnside Lane . . . The yard is unpaved, uneven, and was in a dirty condition when I visited. There was also a W.C. on the ground floor where the lock had been forced, and the apartment was in a state of indescribable filth – in fact littered with faeces . . .

The property in Burnside Lane is, I am informed, occupied by a low class of tenant, but it ought to be kept in a better condition.

The yard should be paved in the first place, and steps taken to have it kept in a passable state of cleanliness. In my visits to various parts of the town I was struck by the number of back yards that require paving. I would suggest that the Sanitary Inspector be instructed to visit and report in detail all the back yards and passages in Hamilton that, in his opinion, should be paved in whole or in part. The Local Authority should then put in force the powers they possess and call upon the responsible parties to carry out the necessary work.

Dairies, Cowsheds and Milkshops: A number of them, especially those recently constructed are satisfactory in structure and in other respects, and were kept clean. Most of the cows were found clean, and showed evidence of recent grooming.

But several of the byres are by no means satisfactory in structure or in point of cleanliness. I would draw the Local Authority's attention to the following:

Tennant's Byre, Brandon Street – this is a modern well-constructed byre, but it is defective in respect of ventilation. The cow-keeper spoke of improving the ventilation in this case.

Mrs Morrison's, 11 Woodside Walk – the byre is small and

defective in structure. It is also defective in ventilation, the only means of ventilation being provided by some spaces produced by the shrinkage of the weather boarding of which the byre is largely constructed. The yard space is very small, and the dungstead is immediately outside the door of the byre. There is only one boiler provided and there is thus a risk that body clothing may be washed there as well as the milk dishes.

Thos. Dick, Duke Street—There are two byres here. In the larger the floor is defective, and the ventilation is insufficient. The smaller, in addition to these defectives, has also a roof that is too low.

Jas. Leggat, Muir Street—In the boiler-house of this cowshed there was, on the day of my visit, a washing tub that contained a petticoat. There are two byres here, and neither was in a satisfactory state of cleanliness when I saw it. The grips were unduly full of manure; the cows were in need of grooming.

Miss Hamilton, Wellhead Road—The milk-house here communicates directly by a door with the dwelling-house: the door was open on my visit. Domestic washing was being conducted in the boiler-house when I visited. The byre seemed to be over-crowded as two cows and a calf were standing outside the stalls, there being no room for them elsewhere.

Alex Robb's, Burnbank Road—Pigs were housed within a wooden shed used for storing straw and bedding for cattle. A corner of this store-house was railed off for the pigs. This is not a suitable place in which to keep pigs, and is contrary to the byelaws in force in the Burgh.

Pig Styes: A pig sty outside Miss Hamilton's milkhouse has a floor made of old railway sleepers. It was in such a construction as to constitute a nuisance for the presence of liquid and solid filth when I saw it. [Report by Dr F. Dittmar on the General Sanitary Condition of the Burgh of Hamilton, dated 6.4.09, in *Hamilton Public Library* L352.6(4143)Ham]

AN ELEMENTARY GRASP OF SOCIALISM: HOUSING THE FIFE MINERS, 1910

In 1908 the Royal Commission on the Mines, after visiting Lanarkshire, expressed concern about Scottish housing conditions. In January the following year, the Miners' Union approached the Scottish Secretary to

institute a housing inquiry and after some consideration, the County Medical Officers of Lanark, Ayr, Stirling and Fife were asked for a report. The extract here is from Fife, whose Medical Officer, Dr Dewar was subsequently appointed a Board Medical Inspector.

General Conditions and Causes of Defective Structure

So far as the essential conditions bearing upon health are concerned, the great majority of the houses inhabited by miners in Fifeshire reach a good or fair standard. So far as actual house condition is concerned – that is, disregarding for the moment sanitary accommodation such as privies, closets, ashpits, wash-houses – the proportion of miners' houses in Fifeshire to which serious exception could be taken is small, certainly not over eight to 12 per cent . . . It is right, therefore, to emphasise this fact that these terms of criticism and disapproval apply only to a small proportion of the housing accommodation provided for the coalminers of Fifeshire.

In certain mining hamlets in Fifeshire, defects, and even partial dilapidation of dwelling-houses due to subsidence from underground workings, have been produced to a serious extent. I am given to understand that this result occurs only when the workings are comparatively superficial, is specially prone to occur when the workings are abandoned, is invariably so quiet and gradual that actual injury to the inhabitants of the houses so affected is unknown, and that, once it has commenced, its progress, extent, and termination can be predicted with considerable precision. Three villages or townships may be selected as types manifesting in remarkable degree the effects of subsidence. These, situated many miles apart, are Parkneuk, on the outskirts of Dunfermline; Little Raith, about a mile south of Cowdenbeath on the Great North Road; and Thornton, near the junction of that name. In Parkneuk, subsidence has recently taken place to a striking extent. The larger number of the houses face the roadway, which originally inclined at a moderately uniform gradient, then became markedly undulating, and is now resuming its old uniformity at a lower level. As a result of this, the continuity of the water-mains has been frequently broken. Several of the houses show large rents in walls and roof, one or

two show marked distortion of their roof ridges, a window fell entirely out at a recent date, shelving in the rooms is bent and broken, and on the occasion of a visit a few weeks ago the front wall had gaped so widely behind the doorway that from within a large angular gap allowed the sky to be seen. These defects are rectified by patching with fair promptitude, the workmen explaining somewhat naively that there was no use doing the restoration thoroughly until the process of subsidence was complete.

At Little Raith the effects of subsidence are scarcely less marked. On the occasion of a visit seven months ago . . . the signs of rack and strain were visible in a number of house walls: several stones and bricks, even the large stones forming the sill and lintel of a window, had been dislodged from their position. In one house the door was jammed half ajar and could neither be opened further nor closed, the grate had been loosened from its setting, and a large seam gaped in the walls of the kitchen.

At Thornton the effects of subsidence are more general. Here, so far as I am aware, there is but little injury to the houses, which are mostly of the good type; but the subsidence has been so great that the sewer in Station Road – originally of low gradient, the street being nearly level – has ceased to maintain its original fall, so that its flow is now in the opposite direction. Here the station buildings have had to be shored up with heavy timber as a precaution.

Internal Conditions Described in Detail

The great majority of the dwellings occupied by miners in Fifeshire are houses of two or three rooms. Much the larger number of these buildings are of one storey, though, it is clear from the plans submitted to me for approval and criticism almost every day or two that two-storey houses are becoming relatively more frequent.

Until the eldest members of the miner's family reach the age when employment is commenced, the ordinary house is of two rooms. The kitchen is paved with square brick tiles, or, if of more modern construction, is floored with wood. The beds, usually two in number, are in recesses with a partition of wood or brick.

The old-fashioned and abominable box-bed of the burghs and the agricultural districts is very rarely met with. All the family sleep in the kitchen, the mother explaining, in countless cases, that though there is a bed in the 'room' the children will not sleep in it since the kitchen is warmer. The 'room', smaller in area, is almost invariably wood-floored. As a rule it contains a bed, but, unless lodgers are kept or the eldest members of the family have reached adolescence, it is not habitually used. The 'room' is generally found to contain one or two bicycles, the perambulator, a trunk or two, or the like. It is not made use of as part of the habitual living accommodation of the house. The ceilings are fairly high, eight and a half feet to nine feet being an average height. The floors are generally at a height of one or two steps above the level of the street or adjacent ground. This diminishes the tendency to dampness, and also proves convenient by preventing the casual passer-by from seeing what is happening within, maintaining the privacy of the home. The opposite condition, however, when the floor is from three to six inches below the level of the street or road, is to be seen in quite a number of 'rows'. It is difficult to conceive the motive which led the original builders of these houses to perpetuate this condition. In wet weather, especially, the inconvenience resulting is sometimes very great.

Accessories of the Miner's Dwellings

When making casual visits to the mining communities, the most obvious feature threatening the comfort of the people is the existence of the ubiquitous ashpit or privy-midden. So long as there is not a very plentiful water-supply and an efficient drainage system (which implies a proper means of sewage disposal), the ashbin cannot be substituted for the ashpit, though the former is enormously to be preferred to the latter, especially in densely populated centres, mining or otherwise. The ashpit, regarded as an existing though a regrettable condition, is to be considered from the point of view of position, construction, and condition. If all the ashpits were properly covered – that is roofed over – properly drained, properly used and frequently emptied, they might permissibly be erected within 20 or 25 feet of dwelling

houses – a great convenience for those engaged in domestic work. But ashpits never are properly used. All sorts of filth, liquid and solid, are deposited therein, and they are emptied at irregular and often at long intervals. In hot, still weather, such ashpits may prove very offensive even at a distance of 60 feet or more. In view of the fact that the over-full and ill-kept ashpit is the rule, I consider that none should be permitted to be erected at less distance than 30 feet from the nearest dwelling, even though the restriction will entail, as I am well aware, a considerable amount of inconvenience to those house-workers who have to pass to and from them many times a day . . .

More important even than construction of ashpit is its proper use and frequent emptying and cleansing. It requires but an elementary grasp of socialism to perceive that she who deposits dead animals or putrid fish in the open ashpit in the middle of the 'square' is not achieving the greatest good of the greatest number. But when the retort is made, 'How otherwise can I dispose of them' I confess I have no answer, for in many of these mining villages there is no available ground wherein such extremely offensive matters could be disposed of by burial.

The consideration of privies is closely associated with that of ashpits. In certain communities already referred to, such as Bowhill and Kelty, water-closets are general. In the great majority of the mining centres the sanitary accommodation consists of privies, rarely or never containing pail, all but invariably of the privy-midden type. The remarkable fact is everywhere encountered that these are used by only a very small proportion of those for whom they are provided. The privy for the use of one household is well kept almost always: that common to two or three families is usually found in a satisfactory condition; those provided for the joint use of a larger number of houses are practically never so. Once the condition of a privy has become bad, it speedily becomes much worse. The woodwork is destroyed; the doors are loosened on their hinges so that they will no longer lock or even freely open and close. Soon they are subjected to abuses of all sorts and rapidly pass into disuse altogether. The proximity of such privies to the dwelling houses is a source of discomfort and danger to health, frequently

necessitating the closing of windows in hot weather, just when there is most need that windows should be freely opened. The ideal remedy in all centres of population is to replace the privies by water-closets. When that is not feasible, or until it becomes so, a privy should be provided for every two or at most three households and a key retained by each.

I have referred above to the provision of a coal-house. It may be urged that this is not very obviously related to sanitation. I cannot agree. Nor, I think, can this contention be maintained by any who are familiar with the houses of miners. It is impossible to divide the phases of domestic sanitation into isolated compartments. The putrescent contents of an ashpit promote the occurrence of phthisis and allied maladies by compelling the household to sleep in a room whose windows are closely shut and whose atmosphere is consequently vitiated. The want of a coal-shed, with the consequent necessity of making a coal-store under the bed, makes cleanliness impossible, and so dispirits the housewife, whose labours, no matter how zealous, are bound to prove ineffective. Where the coals are found under the bed, where the mantel shelves and picture frames are thick with dust, the towels dirty, the flies innumerable on walls and ceiling and uncovered foodstuffs, and there, when one child contracts diphtheria, all the other children are in turn affected. An elementary requirement of domestic hygiene is the provision of a coal-shed for every dwelling. [Report on Housing Conditions of the Miners by Dr T.F. Dewar, Medical Officer for Fife, Annual Report by the Medical Officer, Fife, 1909, in SRO HH 62/37]

HOUSING IN HAMILTON, THERE'S A LOT TO BE DONE: THE MEDICAL INSPECTOR'S REPORT, 1914

During 1913 Hamilton proposed a housing improvement scheme at Low Waters and the Board sent a Medical Inspector to inquire. The following is an extract from his report, after which the Board urged the Council to implement its scheme.

Nos. 13, 15, 17 and 19 New Wynd: This block is at the foot of the street. It is in bad repair. The roof on the side facing the street

seems all right. In an occupied part under No. 17 is a water-closet which is running to waste and making mud everywhere. The stream (the Cadzow Burn) flows immediately behind these houses. All household refuse is consigned to it. Even from the upper rooms it is emptied through the skylight on a steep roof.

Nos. 13 and 15. Two-roomed house. Sink and water in. Windows made to open. They are broken. House in disrepair. Very damp walls. Rent 10s. a month for the two rooms. At former visit, one of the two rooms had been temporarily let to a married couple. No bed. Only bedclothes on the floor.

Two stairs up, floor of landing extremely sagged.

House of one dark room with roof sagging very badly. Occupied by parents and two children. No water in. No water-closet. Rent 8s. a month.

House of one room. Rent 8s. a month also.

No. 17 – Ground floor house. Tenant out. Door locked. This and No. 19 (one block) was formerly an inn.

No. 19 – House of one room, one stair-up. Here occupant has lived for twenty-seven years. Two beds here. Only two persons live here. Floor in poor condition. Rent 8s. a month.

Same floor. House of one room. Rent 5s. a month.

Same floor. House of one room. Rent 2s. a week. Here reside a couple and son aged six. This house is evidently very well kept.

Same floor. Room with bed-closet. Parents and three children here. Though one stair up, this room has cement floor.

Attic (two stairs up). House of one room here is pierced by the chimney of the whole tenement in an extraordinary way. This old attic is wood lined. It has a cooking stove. Occupant has lived here for eleven years. She pays 1s. 6d. a week rent. This house was very close, dirty, and ill-smelling; a smell of Polish or Neapolitan rather than of Scotch dirtiness.

House of one room on same attic. Occupants, woman and girl. No furniture. Shake-down only.

No. 24 – House of one room opposite the block above described. It is on the level of the street (up a few steps). It opens directly on the street without vestibule. Two windows; one does not open. Dark, ill-smelling house. Rent 9s. 4d. a month. A woman is washing in it. There is no washhouse.

Note: Many – quite a considerable proportion – of the houses referred to in this report were once the residence of the well-to-do; as is shown by the woodwork panels, a marble mantelpiece etc.

[Castle Street]: In this street, the houses – on one side only – face the high blank walls of the Palace, grounds on the other. Some are in considerable disrepair; all are old; some show signs of former grandeur.

The houses that face the street have the ground at the back about 10 to 12 feet higher than at the front. Closes run southwards and upwards from Castle Street, and other houses are entered from these narrow lanes.

109 Castle Street: House of one room up one stair. Occupants, parents and two children. House is dark; but that is intensified by the curtains over the window.

A group of houses is reached by a curiously romantic window stair over the court and under a penthouse roof. One of these is a clean and trim house. These have large windows; this was evidently at one time a house of some pretensions.

Generally speaking this locality is rather filthy. At my second visit, I saw several women – one merely a girl, another quite an old woman, wandering about bare-footed (in December) through the most unclean places.

205 Quarry Street: Here passages 32 inches broad have been up within the last ten years on both the first and second storeys.

House entered from back-yard under stair. This backyard is very dirty. Domestic washing going on here while an old man lay in bed wheezing with bronchitis. This and the next-mentioned house are the best in the 'land', and fairly well kept.

207 Quarry Street: Ground floor, right. Damp alleged to exist here. This is the dirtiest house of the series. The mother of the house, on learning the purpose of my visit, said: 'There's a lot to be dune here to mak' the hoose richt.' I agreed.

House entered from back-yard, which is notably dirty. House of one room. Floor defective. One end of room dark. Rent 10s. a month.

[18 Burnside Lane]: Walls of concrete blocks, some solid, some hollow. I have never seen these elsewhere. They are said to be a local invention, and apparently serve and last well.

House of three rooms occupied by father, son and daughter. Good window to south. Rent 4s. a week.

Here the buildings generally, including an old and disused brewery, are somewhat crowded. Repairs, I was informed are here secured with great difficulty. In the yard were a dirty grating and two large, full, open ash-bins. At my second visit, small children were rummaging for pieces of coloured paper among the filthy contents of these bins!

58 Gateside Street :These houses are built of concrete blocks and have a substantial appearance. Behind them there is a well-paved court. The houses on the first or second storeys enter from open gangways or platforms. These houses are provided with ash-bins which are emptied daily: but the tenants deposit their refuse very carelessly; even, it is alleged, contenting themselves, on dark winter mornings, with throwing it from the platforms towards the ash-bins. [Report on Housing Conditions in Hamilton, by Dr T.F. Dewar, dated, 12.1.14, in *Royal Commission on Housing in Scotland, Evidence*, Vol.IV (1921), Appendix No.CLXXV, pp.197-9]

VAGRANTS AND THE CASUAL POOR

VAGRANTS AND THE CASUAL POOR: THE WANT OF SUITABLE ACCOMMODATION, 1847

During 1847 the Board began to note the impact the trade depression, cholera and the potato famine was having on vagrancy and the following is an extract from its second Annual Report.

The dearth of food in Ireland, and in some parts of Scotland, has this year greatly increased the number of casual applicants for relief, first in those towns on the west coast, which have a regular communication with Ireland, and subsequently in almost every considerable town in the country, as well as in some of the rural parishes, to which these immigrants had proceeded in quest of work or of alms. The sickness which has recently prevailed among the lower classes, more particularly amongst the Irish labourers, on some of the lines of railway now in progress, has also caused a similar increase of this class of paupers in Edinburgh, and in most of the considerable towns in the vicinity of those lines.

The want of suitable accommodation for this class of sick poor has, in these circumstances, become a serious evil in many parishes. The dread of infection shuts against them the doors of those houses in which the parochial officers have usually found temporary accommodation for the poor, and hitherto few parishes have provided any separate house for their reception. The consequence has been that some have remained in their huts by the railway, and some have unavoidably been lodged in outhouses and in other places unfavourable to their recovery, but from which their condition made it impossible to remove them to any considerable distance.

In connection with the increase in the number of casual poor, our attention has been directed to the prevalence of vagrancy. We have no means of ascertaining the number of vagrants in Scotland, but we have reason to believe that it is large. Whatever

measures it may be desirable or necessary to have recourse to for the purpose of checking a practice so closely connected with the growth of immorality and crime, belong to the administration of the police, rather than to that of the Poor Law. With vagrants who are not in the receipt of Parochial relief, neither this Board nor the Parish authorities have any pretext for interfering. In some cases, recipients of Parochial relief – from habits early contracted, from constitutional restlessness, or from immoral and criminal predilections – wander about the country, and in some of the more remote parishes where the Poor Law is still imperfectly administered, begging within the Parish is tolerated or sanctioned by the Parochial Boards; but the great body of the vagrants in all parts of Scotland, and almost all those who pass from Parish to Parish, and County to County, are not recipients of Parochial relief in any Parish. Where cases of vagrancy occur amongst the poor on the roll who receive an adequate allowance, it has been found extremely difficult, without assistance from the police of the country, to put an end to the practice. Some of the Parochial Boards have attempted to check it in individual cases, by diminishing the allowance from the parish, and offering to restore it to its original amount, as soon as the pauper shall have relinquished the practice of begging; but the effect of this diminution is, to give the pauper an additional pretext for following that occupation. Some Parochial Boards have proposed to withhold the allowance altogether, unless the pauper desisted from mendicancy. This course appears to be sanctioned by the law, which grants a Parochial allowance to a poor person, on condition that he shall not beg. But if the allowance is withheld, the pauper is necessarily thrown upon the charity and sympathy of the public, his necessities will appear to justify his appeal, and he will probably have been placed in a position which will enable him to indulge his inclination of vagrancy, with a better prospect of making it a profitable occupation. To remove from the roll a pauper who has an inveterate habit of begging, would, therefore, in many cases, be a reward rather than a punishment. The only efficient means of checking vagrancy in poor persons already on the roll of a parish, without the aid of the police, would be to erect a poor-house, in which habitual

beggars, amongst the poor on the roll, could be relieved, and restrained from, wandering through the country. But no Parish, whose population does not exceed 5000, can raise by assessment funds for the erection of a poor-house, unless it can combine, for this purpose, with some of the adjoining Parishes. There are, therefore, many cases in which the Parochial Authorities cannot effectually check vagrancy, even amongst the poor on the roll, without assistance from the police. [*Annual Report of the Board of Supervision, 1847. (P.P. Vol. XXXIII 1847-8) pp.iv-v*]

THE DEATH OF JAMES MCEWAN, PROFESSIONAL BEGGAR, EARLSTON,
1858

The following is from a minute of the Board on the death of a Border vagrant, after receiving a letter from the Crown Agent and a report from their Visiting Officer.

The Board are of the opinion that Mr Murray, the Inspector of Melrose acted improperly in causing James McEwan to be removed to the house for sick casual poor at Galashiels without having first ascertained that he could be removed hither without injury. Mr Murray was fully informed that the poor man was seriously ill yet he neither went himself nor sent a medical man to visit him before removing him, and there is great reason to fear that the death of the pauper was thus accelerated. The Board had hoped that an Inspector of Mr Murray's standing intelligence and character might have been relied on to take every proper and humane precaution in such circumstances, and it is with regret and disappointment that they find themselves called upon to convey to him their marked disapprobation of his proceedings in this case.

The Board have learned with satisfaction that Mr Smith, Inspector of Poor for the Parish of Earlston, has been acquitted of the criminal charge in the case of James McEwan for which he was brought to trial, but the Board cannot acquit Mr Smith of a grave error of judgement in dealing with that case by which there is reason to fear that the death of McEwan may have been accelerated.

James McEwan above 70 years of age appears to have been a professional beggar who was in the practice of feigning disease or disability with a view to excite compassion. The Inspector appears to have been aware of McEwan's habits and impostures and when applied to for relief on the 13th and 14th of October 1857 by and on behalf of McEwan to have assumed that the allegations of disability and destitution upon which those applications had been founded were but repetitions of the impostures which McEwan was known to have practiced. The Inspector appears to have overlooked the fact that such practices could not give McEwan immunity from the diseases to which all men and especially men of his advanced age are liable, but that his previous as impostures made it more difficult to determine the truth of his allegations and therefore the more necessary to have the opinion of the Medical Officer. There can now be no doubt that at the date of application to the Inspector McEwan was suffering from the disease which terminated fatally a short time thereafter and a competent medical man could have found no difficulty in detecting its presence. The Inspector hastily assuming the old man was feigning the disease from which he was really suffering did not consult the medical officer and refused relief on his own unaided and erroneous judgement thereby committing a grave error.

In cases of alleged disease or disability where the Inspector may have reason to doubt the truth of the allegation the only safe or proper course is to obtain a medical certificate founded upon the personal examination of the applicant by the medical officer.

The Board have also to express their disapprobation of Mr Smith's neglect or disregard of the Statute (Section 55) and of the Rules of the Board. By these he is required to keep a record of the applications made to him for relief and of the grounds for refusal. But Mr Smith thought proper to neglect or disregard that obligation. He has thus made it impossible now to ascertain in what other cases or on what grounds he may have refused relief.

The Board cannot view without painful doubts the omission by an Inspector to preserve the record required by the Statute and the Rules. To all parties and especially to an Inspector who does his duty and who has therefore nothing to conceal that record

duly kept affords the same kind of security that is afforded in pecuniary transactions by properly kept accounts and the omission cannot fail in either case to produce distrust.

Had Mr Smith performed his duty by keeping that record he would probably have hesitated to record the grounds of refusal in Mr McEwan's case without further investigation and might thus have escaped the mortification and loss to which he has been subjected. [BS MB 6.5.58, in SRO HH 23/7]

THE DIMINISHING EVIL OF VAGRANCY, 1861

In early 1861 the newly formed Society of Inspectors of Poor petitioned the Board on extending the laws relating to vagrancy and the following is from the Board's consequent minute.

The only vagrants with whom the Board or the Memorialists are officially concerned are such as are chargeable to parishes and it appears to the Board that the Memorialists have probably somewhat overstated the number chargeable at one time, which they estimate at about 5000. From the returns of the total number of casual poor, of all classes and ages receiving relief on the 1st January and 1st July 1860 it appears that the mean of the numbers at those two dates is 5494, which may be assumed to be a close approximation to the average daily number chargeable throughout the year. From that number must be deducted all the adults and children classed as casual poor, such as persons, bona fide, seeking employment and others, who are not habitual vagrants, that is who are not persons seeking to live by vagrancy. The Board are inclined to believe that after these deductions have been made, the number coming properly under the designation of habitual vagrants who are chargeable at one time cannot safely be estimated at more than 2000 or at most 2500 and the larger of these numbers gives an average of something less than three for each of the 883 parishes in Scotland or one such vagrant to every 1200 of the population assuming it to be now 3,000,000.

Although this proportion does not appear to the Board to be so alarming as to call for special legislative measures on account of its magnitude, still if the numbers were progressively and rapidly

increasing that consideration might give rise to anxiety. But looking to the returns of adult casual poor receiving relief on the 1st January and 1st July for the last ten years, it will be observed that far from increasing the numbers have progressively diminished, and for the year 1860 were less than for any previous year since those returns were first called for. This fact, viewed in connection with the progressive increase of the population appears to the Board to indicate a progressive diminution of the evil to which the Memorial directs attention.

At the same time the Board are by no means insensitive to the moral evils frequently resulting from vagrancy, and they are aware that the personal trouble and annoyance to which the Inspectors are sometimes subjected by the demands of the vagrants are to be measured rather by the number of applications than by the number of persons chargeable at one time. But this Board very much doubt whether these are evils and inconveniences that could be remedied with advantage by Act of Parliament. If the law were made very stringent it would not be uniformly enforced. The old Scottish Acts and Order in Council have fallen into disuse because of their excessive severity, and the measures actually resorted to in the different Counties are consequently not uniform. But in England the vagrancy laws are of comparatively recent date and are as stringent as the legislature have considered it expedient to enact. Yet in England the same evil has been quite as much complained of by the Poor Law Authorities as it is now by the Memorialists and on similar grounds. It was not until the Poor Law Authorities in England took measures to protect themselves, by regulating the manner of affording relief to that class of applicants, that the inconvenience and annoyance to which they had been subjected were in some degree mitigated. This result of the attempts to suppress, by legal enactments, vagrancy in England, does not hold out any great prospect of success in similar measures in Scotland.

The Board therefore are not prepared to recommend or promote the introduction for a new Vagrancy Act for Scotland. The evil does not appear to them to be of proportions so alarming as the Memorialists seem to have considered it and it is an evil which, according to the best available information, has been and

continues to be diminishing. It may be hoped that the establishment of an efficient constabulary in every County will tend to accelerate that diminution and Parochial Boards have not generally had recourse to the means which it is competent to them to adopt for the purpose of regulating the mode of affording relief to that class of applicants, means which would still further tend to diminish the attractions of vagrancy. [BS MB 11.4.61, SRO HH 23/9]

JOHN OGILVY AND FAMILY, SUFFERING FROM SMALLPOX, LITTLE DUNKELD, 1863

In the summer of 1863 the Ogilvy family were passing through Perthshire when their child contracted smallpox. The Inspectors of Poor of Moulin and Dunkeld gave the family some 'assistance' and quickly passed them on. The following is the Board's minute on their action.

The Committee regret to find the Inspectors of Moulin and Dunkeld either so imperfectly informed or so regardless of their duties with reference to the casual sick poor as they have been in the case of John Ogilvy, his wife and sick child, and warn them to be more careful in future. They are both much indebted to the Inspector of Little Dunkeld for the manner in which he dealt with the case. Had the child died in consequence of the course pursued by the Inspectors of Moulin and Dunkeld the consequences to them would have been very serious. He has probably by his attention to the case saved them from the pain and disgrace of being prosecuted on a criminal charge.

The Committee have further to express their surprise and regret at finding in the letter of the Inspector of Moulin two statements which are now ascertained by Mr Falconer to be unfounded. They are unwilling to believe that Mr Ferguson, intentionally misrepresented the condition of the accommodation for casual sick poor in his own Parish, but if they acquit him of wilful misrepresentation they must assume that he was altogether ignorant of the condition of that accommodation for which he was responsible. In either case it must be obvious to him that the Board cannot now rely upon the accuracy of this statement even

with regard to matters in his own Parish of which they are entitled to assume that he must have personal knowledge.

His allegation that there is not in Little Dunkeld accommodation for casual sick poor is also proved to be erroneous, and tends still further to diminish the confidence of the Board in the accuracy of his statements. They recommend to Mr Ferguson to be very guarded in his statements for the future, and not again to mislead this Board by rashly asserting what he has not ascertained to be true. [BS MB 10.9.63, in SRO HH 23/11]

BANNOCKBURN'S LODGING HOUSES: THE WANT OF DECENCY, 1872-3

The first extract is a report by St Ninian's Sanitary Inspector on Bannockburn's lodging houses. The Board subsequently confirmed St Ninian's rules and regulations and the remaining extracts are from reports on their implementation.

I visited all of the lodging houses and found the want of accommodation in a great number very far deficient from what the Public Health Act allows, and there is a want of decency with so many men mixed up in families having only one apartment. The measurements are as follows:

Mrs Fullerton, Quakerfield, has a house of two rooms, the lesser room gave only 200 cubic feet for each inmate.

Hugh Flin has two rooms, the one where the lodgers are gives only 209 c.f.

John O'Brien, Newmarket, has two rooms, the largest gave 255 c.f., the smallest only 197 c.f. to the inmates.

Mrs Collinson, Stein Square, has two rooms, the smallest gave 156 c.f. to the inmates.

John McFarlane, one room gave 280 c.f. to its inmates.

Peter McFarlane, one room gave 230 c.f. to its inmates.

Terrance Nollin, one room gave 362 c.f. to its inmates.

John Welsh, one room gave 301 c.f. to its inmates.

Daniel O'Brien, two rooms gave 549 c.f. to its inmates.

Michael Hanning, one room gave 279 c.f. to its inmates.

[Blank], three rooms gave 224 c.f. to its inmates.

Norman Stewart, two rooms gave 251 c.f. to its inmates.

Duncan McGregor, one room gave 280 c.f. to its inmates.

Andrew Hogg, two rooms gave 319 c.f. to its inmates.

Jonathan Esslement, East Plean Cottages, three rooms, the one where the lodgers are kept gives 362 c.f. to each inmate.

David Johnston the same. James Rae the same.

David Ledger, two rooms, gives 274 c.f. to each inmate.

John Smith, two rooms gives 247 c.f. to each inmate.

I would consider it necessary to have the provisions of the Public Health Act referring to the regulation of lodging houses carried into effect. [Report of James Archibald, Sanitary Inspector, dated 2.9.72, St Ninians Parochial Board Sanitary Reports, 1871-91, in *Central District Archives* XA2/1/19]

During the past month I have visited all the lodging houses, in some of them they have failed to comply with the instructions they received some time ago. The Clerk sent notices to them all if they did not comply with the provisions of the Public Health Act, legal proceedings would be adopted against them. The houses in Tait Close are all overcrowded. They received instructions sometime ago not to keep any lodgers owing to them having but one apartment, but have neglected to do that. Three days have been allowed to put them all away, failing this application will be made to the Sheriff. Should any sickness occur during the warm weather it would be a very serious matter both to themselves and the surrounding inhabitants . . . I called on Janet Dick or Kinsale as requested by her neighbours for keeping an overcrowded house. She has two apartments with six children aged 13, 11, 9, 5, 3 and 1 respectively and also two lodgers. Instructed her to warn the lodgers away . . . [Report 2.6.73, in *ibid.*]

Bannockburn. Visited all the common lodging-houses and ordered the whole of them to be whitewashed inside, and in all cases my requirements have been attended to.

East and West Plean. Called on the lodging house keepers there, and ordered the houses to be thoroughly cleaned, some of the beds in the houses to be taken down being overcrowded, which was complied with . . . [Report, 29.9.73, in *ibid.*]

AYR'S ILL-KEPT LODGING HOUSES, 1878

In early 1878 the Inspector of St Quivox Parochial Board sent the Board a report on Wallacetown's lodging houses. After the Police Commissioners of Ayr, who were the Local Authority, prevaricated on prosecuting unregistered landlords, the Board sent Dr Littlejohn to inquire. The following is an extract from his Report. Ayr subsequently asked the Police to assist in inspecting the lodging houses.

The conclusions I came to as the result of my inspection was that there was no proper supervision of them [the lodging houses]. That the provisions of the clauses relating to Common Lodging Houses were not enforced, and that in consequence from the filthy state, especially of the various back courts there was great risk of disease being actually engendered, and still greater risk should infectious disease happen to be imported into the district on it assuming an epidemic form.

I came to this conclusion with some degree of reluctance as the Inspector impressed me favourably as an intelligent and for his years an active officer, and the Burgh Authorities were anxious to discharge their duty to this district of the town. The Inspector however is singlehanded, and has other onerous duties to discharge. He has no assistance from the police in regulating the Lodging Houses and as each Lodging House should be visited daily it is impossible for him without aid to overtake satisfactorily this important duty.

It was urged on behalf of the Burgh Authorities that this district when taken over by them was (and still is) inhabited by a low class of the population and that the houses were of a poor description, that already improved dwellings were being erected on all sides, and that in the process of time the small cottage dwellings would be entirely replaced by houses of modern construction. Several recent improvements were brought under my notice and it was pointed out to me that the surface drainage had been pretty extensively improved.

There can be no doubt that this at one time outlying county district still maintains the characteristics of a dirty village.

The cottages have manure in all directions in their back courts, ill-kept piggeries abound, and privy accommodation is either

totally wanting or of the most offensive description. Ayr itself is one of our cleanest Scotch towns and such adjuncts as Wallacetown must be made to conform to the usages of a well ordered community. Accumulations of manure should be kept within moderate limits. Piggeries should be relegated to some field in the neighbourhood and sufficient privy accommodation should be provided.

Appendix: Lodging Houses licensed and unlicensed in Cross Street.

No.21 John McLauchlan registered for two lodgers. 3 however accommodated. House clean, but privy and midden behind bad.

No.27 Archer formerly John Stocks. Proposed to be registered for two beds. Midden and privy behind very bad.

No.36 Gorman formerly Regan. Not at present a Lodging House. Has been improved and was being cleaned out. Proprietor wishes to be registered for four lodgers. Large accumulations of refuse behind. No privy accommodation for lodgers.

No.43 Stevenson. Two rooms with two beds, clean, back courts, ditto, privy and midden satisfactory.

No.45 Crossman. Removed, very damp, house inhabited by a woman. Large court behind with unsatisfactory piggeries and middens.

No.45 McGill. Not kept now as a Lodging House. Clean.

No.45 Allison. Husband in asylum, four of family, two lads lodge in one apartment.

No.47 McGarvey. Now in prison, a widow, McKedie now the tenant. Could keep five lodgers, house clean.

No.53 Ewans. Not registered, could keep two lodgers, clean.

No.66 Love. Not registered, could accommodate six lodgers in three beds, not clean. In the court behind too much refuse.

No.68. Alterations going on and a drain being put in.

No.88 Miller. House clean, three beds for lodgers and one for family.

The privy behind for the use of several families in a most filthy condition. The tenants complained to me of the liquid refuse escaping from the privy and entering their houses.

Wallace Street. No.16 Smith. Not registered, two beds available for lodgers. Side of house being taken down, apartment very clean.

No.38 Crosbie. Registered for seven lodgers, only five there at present. Beds clean. Walls of stair dilapidated. Front shop a rag store and broker's shop. Court behind dirty and privy bad.

No.45 Miller. Now a rag store, gone to 88 Cross Street.

No.46 Easton, now Regan, formerly of 36 Cross Street. Registration card fully exposed to view and clean.

No.64 Kelly. Registration refused, contains only four beds, some dirty. Room upstairs let to a matmaker. Collection of rubbish on this flat.

No.68 Innes. Four beds for lodgers, one for family, clean. In a separate cottage behind two beds in a ground floor and one above. Immediately behind a dilapidated privy, large middens with piggery. [Report by Dr H.D. Littlejohn on the Condition of Lodging Houses in Wallacetown, dated 10.10.78, Ayr TCM(PC) 14.11.78, in *Ayr Public Library* B6/21/5]

AGGRAVATING THE EVIL OF VAGRANCY: A GENERAL SUPERINTENDENT'S VIEW, 1888-92

The following two extracts are from G. Falconar-Stewart's half-yearly Reports to the Board. The Superintendent's area covered the Lothians and the South East. His suggestions were not implemented.

A subject which in many parts of the country is engaging the serious attention of Inspectors of Poor is the continual applications for relief from the tramp class. The number that apparently make it a trade to go from place to place, and demand a night's shelter, or make late application for casual relief, is, I fear, on the increase. Were destitution on account of trade depression the real cause of this increase, the explanation of course would be clear: but Inspectors inform me that during the past year they have not noticed the applicants to be of that class likely to be at all affected by this cause, in fact they appear to be professional tramps. In my opinion there should be no hesitation in dealing with characters of this kind firmly and in the manner which is clearly laid down on

the Circulars issued by the Board. In many cases, I fear, Parochial Boards shrink from incurring a little expense in providing proper means for testing these imposters, and approve of their Inspectors giving small sums of money – thereby encouraging idleness and aggravating the evil. [Report by G. Falconar-Stewart, Visiting Officer for half year ending 31.3.87, dated 20.4.87, in *Annual Report of the Board of Supervision, 1886-7*. C.5118. (P.P. Vol. XXXVII 1887) App.(A), No.4, p.17]

I quote the following instances where the administration is in my opinion unsound:

The Parish of A. [Jedburgh] has a Shelter House maintained out of the Poor Rates. Between the 1st of January and 31st December 1891, 1285 vagrants were given a night's shelter and a meal of brose. Every one of those were sent to the Shelter by the police, not one passing through the hands of the Inspector. All applicants are given a night's shelter unless under the influence of drink.

B. [Selkirk] Here, too a Shelter House is maintained by the Parochial Board. Between the 1st of January and the 31st of December 1891, 1,159 vagrants were given a night's shelter and, in addition, a small quantity of meal made into brose, when they desired it. Nearly all these were sent by the police, few, if any, passing through the hands of the Inspector.

C. [Hawick] A Shelter House is maintained here between the Parochial Boards in the Town and the Burgh; 1,249 persons were lodged therein between the 1st of January and the 31st December 1891. The police do not, in this case, now deal with vagrants, but the caretaker appears to relieve those who apply.

D. [Kelso] A Shelter House is maintained out of the rates. Some 937 vagrants were given shelter between the 1st January and 31st December 1891, by the police, including a few relieved by the Inspector.

I instance these cases as showing that there is still great necessity for stricter administration in dealing with the vagrant class.

The relief afforded to this class cannot, I admit, be described as luxurious – a plank bed and a meal of brose; still the mere granting of a night's shelter to all and sundry who may apply leads them to consider it as a right rather than as a privilege, and prevents them

from making any efforts towards self-support, while it undoubtedly ultimately tends to augment the army of paupers.

No efforts are made to find out if the applicants are able-bodied or have any means of subsistence, or if they are suffering from any disease of an infectious nature.

The argument made by the police is that, as detectors of crime, they are much assisted by having all vagrants passing through their hands. This is possibly rather a sweeping assumption – that every one who happens, from whatever cause, to be a vagrant may be suspected of having committed a crime. It may be that the police are the best authorities to deal with the class, but at present I consider their doing so to be irregular. [Report by G. Falconar-Stewart, General Superintendent of Poor, for half year ending 31.3.92, dated 10.5.92, in *Annual Report of the Board of Supervision, 1891-2*. C.672. (P.P. Vol. XXXIX 1892) App.(A), No.2, pp.8-9]

THE DEATH OF THOMAS FARR: DISREGARDED HUMANITY, GALASHIELS,
1890

After receiving the precognition of the Crown Agent on the 'sudden death' of Thomas Farr, an itinerant, the Board issued the following minute. Its call for the resignation of the Inspector of Poor was rescinded when the Inspector acknowledged his error and 'threw himself on the leniency of the Board'.

Early in the morning of the 3rd July, Thomas Farr, an old man was found by a shepherd on the road side about five or six miles from Galashiels in a very exhausted condition. He was conveyed in an open cart to the Poorhouse at Galashiels. The morning was wet. The Governor refused to admit him until he should have received the usual authority from the Inspector. The man was taken in the cart to the Inspector's office, but instead of being immediately attended to as he ought to have been, the case being obviously one of extreme urgency, he was allowed to remain in the cart for about two hours exposed to inclement weather, when he was ultimately placed in the Poorhouse. The unfortunate man died at 3.50 on the following morning.

The delay in dealing with this case appears to the Board to have been wholly inexcusable. The only excuse alleged by the

Governor and Inspector for that delay, is the necessity they considered themselves to be under, to comply with the certain Regulations of the Board. (Parochial Officers, however, must be well aware that the object of Regulations is to save life and not to endanger or destroy it. In cases of extreme and pressing urgency the local officer must take the responsibility of acting as the special circumstances of the case present and the plain instincts of humanity may require.) In the present case, the dictates of common sense and the ordinary feelings of humanity appear to have been totally disregarded.

The Board are glad to be able to say that no case of so painful a character has ever before been brought to their notice.

With regard to the Governor of the Poorhouse, the Board are of the opinion that there is nothing whatever in the Rules to prevent him sheltering an apparently dying man in his office or in the Probationary Ward till the Inspector and Doctor could be communicated with, and that his failure so to act in this instance, where humanity clearly pointed it out as the proper course, lays him open to censure. The fact, if it be a fact, that the man had recently showed a suicidal tendency, is no excuse for the Governor's conduct, for the man could easily have been as easily looked after in the office or in the Probationary Ward, as in the cart and apart from that, his exhaustion was plainly so great as to forbid any fear of suicide. The Board accordingly hereby pass their severe censure on the Governor for his error he committed.

The conduct of the Inspector, however, appears to the Board to be far more blameworthy than that of the Governor. It was clearly the Inspector's duty in terms of Nos. 16 and 18 of the Rules relating to the duties of Inspector of Poor approved by the Secretary of State, to have afforded relief to this destitute person at once, and that without previously communicating with the supposed parish of ultimate liability. The relief required by the Rules is not confined to admission to a Poorhouse. The poor man should have been immediately taken for shelter into the Inspector's office or placed in an ordinary lodging house until the attendance of a medical man could be procured. The Inspector's neglect was all the more flagrant in as much as the Medical Officer of the Poorhouse happened to pass the Inspector's office while the

man was in the cart and saw both the man and the Inspector, and yet the Inspector did not avail himself of the opportunity of obtaining advice which the case evidently required, and any medical certificate which the Inspector might have thought necessary.

In the circumstances, the Board have come to the conclusion that it is their duty to dismiss the Inspector of Poor from his office, which they hereby do, in terms of Section 56 of the Poor Law Act.

As regards the medical officer of the Parish, the Board are not satisfied that the only charge made against him, ie want of promptitude in attending to the Inspector's summons, has been proved. In a case like the one under consideration, the Inspector should certainly have gone himself to the Medical Officer's house and explained personally the urgency of the case, instead of sending a note by the hands of another, the consequence of which was, that the Medical Officer does not appear to have been made acquainted with the necessity for his immediate attendance. [BS MB 10.9.90, in SRO HH 23/22]

ENCOURAGING VAGRANCY: THE BORDER SHELTER-HOUSES, 1900

In October 1900 the Board, after failing to induce the Border Parishes to abandon their Shelters, appointed Sir John Cheyne, the Sheriff of Renfrew, to inquire. The first extract is from his report on Jedburgh and the second from Kelso. The last four paragraphs of Kelso's were repeated in Jedburgh's. The Shelters were eventually closed.

Jedburgh. The Shelter-house at this place is worked on precisely the same lines as the Selkirk Shelter is worked, that is to say – able-bodied tramps are not excluded. The admissions have averaged in the last decade 1205 per annum, or, if only the last five years are taken – (as possibly should be done seeing that in 1891-94 the Newcastle Water Works attracted hosts of labourers from Scotland and so made the numbers in those years abnormally high) – 870 per annum. The building belongs to the Parish Council, and the expenditure in connection with it averages between £23 and £24 annually. [Report of Sir John

Cheyne, Special Commissioner under the Poor Law (Scotland) Act, 1845, on Jedburgh Shelter-House, dated 19.11.00, Jedburgh PCM 8.1.01, in *Border Regional Library* R/PR/1/10/10]

Kelso. Here too the same system obtained as is followed at Selkirk, viz: able-bodied tramps are not excluded, and the admissions taking the last 10 years have apparently averaged 1240, per annum. The greater part of the building is used as a Sick House, and it is therefore difficult to state the cost of the Shelter by itself, but the Inspector estimated the annual cost of providing tramps with food and fuel at about £6. He stated that the existing arrangement, which has been in force since 1883, and is believed to be approved not only by the Parish Council but also by the ratepayers, 'was made with a view to discourage public begging, and to avoid the serious responsibility of refusing shelter to the destitute'.

These facts will, I think satisfy you that the place is not extravagantly managed, but the question arises can the expenditure, inconsiderable as it is in amount, be lawfully defrayed out of the assessments levied for Poor Law purposes? To this question, of course, only one answer, a negative one, is possible. It may probably be urged, however, that the closing of the Shelter to able-bodied persons would not to any appreciable extent diminish the number of tramps passing through the Burgh, and that the only effect of such action would be to encourage mendicity and probably also disorder in the Burgh.

Upon this contestation, if made, two remarks suggest themselves to me.

In the first place, assuming it to be desirable, as I certainly think it is, that some provision should be made for sheltering and feeding the honest workman who is travelling in search of employment and has exhausted his means, it does not follow that it should be made by the Poor Law Authorities. On the contrary, seeing that it is mainly the Burgh that tramps come in large numbers, it occurs to me that the duty of keeping them off the streets and preventing them becoming a nuisance to the inhabitants devolves naturally upon the police, and after consideration I am disposed to think that the best, and a perfectly

satisfactory, solution of the problem is furnished by the recommendation upon the subject which was made by the Departmental Committee on Habitual Drunkards, etc, and will be found at page 36 of their Report (dated 25th April 1895). One reason for favouring it is that its adoption would leave intact the cardinal, and to my mind, most valuable principle of our Scottish Poor Law system that no relief of any kind is to be given out of the rates to an able-bodied person.

The other remark which I desire to make is that I am by no means satisfied that the maintenance of the Shelter on the present system is not a direct encouragement to vagrancy indeed. I am rather disposed to think that it is. It is in the highest degree improbable that all the persons who receive the benefit of 'the Shelter' are genuine seekers after work. I may point out that when the Parish of Stow 13 years ago refused to admit able-bodied persons into their Shelter-house the number of admissions fell in one year from about 1400 to between 50 and 60. The conclusion to which I find myself constrained to come is that your Board should at once represent to the Parish Council the illegality of the course which they are pursuing in giving relief to able-bodied persons and impress upon them that it is their duty to use the building in question (assuming that they use it at all) purely as a Sick House. [Report of Sir John Cheyne, Special Commissioner under the Poor Law (Scotland) Act, 1845, on Kelso Shelter-House, dated 19.11.00, Kelso PCM 7.1.01, in *ibid.* R/PR/1/11/6]

THE ROAD FROM KILMARNOCK, 1905

In 1905 the English Local Government Board appointed a Departmental Committee on vagrancy and one of the General Superintendents was called to give evidence on the Scottish position. The following is an extract.

In a town like Glasgow the number of tramps or vagrants will be very large? – Yes.

Does the Poor Law take cognisance of them? – If they apply for relief, then they are examined to see whether they are able-bodied or not. They get nothing but the poorhouse, of course, While you

are speaking of Glasgow I might give this little bit of information with regard to a parish that is within seven miles of Glasgow, which I visited lately. It is seven miles distant from Glasgow and about sixteen miles from Kilmarnock. I refer to the parish of Mearns. Between Mearns and Kilmarnock there is no shelter of any kind. It is a moorland road. There are a great number of tramps making their way from Kilmarnock into Glasgow. There is only one parish between, a large parish of moorland called Fenwick. The inspector of that parish lives within three miles of Kilmarnock, so that when they are coming from Kilmarnock they are not sufficiently broken down to apply to him, but when they walk these sixteen miles to Mearns they are completely broken down and not able to go on to Glasgow. There is a lodging-house there into which the inspector puts them for the night, and then they leave in the morning. During the year ended 15th May, 1905, he tells me that there were 342 persons who applied to him for relief. Of these 314 were tramps, so that there were only 28 people resident in the parish or neighbourhood who applied for relief. 95 are noted as coming from Kilmarnock or other Ayrshire towns into Glasgow, while 39 are noted as going in the reverse direction. These 39 had walked the seven miles from Glasgow and had felt that they were not able to tackle the sixteen miles on to Kilmarnock. Many of them are women with children, who state that they are deserted and are searching for their husbands who are employed at railway or other works as navvies. Others are women with illegitimate children. It is principally women who apply for relief.

There are a certain number of men, I suppose, who would not apply to the inspector at all? – Yes, a great many cases. In many of those districts the farmers allow the men to sleep in their lofts for a night. They know these places perfectly well, and they tell one another about them.

Is this system satisfactory in your opinion? – As far as our system of poor law is concerned, I think that with a little improvement it is good enough, but with regard to the tramp class who are constantly going about, women with children who have no education whatsoever, I think it is horrible, because they go from one parish to another, and no person has any interest in

them at all. They go on year after year. There should be some law to the effect that they could be taken possession of, and put into labour colonies and made to work. [Evidence of R.B. Barclay, dated 28.5.05 to *Departmental Committee on Vagrancy*. Cd.2891. (P.P. Vol. CIII 1906) p.226]

THE ROAD TO KILMARNOCK, 1907

The following is an extract from the same Superintendent's evidence to the Poor Law Commission.

Is vagrancy on the increase in Scotland now? – I have not any figures to show exactly, but during the last winter the number of applications that have been made to inspectors of the poor on certain routes have been very much on the increase.

Is one of your reasons [for placing them under the police] that, areas in Scotland not being very big, it would be very difficult to obtain anything like uniformity in the treatment of vagrants in contiguous districts? – My opinion is that the unit for Poor Law purposes is so small that you have no uniformity of treatment, and the only interest an inspector of poor of one parish has is to get quit of them, and to send them on to the next. I have been trying for some time to trace these vagrants up the different roads. A great number of them come from England, and they expect to be treated in the same way in Scotland as they are in England, to get their night's lodging in a casual ward and breakfast in the morning, and then to be sent on. My district goes down close to Carlisle, and I have tried to follow up these vagrants along the route, and it is very curious, to show the urgency of their appeals, that the first parish on the road out from Carlisle is Gretna, and the inspector of poor there happens to live off the road about half a mile from the tramp road, and he very rarely has an application. Then they get up to Dumfries, and the inspector of poor of Dumfries has an arrangement with the police that if any person is found homeless at night, sleeping in a stair or anything of that kind, they send them into a lodging-house, and the inspector of poor pays for them. The next parish beyond Dumfries is Thornhill, which is about fifteen miles on the road towards

Glasgow, and the inspector of poor there relieved seventy-seven tramps with a night's lodging in the course of last year, and he had a very curious experience. Previous to last year he was schoolmaster, and the school-house, where he lived, was a quarter of a mile away from the main street. He removed a year ago now to within about six yards of the cross of the village, and from the main road, and, owing to the new regulation of the Local Government Board, he had to put 'inspector of poor' upon his door. I wrote to ask him specially if this had been a cause of any great increase, and he says: 'It certainly has, to the amount of five or six applications every week'. They would not bother to go up this quarter of a mile to apply at his own house when he was at the school-house, but when he is on the road there they all apply. The next parish beyond that about fifteen miles is Sanquhar, and the inspector of poor there lives in the main street and has an office there, and he relieved 133 of those vagrants with a night's lodging during last year, and he tells me that that was not a quarter of the number of applications made to him, which he refused. The next parish is New Cumnock, where you get into a different district, a mining district with ironworks, and during the whole of last year the inspector of poor there relieved only thirty-five people, and those for the most part were real cases requiring relief. Seven of them were sent to the poorhouse, one was offered the poorhouse but declined, one was detained in the sick-house until able to be removed to the poorhouse, and two of them died in the sick-house. So that you have 77 and 133, then they drop to 35 and disappear.

Where do you suggest they have disappeared to? – In some cases farmers take them in and allow them to sleep in their barns and out-houses, and then when you get up to that district where there are mines, brickworks, ironworks, and things of that kind, and they go in and sleep about the furnace.

You do not suggest they have gone and got work there? – No, they have not got work, I am certain of that.

The road you have taken is the great road on the west, from Carlisle? – From England up to Glasgow and Kilmarnock and those places.

So long as the Poor Law unit is so very small, it is clear you cannot have anything like uniformity. Supposing the area is

increased, would you still be in favour of the police dealing with the vagrants? – Certainly. I think the police are the proper parties to deal with them, because in a number of cases our inspectors of poor are not physically able to deal with a wild tramp that applies. This inspector of poor at Sanquhar is a bank agent and partner with a lawyer; they are gentlemen who would not care to tackle a wild tramp. I would give it to the police; not that the system might be continued, but that it should be stopped altogether. [Evidence of R.B. Barclay, dated 27.5.07, to *Royal Commission on the Poor Laws, Scottish Evidence*. Cd.4978. (P.P. Vol. XLVI 1910) p.155]

APPENDICES

I. THE BOARD OF SUPERVISION

<i>Membership</i>	appointed by the Crown
The Chairman	ex-officio
The Solicitor-General	ex-officio
The Sheriff of Perthshire	ex-officio
The Sheriff of Renfrewshire	ex-officio
The Sheriff of Ross and Cromarty	ex-officio
The Lord Provost of Edinburgh	ex-officio
The Lord Provost of Glasgow	ex-officio
Two others	appointed by the Crown

The Chairman was full-time

<i>Chairmen</i>	
Sir John McNeill	1845-68
Sir William S. Walker	1868-92
John Skelton	1892-94

<i>Secretaries (appointed by the Crown)</i>	
William Smythe	1845-52
William S. Walker	1852-68
John Skelton	1868-92
Malcolm M'Neill	1892-94

II. THE LOCAL GOVERNMENT BOARD

<i>Membership</i>	
The President, the Secretary for Scotland	ex-officio
The Solicitor-General	ex-officio
The Under-Secretary for Scotland	ex-officio
The Vice-President	appointed by the Crown

The Legal Member (an advocate of seven years standing)	appointed by the Crown
The Medical Member (holding a Public Health Diploma)	appointed by the Crown
The latter three posts were full-time.	

Vice-Presidents

John Skelton	1894-97
Malcolm M'Neill	1897-1904
James Patten-MacDougall	1904-09
Sir George McCrae	1909-19

Legal Members

James Patten-MacDougall	1894-1904
Ewan B. MacPherson	1904-19

Medical Members

James McLintock	1894-98
James B. Russell	1898-1904
W. Leslie MacKenzie	1904-19

Secretaries (appointed by the Crown)

Malcolm M'Neill	1894-97
George M. Falconar-Stewart	1897-1909
Abijah Murray	1909-12
John T. Maxwell	1912-19

III. BOARD OFFICERS

Visiting Officers

William A. Peterkin	1852-64
Alexander Campbell	1864-67
Malcolm M'Neill	1867-92
George M. Falconar-Stewart	1885-92

Note: Until 1861 this Officer had salary rank of a clerk. A second Officer was appointed in 1885. From 1869 they also acted as Inspecting Officers under the Public Health (Scotland) Act, 1867.

General Superintendents of Poor

Henry H. Briscoe	1856-64
Capt. George Falconar	1856-67
William A. Peterkin	1864-93
Alexander Campbell	1867-92
George M. Falconar-Stewart	1892-97
Robert B. Barclay	1892-1909
Capt. Kenneth J. Mackenzie	1892-1900
William Penney	1893-1914
Alexander Stuart	1897-1919
Alexander B. Millar	1900-19
John Jeffrey	1909-12
C. Cleveland Ellis	1912-19
George A. Mackay	1914-19

Note: After 1892 the two Visiting Officer posts were absorbed as Superintendents. From 1869 they also acted as Inspecting Officers. The individual territory covered by these Officers varied, but until 1881, the Superintendents were responsible for the Counties north of the Tay-Highland line and the Visiting Officers for the Counties to the south. From 1885 one of the Visiting Officers was allocated to Lanarkshire, Renfrewshire, Ayrshire and the South-West, whilst the other was allocated to the Lothians, the Borders, Stirlingshire and Dunbartonshire. From 1881 the Eastern Highland Superintendent assumed responsibility for the whole of Lowland Angus and Perthshire, Fife and at times Clackmannanshire and Dunbartonshire.

Medical Officer (part-time)

Sir Henry D. Littlejohn	1873-1908
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Medical Inspectors

W. Leslie MacKenzie	1901-04
Frederick Dittmar	1905-19
Thomas F. Dewar	1910-19
Ernest Watt	1913-19

Lady Inspectors

Elizabeth M. McVail	1910-13
Mary J. Menzies	1913-19

IV. SALARIES

The Board of Supervision

The Chairman	£1200
The Sheriffs	£100 (1845-67)
	£150 (1867-94)
The Secretary	£800-£1000
The General Superintendents	£300-£500
The Visiting Officers	£300-£400
The Medical Officer (part-time)	£200

The Local Government Board

The Vice-President	£1200-£1500
The Legal Member	£1000-£1200
The Medical Member	£1000-£1200
The Secretary	£700-£900
The General Superintendents	£400-£700
The Medical Inspectors	£500-£800
The Lady Inspector	£200-£300
The Medical Officer (part-time)	£200

V. SPECIAL REPORTS PREPARED BY THE OUTDOOR OFFICERS

Average Number Per Annum

	General Superintendents (Poor Law)	Inspecting Officers (Public Health)	Medical Officer	Medical Inspectors
1870-9	34	29*	21†	
1880-9	32	52	22	
1890-9	72	84	37	
1900-9	113	63		53‡
1910-14	137	17		190

Notes:

*began in 1871

†began in 1873

‡began in 1901; two Inspectors from 1910 and three from 1913.
General Superintendents' total includes those of the Visiting Officers.

General Superintendent and Inspecting Officer Special Reports were those commissioned by the Board above their ordinary annual duty of visiting each parish and local authority. Such were usually ordered when some complaint was received, or when hospital or poorhouse plans required site examination. Systematic use of these did not begin until 1868.

Medical Officer and Medical Inspector Reports were always specially commissioned and were initiated after a General Superintendent or Inspecting Officer Report revealed some defect, a local complaint, or when hospital and housing plans required site examination.

VI. BIOGRAPHICAL NOTES

Chairmen and Vice-Presidents

Sir John McNeill (1795-1883): Born Colonsay, second son of the Laird, educated Edinburgh University. Assistant Surgeon in the East India Company and then Envoy Extraordinary and Minister Plenipotentiary in Persia. Brother to Duncan McNeill, Lord Advocate in the Conservative Government, 1842-6. Served on a number of special Commissions, including Highland Distress and the Conduct of the Crimean War. An Episcopalian. Spoke Gaelic. A confidant of Queen Victoria, disliked both Gladstone and popular politics. Said to be a firm, able and courteous administrator. K.C.B. 1837, P.C. 1857.

Sir William S. Walker (1813-96): Born Bowland, Midlothian, the son of a General in the East India Company. Educated St Mary Hall (now part of Oriel College), Oxford. An advocate. Wrote on the Poor Laws before becoming Secretary. A prominent Episcopalian (editor of the *Scottish Episcopalian Journal*), with interests in Trinity College Glenalmond and St Mary's Cathedral School. Treasurer of the Highland Agricultural Society. An otter huntsman of some repute, was reckoned 'a Scot of the older school'. Estate 2,000 acres. C.B. 1876, K.C.B. 1886 and D.L. (Midlothian and Selkirkshire).

Sir John Skelton (1831-97): Born Edinburgh, the son of a W.S. and Sheriff-Substitute (Aberdeenshire). Educated Madras College, St Andrews and Edinburgh University (second in Moral Philosophy under Wilson). Subsequently became an advocate. Author of many literary and historical works (publishing freely in Fraser's and Blackwood's Magazines), but best known for his defence of Mary Stuart. Narrowly missed the Chair of English Literature at Edinburgh (1865). Wrote enthusiastically of Disraeli's Conservatism and subsequently offered the choice of the Chair of Law at Glasgow or the Secretaryship. An authority on local taxation and the public health laws. Highly regarded by the Scottish Office who promoted his claim for the Chairmanship. Said to have been very painstaking. In literary affairs belonged to the 'old high-mettled school' of Scott and 'Christopher North': a friend of Froude. Enjoyed all outdoor sport, especially with gun and dog. LL.D. (Edinburgh) 1878, C.B. 1888, K.C.B. 1897.

Sir Malcolm M'Neill (1839-1919): Born Colonsay, the younger son of the Laird, a Royal Engineer and nephew of Sir John McNeill. Educated Eton and Sandhurst. Retired from 78th Highlanders (the Rosshire Buffs) with rank of Captain, 1861. Spoke Gaelic. Undertook numerous and often secret commissions on Highland Distress, 1878-95. Was Secretary to Lord Napier's Crofter Commission, 1883. Keenly interested in archeology, conducting a number of West Highland 'digs'. An 'ardent' Unionist, whose military upbringing was said to influence his manner. C.B. 1901, K.C.B. 1905.

Sir James Patten-MacDougall (1849-1919): Born Edinburgh, the son of a W.S.. Educated Edinburgh Academy and Christ Church, Oxford. Assumed mother's name when inherited her estate at Gallanach, Argyll, 1891. An advocate. Secretary to the Scottish Liberal Association in the late 1870's (assisting Gladstone's Midlothian Campaigns). Legal Secretary to the Lord Advocate, 1886 and 1892-4. Drafted the 1894 Local Government Bill, Chairman of the Departmental Committee on Poor Law Medical Relief, 1904. Sought Rosebery's support for the Fishery Board's Chairmanship in 1894 (he 'dreaded being out of work again'), but

was offered the L.G.B. instead. Member of the 1909 Poor Laws Commission, supporting the Majority Report. Member of Argyll County Council from 1889. Appointed Deputy Clerk Registrar for Scotland, 1909. A Director of the Scottish Provident Institution and the Callender and Oban Railway Company. A noted sportsman, especially golf. Considered a thorough, but genial administrator. C.B. 1906, K.C.B. 1914, D.L. (Argyll).

Sir George McCrae (1860-1928): Born Edinburgh and educated at the Lancastrian School and Heriot Watt College. Founded a firm of hatters. Became City Councillor, 1889. Youngest Treasurer at the age of 31, supporting municipal monopolies for public transport and power supplies. Active in the volunteer movement, raising and commanding a battalion (Royal Scots) in 1914. Attained rank of Lt-Colonel. Entered Parliament for East Edinburgh as a Liberal. Fought his elections on a platform of temperance, old age pensions and public support for working class housing. Was a member of the 1903 Physical Training Commission. Considered an 'advanced Liberal' and personally recommended for Vice-Presidency by Asquith. Was subsequently appointed to Board of Health, but resigned and became Liberal M.P. for Falkirk Burghs, 1923-4. An elder at Lady Glenorchy's United Free Church. From humble origins, his advancement was said to rest on industry, ability and a buoyant disposition. K.C.B. 1908, D.S.O. 1917, D.L. (Edinburgh).

Legal Members

Ewan F. MacPherson C.B. (1864-1941): Born Sydney, N.S.W., from a family who held the Newton Estate, Blairgowrie and educated Winchester and Brasenose, Oxford (Classics). An advocate. Legal Secretary to the Lord Advocate during the Conservative Government, 1901-4. Rowed for Oxford and an enthusiastic shot. Was subsequently appointed to the Board of Health. C.B. 1918.

Medical Members

James McLintock (1853-1901): Educated Edinburgh University (M.D., then D.P.H.). Private practice at Marsden, then Medical

Officer of Health, Bradford. Transferred to Lanarkshire in 1891. Wrote widely on public health matters, especially the treatment of town refuse. Resigned through ill-health. Considered intellectually gifted.

James B. Russell (1837-1904): Born Rutherglen, son of a printer. Educated Glasgow High School and the University (B.A., then M.D., C.M.). Became Medical Superintendent at the City's Fever Hospital and was one of the first to stress nursing as an organised auxiliary to treatment. The first full-time Medical Officer for Glasgow in 1872. Acquired a reputation as a leading authority on Public Health and wrote many papers, the most notable being *Life in One Room* (1888), an attack on overcrowding. Led campaigns against infected dairies and for the control of tuberculosis, but failed to realise the full extent of the latter's infectivity, advocating hospital isolation for only the most advanced cases. Refused the Medical Member post in 1894 and after considerable pressure from Lord Balfour, only reluctantly agreed to leave Glasgow in 1898. An active Congregationalist and a fervent teetotaler. Although reported to believe sanitation could achieve socialist ideals, was against 'pampering' the poorer classes. LL.D. (Glasgow) 1885, F.R.F.P.S.(G.).

Sir W. Leslie MacKenzie (1862-1935): Born Shandwick Mains near Tain (son of the local griever) and educated Aberdeen Old Grammar School and the University (M.A. Classics and Philosophy, Gold Medalist and Scholar), then Edinburgh University (M.B., C.M., D.P.H., M.D. Highest Honours). Held numerous posts including lecturer in physiology and Assistant Medical Officer, Aberdeen. Became Kirkcudbrightshire and Wigtonshire's first Medical Officer of Health, 1891, then Leith's first full-time Medical Officer, 1894. Member of the Departmental Committee on Poor Law Medical Relief, 1904. Directed Edinburgh Charity Organisation Society's medical examination of 1400 schoolchildren for its report on their physical condition, 1906. Compiled for the Scottish Education Department the first national report on the medical examination of schoolchildren, 1913. Board's representative on the Housing Commission, 1917.

Became a member of the Board of Health. Wrote widely, especially on the treatment of diphtheria, the supply of water and child health. A lifelong friend and disciple of Alexander Bain, Professor of Logic, Aberdeen. Considered a practical philosopher, a man of action, readily inflamed by bureaucratic stupidity. Regarded his greatest achievement as initiating and implementing housing reform. LL.D. (Aberdeen) 1912, K.C.B. 1919, F.R.S.(E.), F.R.C.P.(E.).

Secretaries

William Smythe (1803-1892): Born Edinburgh, the second son of Lord Methven, Senator of the College of Justice. Educated Westminster School and Christ Church, Oxford. English Bar, 1829, subsequently becoming an advocate. Served as Secretary to the 1844 Poor Law Commission. On brother's death (1847) succeeded to estate at Methven Castle. Convener, Perthshire Commissioners of Supply, 1852-82. Also served on Board as a Crown representative, 1866-1885. Compiled for the Maitland Club, *The Chartulary of Scone*. Regarded a 'strong' Conservative, was a regular contributor to deserving charities.

George M. Falconar-Stewart (1844-1921): The second son of an Army Captain. Family estate at Carlowrie, Kirkliston and the Binny, Ecclesmachan. Educated Trinity College, Glenalmond and abroad, spending some time in Italy. On succeeding to the Binny Estate (1878) returned to Scotland and assumed grandmother's name of Stewart. Entered service as a temporary Visiting Officer, 1883, when M. M'Neill was on other duties. Purse Bearer to a number of Lord High Commissioners (Lords Tweeddale, Breadalbane, Leven and Melville). J.P. Linlithgow. Said to be devoted to sport, he was Chairman of the Linlithgow and Stirlingshire Hunt.

Abijah Murray I.S.O. (1852-1912): Born Edinburgh and educated the High School and the University (Medallist, Political Economy). Entered the Indian Civil Service but was offered a junior clerkship (1873) and progressed to head of the Public

Health section and then senior clerk. Editor of the *Councillor's Manual* and wrote on the Public Health Laws. A Captain in the volunteer reserve. An active Congregationalist, establishing a boy's Mission at Simon Square, Edinburgh. Said to have had a sound judgement and considered after Skelton's retiral, the Board's 'guiding force'. I.S.O. 1903.

Outdoor Officers

William A. Peterkin (1823-1906): Born Edinburgh, the son of a Sheriff-Substitute (Orkney) and Legal Agent to the Church of Scotland during the Disruption Years. Educated at the High School. Was a collector of evidence for the 1844 Poor Law Commission and entered the Board's service as a clerk, 1845. An elder at Greyfriars and a member of a minor Edinburgh literary society, 'the Monks of St. Giles'. Thought a genial and sympathetic officer.

Alexander Campbell (1816-1902): Born Inverawe and completed education in Germany. Commissioned into the 3rd Dragoon Guards. An advocate. Deputy-Lt. Argyll, 1848, and a Commissioner for the Caledonian and Crinan Canals. An Episcopalian, assisting the foundation of Trinity College, Glenalmond. Established the local Volunteer Reserve, attaining the rank of Colonel. Estate at Auchindarroch, Lochgilphead (purchased during his minority), 7000 acres. Regarded a keen Conservative (unsuccessfully contesting Kilmarnock Burghs, 1852), was generous to local charities.

Sir Kenneth J. Mackenzie (1861-1929): 7th Bart. of Gairloch. Educated the Rugby School, in France, Trinity College, Oxford and R.M.C. Sandhurst. Retired Rifle Brigade with rank of Captain, 1891. Reservist with the Cameronian Highlanders, rank of Major, retiring 1900. An Episcopalian (St Paul's, York Place). Succeeded to baronetcy in 1900 and in same year resigned from Board's service on appointment as Queen's and Lord Treasurer's Remembrancer. Became Deputy-Lt. Ross and Cromarty and Purse Bearer to the Lord High Commissioner, 1901-4. Editor of

the Gazette and Registrar of Joint Stock Companies, Scotland. Estate 194,000 acres. Family seat at Conan House, Conan Bridge. Travelled widely, especially for big game.

Robert B. Barclay I.S.O. (1843-1919): Son of a Sheriff-Substitute (Perthshire). Trained as a civil engineer and entered Board's service as a junior clerk, 1868, advancing to head of the Statistical Branch. Member of the Departmental Committee on Poor Law Medical Relief, 1904, and Chairman of the Departmental Committee on the Methods of Administering Poor Law Relief, 1905. Reported 'never angry', was considered a trusted and influential officer. I.S.O. 1902.

Alexander Stuart (1858-194?): Born Edinburgh and educated the Academy and Oxford. An advocate. Fought Blackfriars and Hutchesontown constituency as a Unionist, 1892 and 1895, platform of maintaining the Empire and support for workers' welfare. Member of the Departmental Committee on the Methods of Administering Poor Law Relief, 1905. Was an amateur sportsman (golf, rowing) of some note.

Sir Henry D. Littlejohn (1828-1914): Born Edinburgh, the son of a merchant. Educated Perth Academy, the Royal High School and Edinburgh University (M.D.). Appointed Lecturer, Royal College of Surgeons, 1855 and Professor of Forensic Medicine, 1897. Appointed Edinburgh's first Medical Officer of Health, 1862. Introduced compulsory notification for certain infectious diseases, 1879, the first anywhere in Britain, but was against the same for tuberculosis, believing it a chronic disease. Wrote widely on public health, but best known for his *Sanitary Condition of Edinburgh* (1865) the impetus for the City's first Improvement Act, 1867. President of the Royal College of Surgeons, 1875-6, President of the Medico-Chirurgical Society (Edinburgh), 1883-5 and President of the Royal Institute of Public Health, 1893. A founder of the Royal Hospital for Sick Children and Chairman of the Edinburgh Society for the Prevention of Cruelty to Children. Surgeon of Police, Edinburgh. A United Presbyterian (Lauriston Place), although in later life he regularly

attended St Giles'. Greatly interested in the Ulster Movement, was a warm supporter of the Covenanters. Said to be a man of action with extra-ordinary capacity for work, he could be brusque when faced with incompetence. LL.D. (Edinburgh) 1893, KT. 1895 (Rosebery's resignation honours list).

Frederick Dittmar (1870-1934): Born Edinburgh, the son of a Professor of Chemistry, Anderson's College, Glasgow. Educated Glasgow University (M.B., C.M., M.D.) and Cambridge (D.P.H.). Also studied for a time in Vienna. Assistant Medical Officer, Glasgow (including superintendence of the Fever Hospital), then Medical Officer of Health, Scarborough. Wrote on the administrative treatment of scarlet fever. On appointment to the Board of Health specialised as a medical assessor at housing inquiries. Considered a sound, but friendly Inspector, whose judgement was well accepted. F.R.C.P.(E.), 1918.

Thomas F. Dewar C.B. (1866-1929): Born Arbroath, eldest son of a local doctor. Educated Arbroath High School, Aberdeen University (M.B., M.D.) and Edinburgh University (D.P.H., D.Sc., 'The Sanitation of Armies in the Field'). Assistant Medical Officer of Health, Ilfracombe, 1888, returning to private practice, Arbroath 1893. Part-time Medical Officer, Monifeith, 1895. A Surgeon-Captain in the Volunteer Movement from 1888 and then Surgeon-Captain, Imperial Yeomanry, Boer War, 1900-1. Medical Officer of Health, Forfarshire, 1906. Transferred to Fife, 1908. Served throughout the First World War and became A.D.M.S. (Northern Army), attaining rank of Lt.-Colonel. Served as Departmental Representative on the Puerperal Morbidity and Mortality Committee, 1924. At the Board of Health specialised in treatment of venereal disease and Poor Law medical care. Wrote on natural history and his war-time experiences. Member of Arbroath Town Council until 1908 (prominent in establishing the Free Library). Life Director of the Infirmary. A Presbyterian (St Mary's, Church of Scotland). Active in the Scouting Movement. Reported very methodical (every half hour of his inspections could be accounted), which with a dry Scottish humour, ensured his advice was well received. C.B. (Military Division) 1918, T.D.

Elizabeth M. McVail (1880-1925): Educated Glasgow University (M.B.) and Cambridge (D.P.H.). House Physician, Glasgow Royal Infirmary Ophthalmic Institute and Govan Elder Cottage Hospital, then School Medical Inspector West Riding and Assistant Medical Officer, Halifax. Resigned to become Assistant Medical Officer, Public Health Department, London County Council.

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SCOTTISH HISTORY SOCIETY

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1987-1988

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the Honorary Secretary or the Honorary Treasurer
whose addresses are given overleaf.*

SCOTTISH HISTORY SOCIETY

REPORT

of the 101st Annual Meeting

The 101st Annual Meeting of the Scottish History Society was held in the rooms of the Royal Society of Edinburgh, on Saturday 12 December, 1987, at 11.15 a.m. Professor T. Christopher Smout, President of the Society, was in the chair.

The Report of Council was as follows:

Although, in the midst of last year's centenary celebrations, the Society faced a difficult period with the closing down of its printers, the situation has been retrieved during the current year. With the assistance of our new printers, Blackwood Pillans and Wilson, it has been possible to issue to members not only the postponed volume from last year, *The Acts of the Lords of the Isles, 1336-1493*, edited by Dr Jean and R.W. Munro, but also, in conjunction with the Royal Historical Society, the volume for the present year, *Scottish Texts and Calendars*, edited by Dr Wendy and Dr David Stevenson. Both volumes have been well-received by our members, but any members who may not yet have received their copies should contact the Honorary Treasurer. It was felt appropriate that a copy of *The Acts* should be forwarded to Prince Charles who currently holds the title of Lord of the Isles.

The Society has therefore managed to overcome the crisis and catch up with its publication programme. It has also been looking to the future. During the summer the Honorary Publication Secretary, with the assistance of a sub-committee and guidance from our new printers, has been considering the procedure for future publications and the format for a new fifth series. Printing will be by phototypesetter from word-processor discs prepared by the editor of each volume; should an editor not have access to a word-processor, discs will be prepared from his/her text under the direction of the Publication Secretary. A standard production schedule has been agreed with the printers to ensure as far as

possible that volumes will be issued regularly to members each year. It is expected, on the basis of estimates made by the printers, that this will be a very cost-effective method of producing the Society's volumes which will in no way lower the high standards reached by previous series. Internally the volumes will be virtually identical with the fourth series—the type-face, layout and general style will remain the same; externally they will be bound in a hard-wearing black buckram with silver lettering on the spine. Council is confident that this will make for a visually attractive series, and that it will meet with the approval of members. The first volume under this new system is already in production. It is *Scottish government and social conditions, 1845-1919*, edited by Dr Ian Levitt, and will be available to members during the course of the coming year.

Council has been in correspondence with the Secretary of State on the potential danger to historic sites arising from afforestation schemes being implemented before adequate surveys of the ground and site had been made. Though the response was considered inadequate, it was decided to take no further action as other organisations more able to intervene were actively pressing the matter. Council also decided to abandon the Outreach sub-committee temporarily as the response of other organisations had been lukewarm.

The three Council members due to retire by rotation are Dr Norman MacDougall, Mr W. W. Scott, and Dr John Durkan. In their place the following will be proposed to the Annual Meeting for election to Council: Mr C. J. Davey, Mr A. Macinnes, and Dr R. Mason.

Dr Annette M. Smith retires as Honorary Secretary, and will be succeeded by Dr Norman MacDougall.

During the past year nine members of the society have died, eight have resigned and twenty-five have been removed for non-payment of subscriptions. Twenty-seven new members have joined. The total membership, including eighteen joint members and 202 libraries, is now 755 compared with 770 in 1986.

In presenting the Annual Report, the Chairman of Council, Mr Stuart Maxwell, surveyed the year's publications and commented

on the changes in the format and method of production of future volumes. He also detailed the problems caused by afforestation schemes, and explained the Society's attitude towards them. He expressed the gratitude and appreciation of the Society for the work of the retiring Secretary, Dr Annette Smith.

The Treasurer presented his accounts, emphasising that they did not present a true picture of the Society's affairs inasmuch as they did not include the full cost of the volumes published during the year. Nevertheless, although the finances appeared to be healthy, it might be necessary to consider an increase in the subscription within the next two years.

On the motion of the President, seconded by Mr Stenhouse, the Report and Accounts were approved. The Rev. Mark Dilworth moved the election to Council of Mr Davey, Mr Macinnes and Dr Mason, which was carried unanimously.

The President delivered an address entitled 'Historians and the economic and social significance of the '45', after which Mr Gimson proposed a vote of thanks.

ABSTRACT ACCOUNT OF CHARGE AND DISCHARGE OF THE
INTROMISSIONS OF THE HONORARY TREASURER
from
1 October, 1986 to 30 September, 1987

I. GENERAL ACCOUNT

CHARGE

i. Cash in Bank at 1 October, 1986:	
1. Sum at Credit of Savings Account with Bank of Scotland	£10,300·00
2. Sum at Credit of Current Account with Bank of Scotland	130·41
3. Sum at Credit of Special Investment Account with Trustee Savings Bank	963·11
	<hr/> 11,393·52
ii. Subscriptions received	8,317·33
iii. Past Publications sold	1,361·00
iv. Royalties on reprints	25·06
v. Interest on Savings Accounts with Bank of Scotland and Trustee Savings Bank	692·17
vi. Income Tax Refund, 1985-86	592·58
vii. Donations	2,068·50
viii. Grant from Carnegie Trust	600·00
ix. Sums drawn from Bank Current Account	£16,100·10
x. Sums drawn from Bank Savings Account	£4,755·28
	<hr/> £25,050·16

DISCHARGE

I. Cost of publication during year <i>Texts and Calendars</i>	£3,200·00	
Cost of printing Annual Reports, Notices and Printer's Postage etc.	<u>1,872·67</u>	
		£5,072·67
II. Insurance		62·23
III. Refunds		29·00
IV. Bank Charges		189·57
V. Miscellaneous Payments		494·20
VI. Sums lodged in Bank Current Account	£16,802·59	
VII. Sums lodged in Bank Savings Account	£23,255·28	
VIII. Funds at close of this Account:		
1. Balance at credit of Savings Account with Bank of Scotland	£18,500·00	
2. Balance at credit of Current Account with Bank of Scotland	£702·49	
3. Balance at credit of Special Investment Account with Trustee Savings Bank (Account closed)	000·00	
		<u>19,202·49</u>
		£25,050·16

GLASGOW, 20 October, 1987. I have examined the General Account of the Honorary Treasurer of the Scottish History Society for the year from 1 October, 1986 to 30 September, 1987, and I find the same to be correctly stated and sufficiently vouched.

JOHN A SMITH
Auditor