

# Georgetown M.O.H. Report to Council for Year 1945

## Statistical Statements

Our population, as shown by the Assessor's returns is 2751. According to the records of the Division Registrar, there occurred during the year 1 birth. There were no still-births. Deaths from all causes numbered 12. These statistics do not represent the true situation, because some deaths and most births occurred in hospitals in other municipalities.

## Summary of Progress in the Local Health Programme

**Sanitation—High School:** The building is one of the most unimproved public buildings in Georgetown. It fails to provide the elementary physical necessities of a high school. The following are lacking: Proper lighting and ventilation. Adequate cloak rooms; lunch room; gymnasium; assembly hall, first aid and medical examination room.

**Public School:** Although an old building the essentials of good sanitation are provided. The assembly room is not adequate and the seating of children on the platform is not satisfactory. More attention should be given to the seating of the children in the class-rooms. It has been found that spinal curvatures are common in high school students, much of this is attributable to unsuitable height of desks and seats.

**Domestic:** Sanitary standards of homes continue to improve. Outdoor privies are gradually being replaced by modern indoor conveniences. There are not more than 20 such structures in town. Garbage collection has added to the appearance of the grounds of many homes and has reduced the fly nuisance. The situation of the town "dump" leaves much to be desired. Installation of a sewerage system will eliminate the last major nuisance. The resulting elimination of privies and cesspools will make domestic sanitary standards in Georgetown equal to that of any municipality.

**Recreational:** It should be a source of satisfaction to all that plans are being made to provide a recreational centre in Georgetown. Such a project might well be integrated with a proposed new high school building. Facilities for vocational training of boys and girls, hobbies, games, handicrafts, and an indoor swimming pool might be added. It is suggested that such a centre should be available for the older age group also. In fact the family as a whole should use such a centre, where would be provided recreation and instruction for each member according to desire. The Peckham Experiment is planned on these lines and has been found to be of inestimable benefit to family life, particularly in improving mental hygiene.

**Industrial:** Sanitary standards vary greatly. Some plants would be benefited by more modern lavatory facilities. There is no serious health hazard in any industry in Georgetown. Occasional cases of skin eruptions are encountered, which are due to individual intolerance to certain chemicals. These are of a minor nature and create no special problem.

**Nuisances from Industrial Wastes:** Up to the present these have constituted an insoluble problem. Pollution of ground and streams with certain industrial wastes and consequent putrefaction has been a constant source of annoyance. The proposed installation of a sewage system will completely eradicate these conditions. An analysis of this industrial waste has been made and assurance can be given that the proposed disposal plant can take care of this material and then return clear water to the stream.

**Sex Hygiene:** It is recommended by your Medical Officer of Health that instruction in this subject should be given to senior grade public school and high school students. It is most important that lecturers should be specially qualified for this work. It is suggested that the Ontario Department of Health train such personnel, who would then tour the schools throughout the province.

**Sterilization of the Feeble Minded:** It is the personal conviction of your Medical Officer of Health that such persons should be sterilized before marriage or earlier. These persons should not be permitted to propagate mentally deficient children. Their families are usually large, are not cared for satisfactorily and are potential candidates for public institutions (mental hospitals, reformatories, etc.)

## Communicable Diseases

The incidence of communicable diseases has been very low during 1945. It is to be noted that there were no cases of diphtheria, cerebro spinal meningitis, typhoid fever, undulant fever, or smallpox. There were only 2 cases of whooping cough. The communicable diseases which did occur were of the less serious type and there were no deaths.

**Prevention:** A general campaign of immunization was not carried on in the municipality during the past year. However, every public school child was given the opportunity to be immunized (free of charge) against diphtheria and smallpox. This year not extended to enter lower nor whooping cough. It is the opinion of your Medical Officer of Health that the next year will be not satisfied.

tory for group immunization and that whooping cough vaccine should be given during infancy.

After receiving parents' consent these school children were given a series of 3 diphtheria toxoid inoculations at 3 week intervals. These children who had been given this treatment in infancy were given a single reinforcing dose when they enter school. Although there have been several outbreaks of diphtheria in Canada during the war years, no case of diphtheria has been reported in Georgetown for 17 years. Records indicate that 94% of the public school children have been immunized against this disease.

Before vaccinating against smallpox written consent was obtained from a parent. As a result of vaccination during 1945 and previous years, 86% of public school children are protected against smallpox.

Parents are strongly advised to have their children immunized against whooping cough during the first year of life. It is now possible to combine the diphtheria and whooping cough inoculation, which reduces the time of their health records.

## Special Activities

**Physical examination of High School Students:** Again during 1945 a physical examination was made of all first form students and new students in other forms, after receiving a parent's consent. In all 42 were examined by your Medical Officer of Health and Miss Chant, Public Health Nurse. Vision, hearing, height and weight were estimated by the Public Health Nurse, who then assisted your Medical Officer of Health in examination of throat, heart, lungs, and posture. Blood pressure was estimated, a blood test for anaemia, tuberculin test, and urine analysis. A letter was then sent to the parents of each student, enumerating the defects found, with advice that the family physician or dentist be consulted.

14 students showed positive tuberculin reactions. These were all given the opportunity to have chest X rays (without charge) at the Ontario Department of Health at Toronto. Only one showed clinical evidence of tuberculosis of the lungs and was requested to have X ray repeated in 6 months time.

The following defects were found: Defective vision, 3; Dental defects, 10; Enlarged tonsils, 11; Overweight, 4; Malnourished, 3; Skin diseases, 3; Enlarged thyroid, 11; Abnormal blood pressure, 9; Anaemia, 29; Orthopedic defects (posture, spinal curvature, foot defects, 23; Nervous disorders, 2; Tendency to hernia, 3.

It can be concluded from these studies that the physical standards of these students is not high. Psychological study would probably reveal many with emotional disabilities. These findings parallel those of medical officers who were obliged to reject such a large proportion of recruits for the armed services. At least 75 per cent of these disabilities could have been prevented or cured. Their presence is due to neglect on the part of parents. It appears that the physical and mental health of adolescents is being delegated by parents to public health departments, which have not at the present time the means of looking after them.

**Tuberculosis Control:** There were during 1945 3 cases of pulmonary tuberculosis of Georgetown residents and no deaths. All contacts of these individuals have been examined and remain under supervision. The diagnostic facilities of the Mountain Sanatorium at Hamilton and the Gage Institute of Toronto are available for examination of any suspected cases and for institutional treatment when required. These institutions have been most co-operative. No patients are permitted to return home from sanatorium until the Medical Officer of Health is satisfied that home conditions are satisfactory for rehabilitation. Georgetown has an enviable record for many years in so far as tuberculosis is concerned.

**Health of the School Child:** The Local Board of Health is vitally interested in the health of the school children. There follows an outline of this work in our municipality, together with recommendations for the future.

During the summer months our Public Health Nurse calls upon the parents of those children who plan to enter the primary class in the fall term. A history of the child is obtained and a general examination made by her. If a disability is found the parents are advised to consult the family physician in order to ensure that the child enters school in good physical condition.

When schools open the child is again examined by her, in order to find if defects have been remedied. Particular attention is paid to nutrition, vision, hearing, teeth and throat defects. The Public Health Nurse arranges with your Medical Officer of Health for the immunization (diphtheria and small pox) of these children at school. A record is kept of every child, which follows through to high school, if attended.

Twice weekly the Public Health Nurse attends the schools where routine examinations are carried out. Special attention is paid to communicable diseases and investigation is made of any abnormality. This in large measure is

responsible for the low incidence of communicable diseases in Georgetown. Children who do not adapt themselves to school life are closely watched and when necessary a parent, teacher and nurse liaison is established. This has been of great value to so-called "problem child." Before the establishment of a public health nurse service for the rural schools, it was noted that defects were more common in rural school children than town children entering our high school.

At high school the Public Health Nurse prepares records and assists your Medical Officer of Health at examinations of the incoming high school students.

**Dental Hygiene:** This important branch of public health work has not received adequate attention. A local service club undertook a dental survey of the public school for one year, which produced splendid results. This work is most necessary. Any organization which would undertake a task of this nature would be doing a great service to the children of Georgetown.

**Restaurants and Beverage Rooms:** Dr. S. E. Magwood, our Sanitary Inspector has conducted a survey of sanitary conditions. Cultures have been taken of glassware, dishes, flatware and washing water of restaurants and beverage rooms. With exceptions the reports have been unsatisfactory. Advice has been given as to the more sanitary methods of washing and drying. It is expected that the conditions will be improved. The general sanitary conditions of food, kitchens, refrigerators, etc., are not being overlooked. It is planned to improve toilet and washroom accommodation in some of these places.

## Public Health Nursing

Our public health nursing program in general consists of supervision of health of school children from the primary grade of public school until graduation from high school and in addition the Public Health Nurse has assisted at blood donor clinics, has addressed organizations interested in public health, and has established a pre-natal clinic.

Miss Chant is endeavouring to give this service to Acton, Milton and Georgetown. This involves curtailment of

a complete programme. The following activities should be provided: Prenatal visits, visits to mothers and babies after return from hospital, visits to tuberculous patients and crippled children, First Aid and Home Nursing classes to school children.

The town is indebted to Miss Chant for the amount of work done in the limited time available, and for the efficient and cheerful manner in which she has attended to the many problems given her by school teachers, parents, and your Medical Officer of Health.

## Sanitary Services

The sanitary inspection service in general consists of investigation of public health nuisances; collection of water samples, inspections of milk producers, and pasteurization plants, inspection of restaurants and beverage rooms and supervision of garbage collections and disposal. Dr. S. E. Magwood, our sanitary inspector, who is well equipped to do this work, has given and acted upon several valuable suggestions for the improvement of these services. The work in this branch of public health preservation will continue to increase.

**Public Water Supplies:** No infections, which could be attributed to our water supply, occurred during the year 1945. 12 samples of water were submitted to the Ontario Department of Health for testing. All 12 samples were graded lower than Grade A. This indicates that our water supply is polluted, probably from bacteria originating in animals grazing in fields adjoining the open streams which feed the reservoir. This constitutes a health hazard, which can be eliminated only by chlorination, which is advised.

**Milk Supply:** By-law 146A was passed in 1927, and amended 1928 61A. Pasteurization is necessary. There is one Milk Inspector and 2 pasteurization plants. 100 per cent of the total supply is pasteurized. There is a total average consumption of 1250 quarts. The per capita per day consumption is just under 1 pint. There are no permits issued. (Permits for producers are not issued under present regulations.) There are 2 distributors and 2 permits have been issued, no permits cancelled.

Services - Visits made to Producers,

30; Distributor of Raw Milk, none; Pasteurized milk, 4; Total 34. Samples taken, 29; Raw milk 29; Pasteurized milk, 31; Total 60.

There were no infections associated with the milk supply during 1945. The pasteurization plants are operated in a clean and efficient manner. Minor changes in plants have been recommended from time to time, these have been attended to with laudable co-op-

eration. The quality of milk received from some producers has been somewhat unsatisfactory. Difficulty in obtaining equipment and labour has accounted in some cases for this condition of affairs. Efforts are being made to improve these unsatisfactory sources. It is recommended that permits be issued to satisfactory producers. O. V. Williams, M.O.H. for Georgetown.

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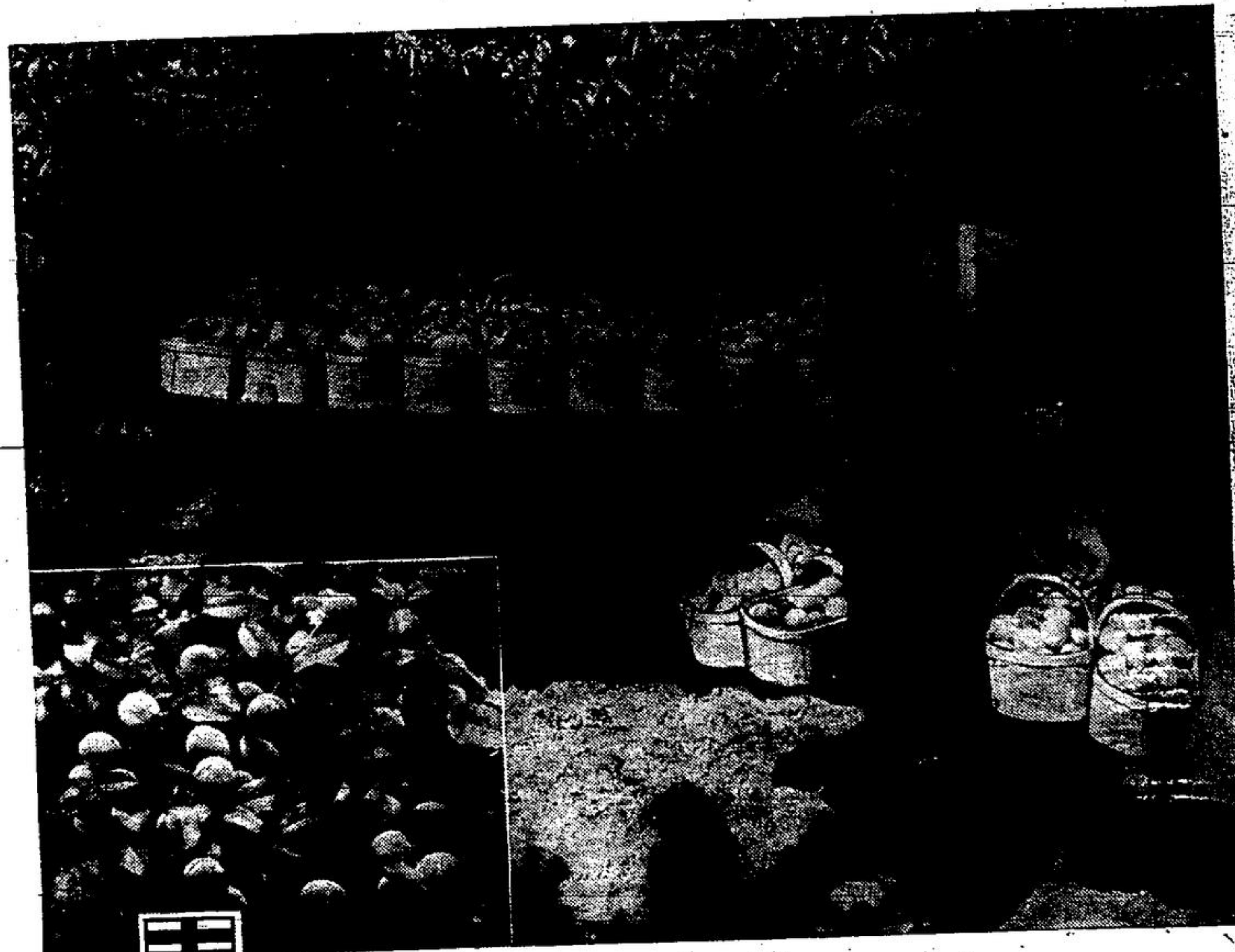


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