

SANITATION IN INDIA.

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I HAVE been much interested in the article in the April number of the Journal for 1906, by Lieutenant Balck, on "Regimental Sanitation in India," and as I recently performed some of the duties of his suggested Medical Officer of Health in a large Indian station, and thereby got some insight into the working of cantonment sanitation, I should like to offer a few suggestions and criticisms based on his scheme.

The weak spot in the whole scheme is that it does not readily adapt itself for service outside cantonments. At present the conservancy of British troops is arranged for regimentally, that of native troops and the whole of the remainder of cantonments by the cantonment magistrate. In the case of native troops one sees the friction occasioned by a non-regimental control and the change of system when on the line of march.

While fully agreeing that a sanitary officer should be appointed for the station, and that he should be an executive and not merely an inspecting officer, I should still further broaden his duties. I would take all conservancy duties out of the control of the cantonment magistrate and give them to the Health Officer. In large stations the cantonment magistrate cannot devote the necessary time and attention to sanitary supervision; in small stations he is usually a regimental officer and lacks the necessary training.

On the other hand, I would leave the regimental medical officer. In large stations a Station Health Officer has not the time to perform routine inspections of minor details, and there is still the regulation weekly inspection of the men to be carried out. In the native army, too, the regimental medical officer cannot be ignored, and it is desirable that regimental sanitation should be supervised by an officer in touch with the regimental authorities. In small stations the same officer would hold both positions, and it would doubtless be an advantage if he were also cantonment magistrate.

The Station Health Officer should, in my opinion, be firstly the Sanitary Staff Officer of the Senior Medical Officer, and through him of the Officer Commanding the Station, and should deal with all sanitary correspondence, reports and returns, taking and issuing the orders of the Senior Medical Officer and Officer Commanding Station on all sanitary subjects. All reports of infectious disease made to the Senior Medical Officer should first pass through his hands. He should be a member of the Cantonment Committee. He should be an inspecting officer for sanitation of the whole

cantonment and should, under orders of the Senior Medical Officer, inspect from time to time all regimental lines, in communication with the medical officer of the regiment, who should bring to his notice all sanitary defects requiring expenditure. All minor matters of cleanliness should be dealt with by the latter officer. He should be primarily responsible for the sanitation and conservancy of the whole of the cantonment, except barracks, and would carry out the final disposal of sewage and refuse for the entire cantonment. Where trenching is employed he would detach a portion of the staff for service with regiments leaving the cantonment for manœuvres, line of march, or active service.

The entire native sanitary staff of the station should be engaged and paid by the Station Health Officer, who should be provided with a soldier clerk and soldier inspectors, trained as suggested by Lieutenant Balck, those for extra-regimental employment being transferred to the Unattached List in the same way as the staff clerks. The regimental sanitary inspectors should belong to the regiments; if there were no suitable men in the unit, men should be transferred from other units of the same branch of the Service; this should always be done on the arrival of a regiment in India. They should rank as staff-sergeants. They would draw their staff pay from the Station Health Officer. The pay of all natives of the conservancy establishment of a regiment should be drawn by the Station Health Officer, but should be paid through the medical officer of the regiment, who should be in the position of an officer commanding a company or detachment. The conservancy staff of regiments would be complete for service outside cantonments. The Station Health Officer might well have charge of the cantonment hospital; he should always be an officer of the Royal Army Medical Corps, but in large stations he should have no other hospital duties. Orderly duty in India is so light that there is no reason why a junior officer should not take his turn. He would always be available for boards and committees. The appointment should be for a definite period, say three years, in all but the smallest stations, and should never be broken, provided the officer is competent, unless he be sent on service in a similar capacity. He should render a diary monthly to the divisional sanitary officer.

I have not attempted to go into all the details of a scheme, but have contented myself with suggesting alterations in the scheme proposed by Lieutenant Balck. The title, Station Health Officer, I have adopted, as it shows the officer's duties, and its initials, S.H.O., are, I believe, unappropriated.