

Home (1919) Department.
Education

Ordinary SERIES.

G.O. No. 1124

DATED 16-9-19

[Despatch Abstract.]

Hygiene in schools.

Recording with remarks papers relating to the teaching of --

PAPERS PUT UP WITH CURRENT No. _____

Papers of the department to which the current belongs.

Number.	Date.	Original (= O) or spare copy (= S.C.).	Remarks. (In this column such of the papers as have been removed for copying, printing, etc., should be marked with a cross.)	Initials of Referencer with date in token of return to Referencer department

Papers of other departments.

Department.	Number	Date.	Original (= O) or spare copy (= S.C.).	Initials with date of (1) Referencer acknowledging returns of the paper concerned or (2) Despatcher to denote the return of the papers to the department concerned.

No. 97.

FROM

THE HON'BLE MR. H. SHARP, C.S.I., C.I.E.,

TO

Officiating Secretary to the Government of India,

THE SECRETARY TO THE GOVERNMENT OF MADRAS, LOCAL AND MUNICIPAL DEPARTMENT.
THE SECRETARY TO THE GOVERNMENT OF BOMBAY, GENERAL DEPARTMENT.
THE SECRETARY TO THE GOVERNMENT OF BENGAL, MUNICIPAL (SANITATION) DEPARTMENT.
THE SECRETARY TO THE GOVERNMENT OF THE UNITED PROVINCES, SANITATION DEPARTMENT.
THE FINANCIAL SECRETARY TO THE GOVERNMENT OF THE PUNJAB.
THE SECRETARY TO THE GOVERNMENT OF BURMA, GENERAL DEPARTMENT.
THE SECRETARY TO THE GOVERNMENT OF BIHAR AND ORISSA, MUNICIPAL (SANITATION) DEPARTMENT.
THE SECOND SECRETARY TO THE CHIEF COMMISSIONER, CENTRAL PROVINCES.
THE SECOND SECRETARY TO THE CHIEF COMMISSIONER OF ASSAM.
THE HON'BLE THE CHIEF COMMISSIONER AND AGENT TO THE GOVERNOR-GENERAL IN THE NORTH-WEST FRONTIER PROVINCE.
THE CHIEF COMMISSIONER OF COORG.
THE CHIEF COMMISSIONER OF DELHI.

Delhi, the 14th February 1919.

Department of Education

Sanitary.

SIR,

With reference to the correspondence ending with your letter

76-Mell., dated the 27th September 1916
5754-148-confid., dated the 24th August 1916
595-Sany., dated the 30th August 1916
376-C., dated the 24th August 1916
G-460-Mell-3 dated the 10th October 1916
1332-10-X-5., dated the 30th August 1916
11725-M., dated the 8th September 1916
732-VI-23-4, dated the 2nd September 1916
5923-M., dated the 28th July 1916
821-N., dated the 21st July 1916
2250., dated the 28th July 1916
4540-Rdn., dated the 30th June 1916

no. I am directed to forward for in-
formation and such action as may appear to ^{ the local Government } _{ the local Administration } desirable a copy of a memorandum by the Scientific Advisory Board of the Indian Research Fund Association on Dr. Lankester's Report on Tuberculosis in India.

[An extract of paragraph 10 of the report of the Inspector General of Civil Hospitals, Punjab, referred to in the memorandum is enclosed.]] not to Punjab.

2. I am to say that the Government of India have decided not to make the Report of Dr. Lankester public, but it has been arranged that he should bring out a popular handbook containing the results of his investigations as modified by the views of the local Governments and Administrations.

I have the honour to be,

Sr,

Your most obedient servant,

H. SHARP,

Officiating Secretary to the Government of India.

Extract paragraph 10 of letter no. 954-S. (Genl.), dated Simla, 31st July 1916, from the Hon'ble Colonel H. Hendley, M.D., K.H.S., I.M.S., Inspector-General of Civil Hospitals, Punjab, to the Officiating Additional Secretary to the Government of the Punjab.

* * * * *

10. In the Punjab we now have six Medical Inspectors whose duty it is to make a yearly inspection of all boys in Anglo-Vernacular Schools, to record their results on a card provided for each boy for the period of his school life and to give advice as to his future for the information of the school authorities and his parents. They also inspect and report on the sanitary condition of the school buildings and their surroundings. I have made tentative proposals for a similar examination of girls by Women Inspectors, but hitherto without success, mainly, I understand, because parents would not welcome any official discovery of latent or even patent disease which would damage the prospects of a girl in the marriage market.

I think later it should be found possible to utilize these Inspectors for giving lantern hygiene lectures in schools at the time of their visit.

MEMORANDUM.

The Scientific Advisory Board, after a careful consideration of Dr. Lankester's Report on Tuberculosis in India and the opinions of local Administrations on the Report, recognise that at present any large administrative measures cannot be framed to deal with the housing and other social conditions largely responsible for the prevalence of tuberculosis.

While no definite proof of the increase of the disease of late years in India are adduced in the Report owing to defective statistical data available, there is no question as to its extreme prevalence in India.

In their opinion any measures to be taken for the prevention of this disease can only be part of more general measures which require to be adopted to combat the spread of all preventable diseases—foremost among which they would place the education of public opinion and especially the training of the young.

(1) *Education.*—(a) Health teaching should be made compulsory in every educational institute from the primary school to the college. The Scientific Advisory Board feel that unless this teaching be made a compulsory part of a curriculum there is little chance of any real advance being made in combating the spread of the disease.

This would doubtless mean that one of the compulsory subjects would require to be dropped. In the primary schools a very simple course would be necessary, dealing with the value of cleanliness, light, air, etc.; in the college course, the essential facts about the most prevalent Indian diseases and a certain amount of elementary physiology and personal hygiene should be included.

2. For girls, domestic economy, nursing and the care of children might be dealt with in an elementary fashion.

They would like to see Hygiene and Public Health an optional subject for Matriculation.

The Board realise that the training of teachers in such subjects must be the first step to any real progress in this direction. They are of opinion that this matter should be taken up as soon as possible.

(b) The education of public opinion.

This would naturally take the form of lectures and demonstrations and issues of pamphlets.

The circulation of lantern slides of model lectures, drawings, etc., would help greatly to overcome the inertia which tends to prevent the starting of such instruction for the public.

The gradual enlightenment of the public as to the dangers of indiscriminate spitting, to the value of fresh air and abundant light in the prophylaxis of tuberculosis, in methods of house construction so as to furnish cheap and sanitary dwellings for the poor, may be expected gradually to evolve a public conscience in these matters. The present methods of housing the large bodies of population in cities, for example, may be expected to improve under the pressure of an enlightened public opinion.

State inspection.—This would take the form of medical inspection of scholars in schools and colleges and possibly of much more detailed inspection of operatives in factories. The great benefit of such inspection to the health of the child community has been thoroughly recognised in Great Britain; there is no question of its value. The difficulty in India is dependent upon the present paucity of medical officers; their want of training for this particular type of work and the initial cost of instituting such measures. A beginning might be made by training Assistant Surgeons and Sub-Assistant Surgeons and thereafter allotting this duty of inspection and report to them as part of their routine work.

The Board wish to direct attention to what is being done on a small scale in the Punjab for Anglo-Vernacular schools *vide* paragraph 10, page 81 of the Report of the Inspector General of Civil Hospitals, Punjab, on the "opinion of local Administration" on Dr. Lankester's Report.

3. The Scientific Advisory Board desire to make a reference to the danger of concentration of tuberculous subjects in or around Hill Stations—to the very great danger of existing populations. It would appear that special powers are required by Hill Station municipalities to prevent the development of this danger in their midst by the thoughtless and unscrupulous action of patients or their medical attendants. The chief danger here is that of concentration of massive infection within confined limits. Legislation on such lines is under consideration by the Government of Bombay, *vide* paragraph 9, page 19, "opinion of local Administrations" on Dr. Lankester's Report.

4. Special tuberculosis wards in Hospitals for the treatment of advanced phthisical cases are very desirable, but it must be realized that at present much difficulty is likely to be experienced on persuading such patients to reside therein except for very limited periods.

The development of tuberculosis dispensaries should be encouraged. They require suitably trained men and women to officer them. The tendency in Great Britain seems to be more and more to have recourse to the dispensary as a cheap and efficient means of affording treatment for the affected and of distributing information on the subject of the precautions essential to protect a household harbouring an infected person.

They consider every encouragement should be given to philanthropic enterprise to erect Sanatoria under proper safeguards for the protection of surrounding populations. They however desire to endorse the opinion expressed in some of the "notes" that the sanatorium, as distinguished from the hut shelters, is for the rich and even then for only a small fraction of the affected.

Further, the subject of Bovine tuberculosis merits further study.

Home (Adm) Dept
CN-690A. From the Govt of India
N-97 of 24.2.19.

Encl- N-690A-1
25.3.19
Referred to the
for remarks on the
8A
21.2.19. suggestions con-
- tained in the memo-
- randum of the Scientific
- Advisory Board.

L

The D.P.S.
(with copy
of the Govt of
India's letter
sent.)

Reminder to issue
after 1 month

NK
22/1/19

A
22.3.19
W
25/3/19



370

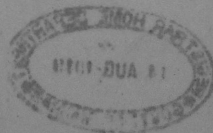
Home (25-1) Sept.
 Letter to No. 690A-2
 26.3.19
 The Financial Secretary
 to the Govt of the
 Punjab,

Sir,

It is understood
 that a system of
 medical inspection
 of ^(in Anglo-Vernacular) schools is in force
 in the Punjab and
 that the results of
 such inspection are
 recorded on a card
 provided for each boy
 for the period of his
 school life. I am
 directed to request
 that with the permission
 of His Honour the Lt. Governor
 this form may be
 furnished with full
 particulars relating
 to the system together
 with a sample copy
 of the card ^{in use} ~~used~~.

I have &c,

8th
 27.3.19 NW 12.11.19 CR 24.3.19





3196 G.

Lahore, the 26th April, 1919.

The Hon'ble Mr. J. A. Richey, M.A.,
Under Secretary to Government, Punjab.
Home (Education) Department.

To
The Secretary to Government,
Madras.

Sir,

With reference to your letter No.690 A-2, dated the 26th March, 1919, to the Financial Secretary to Government, Punjab, I am directed to forward herewith a copy of C.M. No. 5336, dated the 23rd September, 1915, on the subject of the medical inspection of school boys.

I have the honour to be,

Sir,

Your most obedient servant,

J. H. Towle

Asstt. Director,
for Under Secretary to Government, Punjab,
Home (Education) Department.
K. G.

FROM

J. A. RICHEY, ESQUIRE, M.A.,
Offg. Director of Public Instruction, Punjab,

TO

THE INSPECTORS OF SCHOOLS IN THE PUNJAB.

Dated Lahore, the 23rd September 1915.

SIR,

I HAVE the honour to say that the Local Government is appointing six Assistant Surgeons for the inspection of male pupils attending secondary schools with effect from October 1st, one medical inspector for each division and one for the schools in Lahore.

They will inspect only the boys attending the Middle and High departments of Government, Board, and Aided Anglo-vernacular High and Middle Schools.

Their work will be to report both on the condition of the school premises, sanitation, cleanliness, etc., and on the health of the individual pupils.

For the first purpose a register in a prescribed form will be kept in each school, in which the medical inspector will record his remarks at the conclusion of his inspection. A copy of these remarks must be forwarded by the Headmaster to the Divisional Inspector, with a report as to the steps that will be taken to remedy any defects noted by the medical inspector.

For the second purpose each pupil examined will be supplied on the occasion of the first inspection with a card on which the medical inspector will enter details as to his physical condition. The cards are designed to cover a period of five years. These cards will be kept by the Headmaster of the school and on the occasion of a boy proceeding to another school will be attached by him to the leaving certificate granted. Every boy on admission to one secondary school from another should be required to produce his medical inspection card together with his leaving certificate. When a boy finally leaves school on the completion of the High School course, his medical inspection card should be forwarded to the Divisional Inspector of Schools, who will file such cards for the purpose of preparing, when asked to do so, statistics of the physical condition of the pupils attending secondary schools.

In order to preserve these cards properly it would be desirable for Headmasters to have simple wooden boxes made 12 inches in width by 9 inches in height (the size of the cards is 11 inches by 8 inches). The boxes should be divided by partitions to allow of the cards being kept classwise: and the length of the box will depend on the number of classes in the Middle and High departments.

E.g.—A school with ten secondary classes would require a box some two feet long divided into ten compartments of about two inches in width each, which should each be capable of holding some forty cards.

It is hoped that it will be possible to inspect each secondary school once during the course of the year. The medical inspector will be able to inspect the pupils of two classes of average size during the day. So that allowing an additional day for inspecting the premises and filling up the register, the ins-

pection of a middle school should ordinarily last three days and of a high school five days.

Headmasters should be requested to give every assistance to the medical inspector while engaged in his inspection.

It will not be necessary to unduly upset the ordinary work of the school for this purpose, the boys in the class under inspection being simply sent out one by one in rotation by their class master to a room assigned to the Medical Officer for his use during inspection, each boy returning after inspection to his ordinary work, and thus only losing some ten minutes of school work during the year.

It is not the function of the medical inspectors to treat boys suffering from ailments or to prescribe for them. They will merely advise in necessary cases treatment at the hospital, the purchase of spectacles, etc., etc., it being left to the parents of pupils to follow the advice given in the interests of their sons' health.

The medical inspection cards and register are under preparation, and will be brought to each school by the medical inspector on the occasion of his first visit, and left permanently in the charge of the Headmaster.

Instructions to the above effect should be issued by you to all Headmasters concerned as early as possible.

I have the honour to be,

SIR,

Your most obedient servant,

J. A. RICHEY,

Offg. Director of Public Instruction, Punjab.

School.

Surroundings of School.

General description of School building.

*Number and dimensions of class-rooms
(with seating capacity of each room).*

Ventilation and lighting.

Number and kinds of latrines.

Water-supply.

Hostel accommodation.

1. Size and accommodation of dormitories
2. Ventilation
3. Furniture
4. Sanitary arrangements
5. Cooking arrangements

Criticisms and recommendations.	Improvements effected since last visit.
9. General health.	
10. Evidences of malaria. Distribution of quinine.	
11. Arrangements for regular recreation, and periods of fresh air.	
12. Number of boarders in comparison with boarding accommodation.	
13. Sanitary condition of boarding-house.	
14. Condition of food and water-supply of boarding-house.	
15. General.	

Medical History Card of _____, son of _____, of _____ School.

Serial No.	Date of admission,	Age,
Height { 191 191 191 191 191	Weight { 191 191 191 191 191	Vaccinated Re-vaccinated
Chest measurements { Inspiration 191 191 191 191	Expiration 191 191 191 191	
Date of Examination { 191 191 191 191	General physique.	

Previous Medical History.

Year.	191	191	191	191	191
Cerebro-spinal system ...					
Respiratory system ...					
Eye-sight and diseases of the eye.					
Diseases of the ear ...					
Diseases of the nose ...					
Diseases of the throat ...					
Circulatory system ...					
Digestive system, liver, etc.					

Year.	191	191	191	191	191
Lymphatic system, glands, spleen, goitre, etc.					
Urinary system ...					
Muscular system (abdominal walls, etc).					
Connective tissue & skin					
Organs of locomotion, bones, joints, etc.					
Deformities, curvature of spine, etc.					

M. O.'s remarks and recommendations.

Instructions for Medical Officer.

- (1) The pupil should be stripped for examination except Langoti.
- (2) With the exception of the medical history only what is actually observed should be entered.
- (3) If pupils suffer from any disease in the intervals between examinations a note should be made on the Card as to its character and duration by the medical attendant or headmaster.
- (4) If there is nothing abnormal present under any heading the space opposite should be left blank.
- (5) The entries in the various columns should be brief and to the point.

Medical Inspector.

Home (21st) Sept.
CN 1120A. From the Govt of the Punjab, No 3196 of 26-4.

Endt. Edu 1120A-18 10-5-19

The papers received from the Govt of the Punjab on the subject of the medical inspection of school boys in that province are forwarded to the D.P.S. in continuation of Endt No 690A-1, dated the 25th March 1919.

p. 594.

8x
7.5.19.
M
815/43

9.5.19
10/5/19

2
10/5

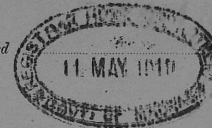
The D.P.S.
with papers
(to be returned
with the reply
to Endt No 690A-1
25.3.19)

10/5

HOME (EDUCATION)

DEPARTMENT.

Received



Registered

1919

Subject.

Submitting remarks on the suggestions made in the memorandum prepared on Dr. Lankaster's report on Tuberculosis in India.

ENCLOSURES

No.

Spare copies

No. 3186/4

Station (Camp) Ootacamund Dated the 11th May 1919

From (Name) The Hon'ble Mr. R. Littlehalls, M.A.

(Designation) Ag. Director of Public Instruction

To The Secretary to the Government of Madras,

Home (Education)

Department

Sir,

With reference to your endorsement No. 690 A-1 dated 25th March 1919, I have the honour to remark as follows on the various points raised in the memorandum of the Scientific Advisory Board.

(1) Health teaching should be made compulsory in every educational institute from the primary school to the college:

The course of study in elementary schools is regulated by Rule 20 of the Madras Educational Rules. In the scheme of studies for elementary schools for boys, under the heading general knowledge, the following is found:-

Pupils

Pupils should be able to answer very simple questions relating to the simplest and most important rules of health; while in the scheme of studies for elementary schools for girls, health and house management is given an important place, subject to the condition that instruction should begin only in standard IV. Health teaching is thus possible in all elementary schools according to our existing regulations but in actual practice not one school child in ten can be said to receive instruction in this subject and this for two main reasons. In the first place nearly 80 per cent of the scholars in this Presidency do not attend school for more than three years or to put it more accurately do not read beyond the third standard, and it is scarcely possible to give health teaching of any value to pupils in the very early stages of instruction. In the second place elementary school teachers do not have sufficient initiative to embark upon any teaching which is outside the ordinary routine teaching of the three Rs. I am doubtful whether the actual conditions of the majority of elementary schools is recognized by the Board of Scientific Advice. In secondary schools under Group B of the Secondary School Leaving Certificate scheme, elementary science which includes physiology and hygiene is a compulsory subject for all pupils, while domestic economy (and sewing) is compulsory for girls. In addition thereto, some book on health such as "Life, Light and Cleanliness" or "A health reader" is often specifically prescribed for the Secondary School Leaving Certificate course. It is possible that something more than is now being done may be taught in Forms I to III of middle and secondary schools. This is a matter for consideration. The Scientific Advisory Board considers that the essential facts about the prevalent Indian diseases and a certain amount of elementary physiology and personal hygiene should be included in the college course. I am unable to agree with the Board. I consider that these are subjects essentially for a High School course and in this Presidency we include them in the High school course. It may be noted that the average age of persons who are reading in the VI form is over 18. Furthermore the college courses are prescribed by the University authorities and their alteration would require in the first place the approval of the Senate of the

University.

(2) For girls domestic economy, nursing and care of the children might be dealt with in an elementary fashion:

I agree. Indeed domestic economy is a compulsory subject for girls reading in secondary schools. I do not like however to put too much stress upon this portion of the work in girls schools, for if these subjects are taken up in detail and much time devoted to them other subjects will have to be dropped to make room for them and this would act prejudicially upon women's education in general in India for girls would not then readily qualify for admission to a college for the purpose of taking up a University course. The majority of the girls in this country who study up to a high school standard desire, if possible, to take up a University course, and we are looking to these girls for our future teachers in girls schools. I should prefer that nursing and the care of the children be dealt with in separate lectures specially arranged for and delivered once a week by some specially qualified person at times which are outside the ordinary school hours, and which might be attended at the option of the pupils (or their parents).

(3) They would like to see Hygiene and Public Health an optional subject for Matriculation:

In this Presidency the Matriculation examination is of little account, only from 20 to 30 pupils taking the examination. It is under the control of the University.

(4) The training of teachers in such subjects must be the first step to any real progress in this direction:

The course of study in Training schools for men teachers includes human physiology and school hygiene, separate divisions of which are temperance, sanitation and first-aid to the injured, that for Training schools for women teachers includes health and house management, household management, sick nursing and first-aid to the injured. All our elementary school teachers who are trained thus receive instruction in the subjects under reference. Arrangements were made by the

Medical

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Medical department for the delivery of lectures on Hygiene and sanitary subjects in select centres for the benefit of teachers and the public in general. I might recommend the continuance of these lecture so soon as medical men are available.

(5) Education of public opinion:

Pamphlets on hygiene and health subjects both in English and in the vernacular have from time to time been published and circulated. The Sanitary Commissioner also arranges I believe for travelling lecturers to deliver lectures on these subjects illustrated by lantern slides. This is a branch of the work which might be extended.

(6) Medical inspection of schools:

This subject has already been taken up by this department and by Government. At present I am awaiting replies from the inspecting officers regarding what has been and what is proposed to be done by the managements of recognised schools and colleges, on receipt of which I shall address Government separately on this matter, which I consider to be the most important raised in the whole memorandum, for when once we have competent medical advisors and competent medical inspectors of schools, they will be able to advise us on all other points raised in the memorandum and to formulate proposals for giving effect to that which is considered essential and practicable.

I have the honour to be,

Sir,

Your most obedient servant,

Ag. Director of Public Instruction.

HOME (EDUCATION)

DEPARTMENT.

Received



Registered

1919

Subject.

Offering the Director's remarks re the scheme of medical inspection instituted in the Panjab.

ENCLOSURES.

No.

Spare copies

R.C. No. 3186/1919

Station Madras, Dated the 6th June 1919

From (Name) the Hon'ble Mr. R. Littlehales, M.A.,
(Designation) Ag. Director of Public Instruction
MADRAS.

To The Secretary to the Government of Madras,

HOME (EDUCATION) Department.

Sir,

In returning herewith the papers relating to the medical inspection of school boys in the Punjab forwarded with Endorsement No. 1120 A-1 dated 10th May 1919 I have the honour to state that the Government of the Punjab have taken an entirely different line of action from that sanctioned in G. O. No. 1454 Home (Education) dated 14th November 1918 for the medical inspection of schools and colleges in this Presidency. I observe that in the Punjab, the Government themselves are appointing the medical officers and that

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a definite form for the medical inspection has been prescribed.

(N) 2. I also observe from Sir Henry Stone's letter to Government R. C. No. 988/17 dated 3rd August 1918 read in the G. O. referred to above that he had proposed in consultation with the Surgeon-General with the Government of Madras the medical inspection in the first instance of certain typical institutions by medical officers in Government employ on payment to them of a remuneration calculated at the rate of Annas 10 per pupil and that further a form of medical inspection based on Col. Donovan's method of examination of the boys in the elementary schools under the Corporation of Madras was suggested for approval.

(N) 3. The Government however did not see their way to the acceptance of the above proposals and directed in their order No. 1454 Home (Education) dated 14th November 1918 that each aided school should make its own arrangements for the medical inspection of its pupils promising at the same time a small grant-in-aid for the purpose if funds permitted while as regards schools under public management the Inspectors of Schools have been required to report on the arrangements proposed. As regards the lines on which the medical examination of school children should proceed the Government considered that much must be left to the discretion of the medical officers concerned and therefore were not in favour of the standardisation of a form.

4. From the foregoing paragraphs it will be seen that the scheme of medical inspection proposed in this Presidency differs completely from that proposed for the Punjab by the Government of that Province.

5. I return herewith the enclosures to Endorsement No. 690 A-1 dated 25th March 1919 which have been retained in this office by mistake.

I have the honour to be,

Sir,

Your most obedient Servant,

G. K. Srinivasan
for Director of Public Instruction

16
NOTES.

L & M (Medical) Department

From the Government of India, No. 97 dated 14-2-1919

Subject.- Dr. Lankester's report on tuberculosis in India.

After despatch (of Memo) the file will be sent to Home (Education) for perusal.

V.S. 7-3-19

L.A.C. 8-3-19

E.G.S. 10-3-19

Home (Education) Department

The memorandum of the Scientific Advisory Board of the Indian Research Fund Association contains suggestions for the teaching of health and hygiene in schools and colleges and for the medical inspection of all educational institutions. Separate action is being taken in regard to medical inspection of schools. As regards the teaching of Hygiene in schools, attention is solicited to para 6 of Letter No. 124 Educational dated the 9th February 1915, which sets out what is being done already in this respect in schools in this Presidency. It may be noted here that in their letter to the Government of Bengal, dated the 18th January 1917 the Government of India stated as follows:-

"As a result of further consideration, they (the Government of India) are themselves inclined to the opinion that insistence on the instruction of pupils in hygiene with a view to an examination test would probably only lead to a somewhat formal and superficial course of instruction. They are disposed to think that a preferable alternative would be to give teachers a practical course of instruction in the subject. In these circumstances and having regard

p. 3 of cf.

gov. 1454 (N)
14-11-18

(X)

para 6 of letter on
gov 101-102 gso. 1332
10.10.18 (R)

18
 "to the fact that a test in hygiene does not properly
 "fall within the scope of the University Matricula-
 "tion Examination as such, the Government of India
 "are not at present prepared to invite the Calcutta
 "University to consider whether sanitation and -
 "Hygiene should be recognised as alternative subjects
 "for its Matriculation examination".

3. Instruction in physiology and school hygiene
 is now imparted in training schools. When the popular
 hand book which Dr. Lankester is to prepare on tubercu-
 losis in India is ready, it may be supplied
 to all training schools.

3. The D.P.I. may, it is submitted, be consulted
 u.o. as to whether he considers that any action
 should be taken on the suggestions of Scientific
 Advisory Board.

S.K.
 18-3-19

C.R.
 20-3-19

N.K.
 18-3-19

S

I would refer the matter officially to the
 D.P.I for remarks.

2. Also letter to the Punjab to give us more
 details of the medical inspection in vogue there
 with samples of the card etc.

R.R.R.
 20-3-19

A draft endorsement and a draft letter are
 submitted for approval. After issue the file may
 be returned to L & M (Medical).

S.K.
 21-3-19
 N.K.
 22-3-19

C.R.
 24-3-19

S

R.R.R.

East No 690 A-1823-3-19
 Letter No 690 A-2623-3-19

p. 7 of cf.

p. 8 to 12 of.

p. 5 of cf.

p. 14 of cf.

p. 15 of cf.

p. 19 of cf.

page 9 of cf.

p. 3 of cf.

CN-1120A. From the foot of the Punjab
N 3196-9. 26. 4. 1919.

The Punjab Govt have forwarded papers on the subject of the medical inspection of school boys in that province. These papers may be forwarded to the D.P.I. in continuation of Cont. N-690A-1. 25th March 1919. A draft endorsement is placed below for approval.

SK
7.5.19.
MK
9.5.19

A
9.5.19
10/5/19

[Cont. N-1120A-1 dated 10.5.19]

CN-1187A. From the D.P.I., R.C. N-3
dated 10th May
1378A. From the D.P.I., R.C. 3188/8

The D.P.I. submit his remarks the suggestions of the Scientific Advisory Board on Dr. Lancaster's report. The Board's suggestions are (1) that health teaching should be compulsory in every educational institution from the primary school

college;

- (2) that hygiene and public health should be made an optional subject for the matriculation examination;
- (3) that steps should be taken for the training of teachers in these subjects;
- & (4) that a system of medical inspection of schools in schools & colleges should be instituted.

2. Compulsory teaching of Hygiene.

(i) Elementary schools. The Scientific Advisory Board has expressed the opinion that in the primary schools a very simple course should be introduced dealing with the value of cleanliness, light, air etc. Under the scheme of studies for elementary schools for boys, pupils should be able to answer very simple questions relating to the simplest and most important rules of health; while in the scheme of studies for elementary schools for girls, health and house management is given an important place, subject to the condition that instruction should begin only in standard IV. The D.P.I. states that health teaching is thus possible in all elementary schools according to our existing regulations, but in actual practice not one school child in ten can be said to receive instruction in the subject, the principal reasons ~~being~~ being the short duration of school-life and the incapacity of most of the teachers to teach the subject. As pointed out by the D.P.I., it may not be possible to give health teaching of any value to pupils in the very early stages of instruction, but there appears to be no reason why strenuous attempt should not be made to give regular teaching in hygiene in the higher elementary schools. As stated in para 6 of letter to India No. 124, dated the 9-2-15, the health primer

page 3 of cf.

Remarks under "3. General Inquiry"
on page 5 of the Scheme of
Studies for elementary schools
for boys.

page 5 of Scheme of Studies
for girls
& Supplement to it.

page 16 of cf.

entitled 'Life, Light & Cleanliness' has already been translated into the principal vernaculars of the Presidency for use in elementary schools. The D.P.I. will no doubt see that instruction in hygiene on sound lines is given at least in the higher elementary school.

(ii) Secondary schools. Provision has already been made for the compulsory teaching of physiology and hygiene in the Secondary school leaving certificate scheme. As regards the lower forms of secondary schools, the Director states that something more than is now being done may be taught in forms I to III of middle and secondary schools. Many boys in secondary schools stop their education with the middle school standard; and it is submitted that the Director may be asked to revise the courses of studies in these forms to give proper recognition to the teaching of hygiene.

(iii). Colleges. The Scientific Advisory Board considers that the essential facts about the most prevalent Indian diseases and a certain amount of elementary physiology and personal hygiene should be included in the college course. The Director does not agree with the Board. He is of the opinion that the subjects in question are essentially more suited for the high school course. Further the college courses are prescribed by the University and that body must be moved in the matter. The Govt. may concur in the views of the D.P.I.

3. Education of pupils. The Scientific Advisory Board suggests that for girls domestic economy, nursing and care of the children might be dealt with in an elementary fashion. The Director points out that domestic economy is a compulsory subject for girls in secondary schools, but finds practical difficulties in adding the other two

Syllabus on page 55 of
C.G. calendar (1915-17)

page 16 of cf.

page 3 of cf.

page 16 of cf.

para 2, page 3 of cf.

page 17 of cf.

22
subjects to the secondary school course. He suggests that nursing and the care of the children be dealt with in separate lectures specially arranged for and delivered once a week by some specially qualified person and that such lectures be delivered outside school hours and attended at the option of the pupils. The D.P.I.'s views may be concurred in. It is submitted that special lectures on hygiene and home nursing have in the past been delivered in the Queen Mary's High School at Vizagapatam and in the Hobart Secondary School, Madras, and the lecturers were paid special remuneration. The Director will no doubt arrange for similar lectures in future whenever the need for the same is felt.

4. Hygiene and public health in the University Matriculation examination. The Scientific Advisory Board would like to see Hygiene and Public Health an optional subject for Matriculation. As the secondary school leaving certificate scheme has practically replaced the University Matriculation in this Presidency, the Director does not consider that any action in this direction is necessary. Besides, the Matriculation examination is under the control of the University. Attention is also solicited to letter to India No. 409 Edl., dated the 20-4-15, and also to the extract from the Govt. of India's letter, dated the 16th January 1917, on page 1 supra, in which that Govt. have expressed the opinion that a test in these subjects does not properly fall within the scope of the University matriculation examination.

5. Training of teachers. As pointed out by the D.P.I., the scheme of studies in training schools drawn up by the department provides for instruction in human physiology and school hygiene to elementary school teachers. Special courses of

A
Po. No. $\frac{1398}{8.11.17} + 80. \frac{173}{11.2.17}$

page 3 of cf.

page 17 of cf.

III

page 17 of cf.

$$\begin{array}{r} \text{No. } 1234 \text{ (C)} \\ 16.9.18 \end{array} \quad 180. \quad \begin{array}{r} \text{No. } 1350 \text{ (K)} \\ 19.10.18 \end{array}$$

$$\begin{array}{r} \text{No. } 173 \text{ (H)} \\ 11.2.19 \end{array}$$

page 17 + 18 of cf.

$$\begin{array}{r} \text{No. } 1802 \text{ (D)} \\ 15.12.16 \end{array}$$

page 3 + 4 of cf.

page 8 of cf.

page 19 + 20 of cf.

page 18 of cf.

page 3 of cf.

page 15 of cf.

23
 lectures in physiology and hygiene are delivered to the students in the training colleges at Saidapet & Rajamundry. Similar lectures on First aid, hygiene and home nursing are delivered by special lectures in several training schools for mistresses. Presumably the Director does not consider that anything further should be done to improve the teaching of these subjects in training schools and colleges. The Director recommends that the Medical department should arrange for the delivery of lectures on hygiene and sanitation subjects in select centres for the benefit of teachers and the public as was done in 1917. The question is one for consideration in the L & M department.

6. Medical inspection of schools. In suggesting the institution of a system of medical inspection of schools and scholars, the Scientific Advisory Board draws attention to the system adopted in the Anglo-Vernacular schools in the Punjab. In that Province, six Asstt. Surgeons have been appointed for the inspection of male pupils attending secondary schools. The pupils examined are supplied with cards on which the medical inspector enters details as to his physical condition. The D.P.I. points out that the system of medical inspection sanctioned in G.O. No. 1454 dated the 14th November 1918, is different from that followed in the Punjab. He proposes to address Government separately as to the action to be taken in this Presidency in the matter on receipt of reports which he has called for from Inspectors. The further communication promised may be awaited.

7. As regards the education of public opinion in this matter, which is also referred to by the Board, the Director considers that the work already done by the Sanitary Commissioner of arranging for

lectures illustrated by lantern slides might be extended. This question is also for consideration in the L & M Dept.

8. So far as this department is concerned, no action on the current file appears to be necessary. The remarks of L & M Dept. may be invited on the suggestions affecting that Dept.

8K
7.6.19
N.K.
19.6.19

CR
19.6.19
5

App. I am not sure that the attendance should be optional.

2. Whatever be the curriculum, I see from the D.P.'s letter that what is now needed is

(i) Somewhat more should be done in form I to III.

(ii) Separate lectures for girl schools

(iii) Special reference to these subjects in the training of schools.

3. From a public health point of view, inculcation of correct principles from the outset is of great importance. I have already

forwarded to the D.P.'s discussions on the subject in the Legislative Councils of Bengal and India.

4. I hope that in due course the D.P.'s will elaborate his proposals

for the above.

5. Re medical inspection, the D.D. will have to consider whether some form of standardized work is not desirable in the case of Govt schools. Aided institutions may adopt their own methods, but the chances are that they will fall into line.

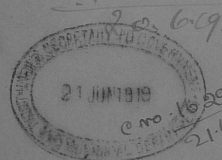
6. The real difficulty for any immediate advance is possibly the paucity of medical men. If it may not be my province, yet the urgency in a health point of view is so great that I should press for more & more development of medical institutions.

7. After the file is returned by Lom, the file will have to go back to A.P.9.

May
20/6/29

Lom (ms)

Edun No 1378A-1



VN
21/6

2 om (ms)

with reference to the Home Department Secretary's remark at B above, it is submitted that the Govt. are already doing what they can to increase the output of medical men in this Presidency. The

Total number of pupils admitted into the several medical schools in the Presidency in July 1918 was 290[±] against 120[±] in July 1915. The number will be increased when the new school buildings under construction in Tanjore and Coimbatore are completed. [The opening of a new school at Guntur is also under separate consideration].

The number of admissions to the Medical College was raised from 80 to 100 in G.O. No. 454 Medl. Dated 6th Nov. 1917, and the S.G. has been asked in G.O. No. 308 Medl. dated 7-6-19 to submit the necessary proposals for increasing the admissions to 150 from 1st July 1920.

2/2/20
23/6.

In regard to the education of the public in hygiene & sanitation subjects by means of lectures, it may be noted that the scheme of health lectures organized in 1916 has been working for the last two years with satisfactory results. In G.O. No. 722 of 18.1.19, the Govt remarked that the lectures had served a useful purpose & have sanctioned the continuance of the

Page 10 of 40 528 of 21-11-18
p. 2 of notes to 40 142 of 1-12-16

orig. twice removed for another file

[Through Local section with reference to paragraph 57 of the Home Dept. note above]

Co. 10027
15.12.16.

scheme for another year. Besides
familiar topics on hygiene + sanitation
the more common diseases also, including
tuberculosis, find place in the scheme
of lectures. ~~Considering the importance
of the subject and the success hitherto
attained with the scheme, it is submis-
sed that~~ The question of extending its
scope and placing it on a permanent
footing may be considered, in consulta-
tion with the S.G. and the Sanitary
Commissioner, after receipt of a copy
of the Educational Dept proceedings on
this case. the reports are the working
for after the scheme has gone.

See
7.7.19
10.7.19

Home (S.G.) 100

Home (S.G.) Dept

The file may now go to the S.P.S.
as already directed by the Secretary
in para 7 of his note on page 9 supra.

8/7.19.

12/7/19

14/7/19

11.7.19. S.P. (100)

Vide 20.2094 C
20.11.14.

16/10/19
10.7.19



Edwards 1378 A-2

16/7/19

10254 9/21/8 19

I might suggest that the simplest way to make any arrangement is to attach to this (the E.P.) Dept. some medical officer (or officers) who might be detached from the Medical Dept. I have just had a discussion with the Surgeon General and I recognize that the medical inspection of children, the inspection of the sanitary condition of schools and hospitals and all questions relating to Hygiene and Public Health are essentially medical matters and that this Dept. will remain very much handicapped unless it can begin with at least one medical officer, and aim ultimately at the formation of a Medical ~~Dept.~~ Branch of the E.P. Dept. just as is the case with the English Board of Education. She wrote that we have to do is on the lines of the work detailed in the Report of the Chief Medical Officer of the Board of Education (England) - I have just finished reading the most recently issued report - and I submit that it is essential to have a medical officer - this Dept. if progress is to be made in



Educational institutions - the matter of Hygiene and Public Health

Sl.
11.8.11

Home (Edth/Deptth)

The D.T. I will presumably address
govt separately in regard to the
appointment of medical officers
in the Edth Deptth when he submits
proposals as to the fur the action
to be taken on the subject of the
medical inspection of schools.

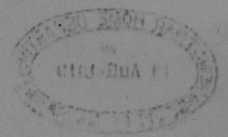
~~Do not the committee of the
action is enough to do so every
body~~

The Director has been
asked to offer his remarks
on Dr. Ragan's article in the
newspapers on the subject of the
medical inspection of schools. The
return of that file may be awaited

AK 16/11/19
CR 17.8.19
mm 10/8/19

with reference to
go. No. 1454
14.11.18 (P)

+
May 7



Dislinter + sent
to Pub. Office

8R 22/8/19
CR 24.8.19

Please see letter pp 15-18 cf. ~~11/2/20~~
D.T. propose that over he
deferred till he gets the medical
inspect well on hand? Now,
the file will be reviewed now & D.T.
may app report next year in 1921?
D.T. now

turn 110374/3
26.8.19
2288

No. 260 of 28/5/19



not necessary.
SP Masalacis
works.
Draft on his letter
W 8/9/19

30 34

There is no real necessity to defer the issue of orders on this file. But whatever orders are issued can be effectively carried out only with the aid of medical officers. And in order that whatever is decided upon may be expeditiously carried out it appears to me desirable to attach to the Educational Department (a) medical officer(s).

W 28.8.19

Home (25th) Dept.

Action in regard to the deputation of medical officers to work in the Ed. Dept. can be taken only after the D.O.S. formal proposals in this regard ^{the D.O.S. I made up 2 according to the rules} are received by post. In the meanwhile, it is for orders whether a G.O. should ~~now~~ ^{ask the D.O.S. for permission} issue ~~in accordance with~~ the points noticed in para. 1 & 2 of Secretariat note on page 8 supra.

SK
3.9.19.
AN
5/9/19

CR
3.9.19
5

A draft order is submitted for approval. Proposals for the medical inspection of schools have since been received from the D.O. and are under examination.

SK
3.9.19.
AN
12/9/19

CR
12.9.19

W

Box 5
15-7-19

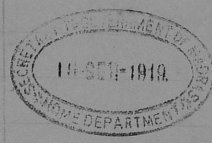
Draft for approval

35

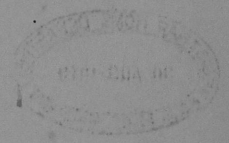
May 13/9/14

Wm

Ld.
16.9.14



15-7-19



READ AGAIN G.O. No. _____, dated _____ 191

” ” ” ” ” ” 191 .

READ ALSO:—

C. No., From the Govt. of India, No. 97, dated 14-2-19. 191

" " " " Govt. of the Punjab , " 3196-G, " 26-4-19 191

" " 1184-A, " " D. P. I. R.C. , 3186, " 11-6-19 191
1378-A. d6- -do- 6-6-19.

1378-A

dθ-

-do-

6-6-19.

ORDER.

No. 1124, dated 16-9. 1919.

Mis.

R e c o r d e d.

2. The Govt. agree with the D.P.I. as to the desirability of instituting special lectures in Hygiene and kindred subjects for the benefit of teachers under training ~~and~~ special courses in nursing and the care of children to be attended by girls at their ^{parents} option out of school hours. They await the Director's final recommendations in regard to the introduction of the teaching of hygiene in Forms I to III of middle and secondary schools.

3. Separate orders will issue on the subject of the arrangements to be made for the medical inspection of schools.

and arranging for

D.P.I.

the L & M Dept

Rain. Rec.
 24th 10th Feb
 78.
 18.90
 D.P.I.

$$\frac{NK}{101919}$$

Ca
12-9.0

13/9/49

When given for copying
 When copied
 When examined
 When signed

19

BRAD -RAIN G.O. No.
 19

DATED

CURRENT No.

ENCLOSURES TO C. No.

ORDER OF GOVERNMENT

A A A A A A A

LETTER OF GOVERNMENT

STATEMENT WITH LETTS.

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 IN ORIGINAL.

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