

SUMMARY OF THE RECOMMENDATIONS OF THE  
COMMITTEE.

Whilst the Committee recognizes that no sudden or dramatic reduction in the incidence or mortality of tuberculosis can be expected, it is convinced that the putting into force of the recommendations contained in the various chapters of this Report and summarized hereunder will lead to a gradual and steady diminution in both the incidence and mortality of this disease.

The measures recommended aim at increasing the resistance of the individual against infection, diminishing the sources of the infective agent and the opportunities for transmission of infection.

The Committee desires to make it clear that its recommendations are based upon such knowledge as at present exists, and that the acquisition of further knowledge may in the future necessitate the adoption of additional or different means.

The acquisition of the necessary knowledge is, however, exceedingly difficult, and in certain directions almost impossible because of the absence of full and reliable statistics concerning the Native population of the Union. The Committee, indeed, was greatly handicapped in its work by the absence of such data, and desires to record its considered view that an improvement in the collection and recording of vital statistics concerning the Natives is of the utmost importance to the progress of improvement in public health. It would point out that the Tuberculosis Commission of 1914 then stressed the same point, and that the position is nevertheless no better to-day than it was at that time. The absence of the basic information afforded by reliable vital statistics of the Native population seriously impedes the planning of any organized campaign against tuberculosis and other diseases, and, furthermore, makes it difficult, if not impossible, to assess the value of any measure adopted for improving public health.

Although only a truism, the Committee would point out that the health problems of the Native population are intimately bound up with those of the European population, and in dealing with the problem of public health there can be no separation of the various races in South Africa into separate compartments.

## I.—ANTI-TUBERCULOSIS MEASURES IN THE NATIVE TERRITORIES.

Recognizing the value of improving the health conditions in general of the Native population, the Committee recommends :—

1. *Improved Medical Services.*—There is the most urgent need for a radical improvement in the medical services in the Native Territories. The Committee is aware that the Union Health Department recognizes this need, but nevertheless the Committee feels it its duty specially to emphasize this point.



2. *Tuberculosis Officer in the Service of the Mining Industry.*—The value to the industry of a healthy Native labour supply need hardly be stressed. It is, therefore, in the interests of the industry to do everything practicable to further hygienic conditions in the Native Territories.

The Committee considers that a very valuable step in that direction would be taken through the appointment by the industry of a medical officer to travel in the Native Territories and to be specially charged with the duty of dealing with tuberculosis among repatriated mine Natives, and in areas in which intensive recruiting takes place.

The Committee has no doubt that such an officer would receive the support of the Union Health Department and, working in co-operation with all health agencies in the Territories, would achieve important results.

## II.—ANTI-TUBERCULOSIS MEASURES IN CITIES AND TOWNS.

3. The Committee is impressed with the need of improving the general health conditions of the Native locations of certain urban areas and, without drawing attention to any particular area, recommends that urban authorities have their attention invited to the urgent need of effecting such improvements, and especially to the need of anti-tuberculosis services, which at present are mostly woefully deficient.

4. The Committee is of opinion that there is scope for investigation as to the value of B.C.G. inoculation amongst the Natives and Coloured children of urban locations where tuberculosis is rife.

## III.—GENERAL MEASURES OF HYGIENE ON THE MINES.

5. *Journey to the Mines.*—In view of the fact that there is still a considerable amount of sickness amongst Natives on arrival at Johannesburg, in spite of improvements in the transport conditions, the Committee recommends that further investigation be made into the travelling conditions, more especially with regard to the possibilities of greater protection against climatic changes and the possibilities of isolation of gangs from different localities on the journey and in their early days on the mines.

6. *Improvement in Sleeping Quarters in the Compounds.*—Although improvements have been made on most mines, there are still to be found mine compounds of the type condemned by General Gorgas in 1914. Where this is the case the Committee recommends that improvements should be introduced in the direction of having fewer occupants per room and of better separation of the individual bunks in each room. In the opinion of the Committee, these measures would diminish the liability of the transmission of infections of the respiratory tract, including, of course, tuberculosis.



7. *Rest and Feeding Underground.*—The Committee recommends that the principle should be recognized of the general need for some period of rest during working hours and a light meal underground in the resting time.

For reasons given (pp. 269–272), the Committee feels that the present system, with an average of  $10\frac{1}{2}$  hours underground, 8 hours continuous work and nothing to eat during that time, is unlikely to be conducive to the highest efficiency in work and is liable to be a decisive factor in swinging the balance the wrong way in the case of individuals liable to a flare-up of a latent tuberculous infection.

8. *Addition of Vitamin A to the Dietary.*—The dietary of the Native mine labourer is deficient in vitamin A and this deficiency can almost certainly be correlated with a defective power of resistance to infection by tubercle bacilli and other germs. The Committee therefore recommends the definite addition to the standard diet of food containing an adequate amount of this vitamin. Animal fat or specially vitaminized oils would probably best meet this need.

9. *Risk of Chill Underground.*—The Committee is of opinion that there is room for improvement in the protection of Natives during their return from hard work in the great heat of the deep levels from sudden changes in air temperatures and velocities, either by means of suitable ventilation controls or, where this is impossible, by the provision of extra clothing.

#### IV.—SPECIAL ANTI-TUBERCULOSIS MEASURES ON MINES.

10. *Initial Examination.*—Whilst of opinion that the initial examinations and the examinations designed for the early detection of tuberculosis are well organized and conducted, the Committee recommends, in view of the number of cases which develop tuberculosis early in their working life on the mines, thus indicating that they arrived with latent tuberculous lesions, that the initial examination, particularly that of the lungs, should be kept as stringent as possible, with a view to excluding from the mines Natives who would be liable to develop active tuberculosis.

11. *Acclimatization to Mine Work.*—Recognizing that the unaccustomed stresses to which the Natives are subjected in the first few months of mine service constitute a great danger-zone to their health, the Committee considers that this zone can probably be most safely traversed if the breaking-in to these unaccustomed stresses be made a gradual one, and recommends that measures now in force on the mines in this direction be continued, improved and strictly adhered to.

12. *Periodical Examination of Long-service Natives.*—The Committee recommends that the system of periodical examination of all Natives with five years and over of total mining service be continued as being a very valuable method for the earlier detection of a class of chronic case liable to be a focus for spreading the disease.

13. *Anti-dust Measures.*—Realizing the influence of silica-dust as a factor in the development of tuberculosis, the Committee recommends that all those concerned with the prevention of dust be made aware of its importance in the development of this disease, as well as its already recognized importance in silicosis, and that every avenue be explored to improve on even the present admittedly high standard of dust suppression.

14. The Committee also recommends that the use of water in the suppression of dust be minimized, and that greater attention be paid to other measures, and particularly to ventilation.

#### V.—ADVISORY HEALTH COMMITTEE IN CHAMBER OF MINES.

15. Finally, in order to ensure continuity of policy of investigations and application of suitable anti-tuberculosis measures on the mines, the Committee recommends to the Chamber of Mines that a Standing Advisory Health Committee be appointed and maintained by it.

An early duty of this Committee should be to advise what health statistical returns should be kept up by the mines.



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