

CHAPTER XXVI  
METHODS OF CENTRAL CONTROL

IN the last chapter the powers of the Central Government, exercised chiefly by the Ministry of Health, to supervise and control the activities of local authorities, were classified under six heads, viz.: (1) Sub-legislative; (2) Approval; (3) Appellate; (4) Inspection and Direction; (5) Executive; and (6) Advisory. It is now necessary to enter into fuller details of each of these methods as applied to the administration of the Public Health and kindred Acts.

*Sub-legislation.*—Almost every Act of Parliament affecting the powers and duties of local authorities contains some clauses enabling one of the departments of the Central Government to extend and amplify its provisions. This is done by means of provisional orders, orders and regulations, the first of which requires the sanction of Parliament to the confirmation Act, and the last two are liable, like all other matters of departmental activity, to be discussed by Parliament, even in those cases where they are not definitely required to be laid before Parliament.<sup>1</sup> All such orders and regulations must be sent to the King's printers to be numbered, printed, and sold according to regulations issued by the Treasury;<sup>2</sup> and must be published in the *London Gazette*, such publication being conclusive evidence of their existence.<sup>3</sup> All such orders are binding and conclusive,<sup>4</sup> and the courts have refused to grant a writ of

<sup>1</sup> Ilbert, *Legislative Methods and Forms*, p. 41; Anson, *Law and Custom of the Constitution*, Vol. II, Part II, p. 48.

<sup>2</sup> Rules Publication Act, 1893.

<sup>3</sup> See Public Health Act, 1875, ss. 135 and 295; Canal Boats Act, 1877, s. 9; and Documentary Evidence Acts, 1868 and 1882.

<sup>4</sup> Public Health Act, 1875, s. 295.

*certiorari* to remove a provisional order for the purpose of being quashed, inasmuch as to do so would be to usurp functions which do not belong to courts by stepping in between the provisional order and the exercise of the parliamentary will.<sup>1</sup>

By provisional order the Ministry of Health may constitute port sanitary authorities and endow them with all necessary powers and duties and may dissolve, divide, or unite other districts, part of the latter power, together with others, being concurrently held by county councils, whose order is in the more important cases subject to the consent of the Ministry of Health.<sup>2</sup> By this means also the Ministry may, on the application of the local authority, wholly or partially repeal any local Act except such as deal with the conservancy of sewers,<sup>3</sup> and may authorize the compulsory purchase of lands for various purposes.<sup>4</sup> During the period 1926-7 the Ministry issued and secured the confirmation of twenty-two Provisional Orders for the repeal, alteration or amendment of local Acts.<sup>5</sup>

The issue of orders under the various Acts is an important part of the work of the Ministry. The range of this power is very extensive; by it rural authorities may be endowed with various urban powers, local authorities may be required to undertake the collection and removal of house refuse, the construction of sewerage and water supply works outside a district may be allowed, improvement schemes under the Housing Acts sanctioned, the adoption of the whole or parts of the Public Health Acts Amendment Act, 1907, permitted, and the list of noxious and offensive gases, coming under the operation of the Alkali, etc., Works Regulation Act, 1906 (section 27),<sup>6</sup> may be extended.

Under the Factory and Workshops Act, 1901, the Home Secretary has made orders extending the provisions of the

<sup>1</sup> *Reg. v. Hastings Local Board*, 6 B. & S. 401.

<sup>2</sup> Local Government Act, 1888, ss. 54 *et seq.*

<sup>3</sup> Public Health Act, 1875, s. 303.

<sup>4</sup> Lands required for purposes of the Baths and Washhouses, Burial, Public Libraries, and Open Spaces Acts are exceptions.

<sup>5</sup> Eighth Annual Report of the Ministry of Health, pp. 88-9.

<sup>6</sup> Public Health (Smoke Abatement Act), 1926, s. 4.

Act to specified classes of homework,<sup>1</sup> and may in a similar way modify the prescribed amount of air space in cases where artificial light other than electricity is used, where a workshop or workplace is occupied by night as a sleeping apartment, and as regards any particular manufacturing process,<sup>2</sup> make exceptions to the application of requirements as to limewashing of walls,<sup>3</sup> and prescribe the amount of sanitary accommodation for factories and workshops.<sup>4</sup> Such orders must be laid before both Houses of Parliament, and may be annulled by resolution of either of them within forty days.<sup>5</sup>

The powers previously exercised by the Privy Council of issuing orders as regards diseases of animals were transferred to the Ministry of Agriculture,<sup>6</sup> who have issued orders dealing specially and generally with all kinds of matters concerning the importation, transport, and keeping of animals, very important examples being the Tuberculosis Orders, 1925. The Ministry also exercises similar powers under the Destructive Insects and Pests Acts, 1877 and 1907. The power to make regulations extends to a similar variety of subjects, many of which have been already enumerated or explained.<sup>7</sup>

By these methods almost as much as by direct parliamentary legislation do the duties and powers of local authorities and their officers increase, and the laws they administer become more complex. In fact, it becomes increasingly difficult to find any matter dealt with by Act of Parliament that is not in some way or another affected by orders or regulations of one of the departments of the Central Government, and this growing and complicated mass of law is one of the strongest arguments in favour of a consolidation and simplification of its provisions.

*Approval.*—For many acts of local authorities the consent or approval of one of the central departments is

<sup>1</sup> Sections 107, 108 and 110.

<sup>2</sup> Section 3.

<sup>3</sup> Section 1.

<sup>4</sup> Section 9.

<sup>5</sup> Sections 3-107 and 126.

<sup>6</sup> Board of Agriculture Act, 1889, and Diseases of Animals Act, 1894.

<sup>7</sup> See list of recent orders and regulations at end of Chapter III.

necessary. In many cases, as indicated in the preceding section, this consent is given by the issue of a provisional or an ordinary order; in other cases simple sanction is all that is necessary. The adoption of certain Acts and the enactment of bye-laws and some regulations require the consent of the Ministry of Health,<sup>1</sup> which is also necessary for the purchase by agreement, of waterworks, the right to take or convey water, and property needed for the cleansing of streets. Consent is also required before a local authority can take proceedings under the Rivers Pollution Act, 1876, and to orders made by county councils under the Isolation Hospitals and other Acts, a similar condition limiting the transfer of hospitals from a district authority to the county council. For the appointment of all medical officers of health and sanitary inspectors, a moiety of whose salary is expected from the Exchequer contribution account of the county council, the approval of the Ministry of Health is required, and in this, as in other cases, such approval, as the annual reports of the Ministry disclose, is no mere formality, although in the case of these appointments its value has been greatly overestimated. No one who is well acquainted with public health administration will agree with the opinion that "the Legislature by prescribing for these local officers certain conditions of dependence upon the central authority, has given the latter a potent leverage on the work of local government . . . This peculiar device powerfully assists the Local Government Board (now Ministry of Health) and serves as a bulwark to the control which it exerts on behalf of the State over the local administration of sanitary law."<sup>2</sup> Sanitary officials have long been aware, and the Government has begun to realize, that these ideas are erroneous; there is little security either for the official in his office or for the efficient administration of the law.

The powers of the Ministry of Health in this direction are strongly reinforced by the necessity for local authorities

<sup>1</sup> See Chapter V.

<sup>2</sup> Redlich and Hirst, *English Local Government*, Vol. II, pp. 292-3.

to obtain its sanction to the borrowing of money or the issue of stock for various purposes requiring large capital outlay. During the year 1926-7 borrowing by local authorities to the extent of £27,338,720 was sanctioned for public works, exclusive of Poor Law and housing works and loans for providing temporarily for current expenses.<sup>1</sup>

The *appellate jurisdiction* of the Ministry of Health is very considerable and appears to be increasing. As a rule the right of appeal lies with the individual against the decision of the local authority, and the decision of the Ministry is final and conclusive, but there are a few exceptions. Any person aggrieved by a decision of a local authority in cases where the authority is empowered to recover expenses incurred by them or to declare such expenses to be "private improvement expenses," may appeal to the Ministry,<sup>2</sup> and a similar right exists against the requirement by a rural district council that the owner provide a water supply for his premises,<sup>3</sup> and against the refusal of a local authority to grant a licence under the Milk (Special Designations) Order, 1923. Any individual aggrieved by the grant or refusal of a certificate that the means adopted to render harmless any polluting matter flowing into a stream are the best or only practicable and available means under the circumstances has the right of appeal to the Ministry of Health,<sup>4</sup> who may also be asked to determine the reasonable cost at which water may be required to be furnished to houses without a supply,<sup>5</sup> or to fix a general scale of charges for a water supply.<sup>6</sup> In the last two cases the initiative rests with the local authority.

The Housing and Town Planning Act, 1909, since consolidated with succeeding Acts in the Housing and Town

<sup>1</sup> See Eighth Annual Report of the Ministry of Health, pp. 88 *et seq.* for detailed statement of amount and purposes of loans for 1925-6 and 1926-7.

<sup>2</sup> Public Health Act, 1875, s. 268.

<sup>3</sup> Public Health (Water) Act, 1878, ss. 3 and 4.

<sup>4</sup> Rivers Pollution Act, 1876, s. 12.

<sup>5</sup> Public Health Act, 1875, s. 62.

<sup>6</sup> Public Health (Water) Act, 1878, s. 8.

Planning Acts, 1925, gave local authorities much stronger powers than they previously possessed, but it also extends the appellate jurisdiction of the Ministry of Health, to which a landlord can appeal against a notice from the local authority or a demand for expenses incurred by them in carrying out the requirements of the notice.<sup>1</sup> A similar appeal lies against closing and demolition orders made by the local authority, or their refusal to determine a closing order.<sup>2</sup> Appeals against the action of local authorities under these Acts have been numerous, but on the decisions of the Ministry, which in general is final, not very successful.

The Public Health Act gives general powers to the Ministry of Health to settle any differences arising out of the transfer of powers or property to any local authority,<sup>3</sup> and local authorities aggrieved may appeal against the decision of the county council to include its area within a proposed hospital district or against the mode of constituting a joint committee for such a district, the decision of the Ministry being final.<sup>4</sup> Compulsion is introduced in the case of disputes and differences between medical officers of health of county districts and the county medical officer of health with reference to their duties under the Housing Act, which requires that such differences shall be referred to the Ministry of Health, whose decision is final and binding.<sup>5</sup> Differences arising in relation to matters under the regulations dealing with unsound food and milk and cream may be referred to the Ministry, but only on the application of all the affected parties; the Ministry, however, may choose to determine the differences as arbitrators, in which case the provisions of the Regulation of Railways Act, 1868, apply; otherwise their decision is final and conclusive.<sup>6</sup>

<sup>1</sup> Housing Act, 1925, s. 3.

<sup>2</sup> *Ibid.*, ss. 11, 14 and 19.

<sup>3</sup> Section 304.

<sup>4</sup> Isolation Hospitals Act, 1893, ss. 8 and 10. See also Public Health (Prevention and Treatment of Diseases) Act, 1913, and Public Health Act, 1925, s. 61.

<sup>5</sup> Housing and Town Planning Act, 1909, s. 69.

<sup>6</sup> Public Health (First Series: Unsound Food) Regulations, 1908, art. XIII, and Public Health (Milk and Cream) Regulations, 1912, art. X.

*Inspection and Inquiry.*—Before making the special orders, giving their consent to various proposals of local authorities, deciding appeals or requiring local authorities to perform specific duties, it is necessary that the Ministry of Health be fully informed upon the matter in question. For this purpose they have very full and extensive powers of inquiry and inspection, some of which are expressly provided for, whilst the remainder are exercised under powers given by the Local Government Board Act, 1871,<sup>1</sup> and the Public Health Act, 1875.<sup>2</sup> The former transferred to the Board (now the Ministry of Health) the powers of the Privy Council to “from time to time cause to be made such inquiries as they might see fit in relation to any matters concerning the public health in any place or places, and to the observation of the regulations and directions issued by them under this Act.”<sup>3</sup> The latter gives the Ministry power to make such inquiries as are directed by the Act, and such inquiries as they see fit in relation to any matters concerning the public health in any place, or any matters with respect to which their sanction, approval, or consent is required. For this purpose the inspectors of the Ministry have powers not only to attend meetings of the local authorities,<sup>4</sup> but to call for and examine all persons, books, documents, and other matters relevant to the subject of inquiry; they may summon witnesses to attend and administer oaths, refusal to attend or give evidence, giving false evidence or destroying or altering documents being punishable as a misdemeanour.<sup>5</sup> The Ministry, whose decision is final, may make orders fixing costs and determining by whom they are to be borne. Similar powers are given to the Ministry’s inspectors for the purposes of the Canal Boats Acts.<sup>6</sup>

Inquiries are expressly directed in cases where objection

<sup>1</sup> Section 2.

Sections 293 *et seq.*

<sup>2</sup> Public Health Act, 1848, s. 3.

<sup>3</sup> *Ibid.* 1875, s. 205.

<sup>4</sup> *Ibid.*, s. 296; Poor Law Boards Act, 1847, ss. 21 and 26.

<sup>5</sup> Canal Boats Act, 1884, s. 4.

is made to the construction of sewage works outside the district of the local authority,<sup>1</sup> or to the construction of a large reservoir for water,<sup>2</sup> as well as in cases where it is proposed to purchase land otherwise than by agreement,<sup>3</sup> or borrow money in excess of a certain amount.<sup>4</sup> A local inquiry must be held by the Ministry before making an order requiring the local authority to prepare and submit a town-planning scheme,<sup>5</sup> and such inquiries are usually made when complaints are received alleging neglect of the local authority’s to enforce the provisions of the Housing Act, 1925,<sup>6</sup> or that a medical officer of health has failed in his duty to inspect and represent to his authority any area complained of as unhealthy.<sup>7</sup> For the purpose of deciding whether or not any powers under the Housing Act should be put in force in a district the Ministry may require the local authority to make a report to them upon the density of population and such other matters as they may direct.<sup>8</sup> The information thus obtained enables the Ministry to exercise a certain amount of pressure and persuasion which may be successful without entailing the expense of a public inquiry.

Inquiries and inspections by the officers of the Ministry are not always public; many are informal, being frequently suggested by observations or statements in the annual reports of medical officers of health and sanitary inspectors, but where an inquiry is specified as a necessary part of the procedure preliminary to action by the Ministry, public announcement must be made of its time, place, and purpose.

It is the practice of the Ministry in the case of public inquiries in respect of housing, sewerage, and, where the county council desires it, water supply, to notify the county council of the district concerned of the time and place of inquiry, but this practice is not extended to the cases of informal inspections, which might lose some of their efficacy

<sup>1</sup> Public Health Act, 1875, s. 34.

<sup>2</sup> *Ibid.*, s. 176.

<sup>3</sup> Town Planning Act, 1925, s. 13.

<sup>4</sup> Housing Act, 1925, s. 116.

<sup>5</sup> *Ibid.*, s. 48.

<sup>6</sup> *Ibid.*, s. 52.

<sup>7</sup> *Ibid.*, s. 234.

<sup>8</sup> *Ibid.*, s. 117.

if they were announced beforehand. These inquiries form a valuable means of obtaining first-hand information as to the sanitary circumstances of any particular district and of enabling the Ministry of Health to determine where an exertion of their most drastic powers of executing or compelling the local authority to perform their duties is called for.

The audit of the accounts of local authorities by the district auditors of the Ministry of Health is a function which rightly comes under this class-heading, but has been sufficiently dealt with elsewhere.<sup>1</sup>

*Executive and Compulsory Powers.*—Being satisfied of the necessity for intervention in the sanitary administration of any district, the Ministry seldom proceeds to the full limit of its powers before endeavouring to secure its ends by persuasion. The records of such efforts and their results cannot be tabulated; they are, if mentioned, stated in general terms.

When, however, advice and persuasion fail to awaken a local authority to a sense of its duties, and it neglects to obey the order issued by the Ministry, the latter is endowed with powers either to compel the authority to perform its duties or to themselves appoint persons or authorities to carry out the duties.<sup>2</sup> The exercise by a local authority of its discretionary powers cannot be so enforced, but there are optional powers, such as those dealing with the cleansing of streets and removal of house refuse,<sup>3</sup> and the provision of mortuaries<sup>4</sup> which the Ministry of Health is enabled to transform into duties. The general power of the Ministry to enforce the performance of a duty by a defaulting local authority is contained in Section 299 of the Public Health Act, 1875, which specifies several cases in which it may be exercised, such as neglect to provide sufficient sewers, or water supply, or to maintain existing sewers, as well as default in enforcing any provisions of the Act which it is their duty to enforce. The Ministry

<sup>1</sup> See Chapter XXIV.

<sup>2</sup> Public Health Act, 1875, s. 299. <sup>3</sup> *Ibid.*, s. 42. <sup>4</sup> *Ibid.*, s. 141.

of Health must make inquiry and, if satisfied that the alleged default exists, must make an order limiting the time for the performance of the duty by the authority. In case the order is not obeyed, the Ministry have the option of appealing to the High Court for a *mandamus*, in which case the dispute is no longer between the Ministry and the authority, but between the latter and the Court; or the Ministry may appoint some person to perform the duty at the expense of the local authority, from whom the costs may be recovered. As previously noted,<sup>1</sup> however, the default of the local authority as regards its duty in relation to nuisances may be met by the Ministry authorizing a local police officer to act as a sanitary inspector and institute any proceedings which the authority might institute in respect of such nuisances.<sup>2</sup>

Similar powers are contained in other Acts for the purpose of enforcing the performance of duties thereunder. The Home Secretary may authorize a factory inspector to use the powers of a neglectful local authority to enforce the provisions of the Factory and Workshop Acts and to recover the expenses thereby incurred.<sup>3</sup> The Minister of Agriculture may empower any person named in its order to execute and enforce any of the provisions of the Diseases of Animals Act, 1894, or orders made thereunder, which the local authority has failed to execute and enforce.<sup>4</sup> And both the Ministry and the Minister of Agriculture may, after warning a negligent authority, empower an officer to execute and enforce or procure the execution and enforcement of the provisions of the Food and Drugs Acts within the district.<sup>5</sup>

Resort to the High Court for a *mandamus* is provided to enforce orders upon local authorities to exercise their

<sup>1</sup> Chapter XII.

<sup>2</sup> Public Health Act, 1875, s. 106. See also Public Health (Imported Food) Regulations, 1925, s. 4 (2), for similar powers to empower some person to execute provisions of Regulations in case of default.

<sup>3</sup> Factory and Workshop Act, 1901, s. 4.

<sup>4</sup> Diseases of Animals Act, 1894, s. 34. Compare for similar powers the Rats and Mice Destruction Act, 1919.

<sup>5</sup> Food and Drugs Act (Adulteration), 1928, s. 14

powers under Parts I, II, and III of the Housing Act, 1925;<sup>1</sup> but as regards the last part an order to execute the necessary works may be addressed, with its consent, to the county council.<sup>2</sup> An order of the Ministry requiring a local authority to prepare a town-planning scheme or to consent to modifications or conditions imposed by the Ministry is enforceable by *mandamus*, but neglect to carry out an order requiring them to adopt a scheme proposed by landowners may be met by the Ministry's approval of such scheme, which then has the same effect as if it had been adopted by the local authority.<sup>3</sup>

Careful observers have expressed doubts as to the efficacy of these methods of control,<sup>4</sup> and even a high official of the State has stated that "for various reasons central compulsion of defaulting authorities is not generally successful; and the only provision—apart from an educated and responsible public opinion—likely successfully to replace compulsion would be the institution of grants in aid of definite execution of sanitary administration, the grants depending on the work actually accomplished."<sup>5</sup> These opinions were at last adopted by the Government, and just before the outbreak of war, the Chancellor of the Exchequer, in outlining his proposals for a system of grants in aid of housing efforts of local authorities, referred to present methods of compulsion in the following terms:<sup>6</sup>

"As to the housing problem, we are on the eve of proposing great changes to deal with it. The first thing is to put local authorities in a position to enable them to carry out these proposals without being crippled and handicapped by rates. Now, the only pressure you can bring to bear upon public authorities to deal with public health is through the obsolete, antiquated,

<sup>1</sup> Housing Act, 1925, ss. 24, 50, 51 and 73.

<sup>2</sup> *Ibid.*, s. 73.

<sup>3</sup> Town Planning Act, 1925, ss. 13, 14, 15.

<sup>4</sup> Ashley, *Local Government*, pp. 53 *et seq.* Compare Webb, *The State and the Doctor and Grants in Aid*.

<sup>5</sup> Thirty-ninth Report of the Local Government Board, Medical Officer's Report, p. xv. Compare Annual Report of the Medical Officer of the Ministry of Health, 1924, p. 251.

<sup>6</sup> The Right Hon. D. Lloyd George in introducing the Budget, May 14, 1914. Compare Webb, *Grants in Aid*, p. 18.

and futile method of the *mandamus*. You may as well go into action armed with a flint-axe as a *mandamus*. The idea that you could march off the whole of the members of a municipal corporation that is levying rates of nine, ten, or eleven shillings in the pound because they cannot face the problem of finding another *2d.* or *3d.* is a thing that no Local Government Board has ever been able to bring itself up to the point of doing."

But because few cases occur in which either remedy is sought by the Ministry of Health it does not follow that the latent power is quite useless; such power always lies at the back of orders, as the latter lie at the back of the advice and persuasion which are incessantly given and used with good effect by the Ministry. Like all ultimate penalties, the potency of such powers is not to be judged merely by the number of times they are exercised.<sup>1</sup>

*Advisory.*—The central departments of the Government act as reservoirs into which flow from all parts of the country and from many parts of the world much information and statistics bearing upon the work they, and the local authorities they supervise, have to perform. From such reservoirs might be distributed the essence of this information for the guidance and advice of local authorities. In addition, the various departments employ a large number of experts in different branches of knowledge who undertake research work, and whose skill and experience are placed generally and specially at the disposal of authorities desirous of utilizing them. The mass of this information is contained in the annual report of the Ministry, the report of the chief medical officer being issued separately.

Almost every Act of Parliament and general order or regulation of a central department which affects the duties of an authority or its officials is introduced to their notice, explained and commented upon in circulars and memoranda, and information dealing with such matters as the extermination of rats, prevention of tuberculosis, construction of sanatoria, and education in public health is issued as occasion arises. This literature forms a voluminous but

<sup>1</sup> An instance of the effect of applying for a *mandamus* is given in the Forty-second Report of the Local Government Board, Part III, p. xlix.

incomplete and unorganized mass of information upon the powers, duties, activities, and technique of sanitary authorities and administration. But surprisingly little was known even to the Ministry of Health of what the various local authorities were doing or leaving undone in the domain of public health until the Ministry asked every Medical Officer of Health to make for 1925 a comprehensive report<sup>1</sup> upon:

(a) The measure of progress made in the area during the preceding five years in the improvement of the public health.

(b) The extent and character of the changes made during that period in the public health services of the area (e.g. housing, water supply, sewerage, scavenging, or refuse disposal, food inspection, or other services affecting the environment of the inhabitants; and maternity and child welfare schemes, schemes for the treatment of tuberculosis and venereal diseases, provision of isolation hospitals, or other services directed to the prevention or cure of disease in individuals).

(c) Any further action of importance in the organization or development of public health services contemplated by the Local Authority or considered desirable by the Medical Officer of Health.

In another respect the Ministry is behind the Board of Trade and Ministry of Agriculture; it does not issue a gazette or journal dealing periodically with matters which concern its sphere of administration. This is an omission which could be made good with considerable advantage, affording, as it would, not only immediate information to officials, but, by being placed upon library tables, bringing clearly before the public matters with which it is closely concerned—those pertaining to the public health.

<sup>1</sup> Circular 684.

## CHAPTER XXVII

### THE NEED FOR REFORM

At the conclusion of a survey of the machinery by which it is sought to promote the public health the questions inevitably arise: How does it work? Does it achieve its object with a minimum of friction and waste? and does the action of the national and local officials stimulate the individuals for whom they work to efforts on their own behalf?

Judged by the national vital statistics, there can be no question that it has been effective. The general death-rates for England and Wales were 19.9 per 1,000 in 1850, 19.3 in 1890, 15 in 1907,<sup>1</sup> and 12.3 in 1927; and the infantile mortality, which was 146 per 1,000 births in 1850, 151 in 1890, 118 in 1907,<sup>2</sup> has been reduced to 70 in 1927. During the same period typhus and cholera have been practically wiped out, typhoid fever has been diminished by four-fifths, and deaths from tuberculosis have undergone a 70 per cent. reduction. Small-pox, unfortunately, has of recent years shown a decided upward tendency and, although the mortality therefrom remains very low, the case-rate mars the picture of progress. These facts and figures disclose positive gains, and it may be that they have been cheaply purchased, indicating as they do general improved health and longer life. But they do not afford any answer to the question as to whether or not we are justified in thinking that they could not have been gained by a less expenditure of effort and wealth or that the same expenditure could not be expected to have given

<sup>1</sup> *Public Health and Social Conditions* (Cd. 4671), p. 25.

<sup>2</sup> *Ibid.*, p. 27.