

**The Select Committee of the House of Commons on the contagious diseases acts (1866-69), sessions of 1879 to 1882, inclusive : the minority report / as adopted by Mr. Stansfeld, M.P. [and others] ; with references to the evidence on which it is founded.**

### **Contributors**

Great Britain. Parliament. House of Commons. Select Committee on the Contagious Diseases Acts (1866-69)  
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### **Publication/Creation**

London : Frederick C. Banks, 1882.

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THE  
SELECT COMMITTEE  
OF  
THE HOUSE OF COMMONS  
ON THE  
CONTAGIOUS DISEASES ACTS (1866-69),  
SESSIONS OF 1879 TO 1882,  
INCLUSIVE.

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THE MINORITY REPORT,

AS ADOPTED BY

Mr. STANSFELD, M.P.

Mr. W. FOWLER, M.P.

Mr. C. H. HOPWOOD, Q.C., M.P.

Mr. ERNEST NOEL, M.P.

Mr. C. CAMERON, M.D., M.P.

Mr. THOS. BURT, M.P.

WITH REFERENCES TO THE EVIDENCE  
ON WHICH IT IS FOUNDED.

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*Reprinted from Parliamentary Paper, No. 340, Session 1882.  
With an Introduction.*

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LONDON:  
FREDERICK C. BANKS,  
2, WESTMINSTER CHAMBERS, VICTORIA STREET, S.W.

1882.

PRICE SIXPENCE.



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## INTRODUCTION.

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THIS REPORT, which was proposed by Mr. Stansfeld in lieu of the Chairman's Report, was supported, on a division, by six against eight members of the Committee. The minority consisted of Mr. Stansfeld, Mr. Hopwood, Mr. William Fowler, Mr. Ernest Noel, Dr. Cameron, and Mr. Burt. The majority were Mr. Osborne Morgan (Judge Advocate-General), Mr. Cavendish Bentinck (late Judge Advocate-General), General Burnaby, Colonel Digby, Colonel Tottenham, Mr. Bulwer (Colonel R.V.), Dr. Farquharson (late Army Surgeon), and Viscount Crichton. In subsequent divisions on the Chairman's Report Sir Henry Wolff (Member for Portsmouth) also voted with the majority.

It will be seen, therefore, that the Chairman's Report which was consequently adopted, recommending the strict maintenance of the Acts, received the support of all those members of the Committee having official positions or connections, either past or present, with the State Military Establishment; and that, on the other hand, those who voted for the substitution of this proposed Report recommending the repeal of the Acts, consisted entirely of unofficial members of the Committee. Having regard to the fact that the adopted Report is an enthusiastic and eulogistic defence of an official system, the composition of the division list is both interesting and significant.

Both Reports—which in their conclusions are thus “wide as the poles asunder”—equally claim to state the results of the voluminous evidence taken by the Committee during their protracted enquiry, ‘which has extended over a period almost unprecedented in the history of Parliamentary Committees.’ The momentous question for the public, therefore, is, which of these documents fulfils the essential requirements of a true Report, in representing fairly and impartially the results of conflicting evidence upon subjects of vast practical importance, and ‘involving considerations of great delicacy and difficulty’? Obviously nothing less than a thorough and exhaustive examination and comparison of the two Reports with the evidence upon all points of conflict can answer, adequately and satisfactorily, this important question; but some preliminary idea of the diverse methods employed in arriving at the contrary ‘results’ of the two Reports may be gathered from the following remarks:—

The general conclusions from the evidence, which are stated in this Report of the Minority as affording ample reasons for the repeal of the Acts absolutely, are the following (paragraph 27):—

I. That even under the unequal conditions obtaining in favour of the Stations protected by the Acts, venereal disease in the Home Army has not substantially diminished in those Stations, to a



greater comparative extent than in the Stations not under the Acts, except in the one particular of 'non-syphilitic' sores.

II. That the percentage of cases of disease among the registered women has increased continuously during several years past, and is still increasing.

III. That the only real good effected by the police employed under the Acts, is entirely beyond the scope of their statutory duties, and could be better effected by other means.

IV. That the religious, moral, and constitutional objections presented against the Acts, and the system established under the Acts, are valid in principle, and are confirmed by the practical results of their operation.

As to (I.), the principal 'unequal conditions' disclosed by the evidence therein referred to (and which are particularly noticed in paragraphs 1 and 12 of this Report), are :—(a.) The essential difference between the characters of the protected Stations and the non-protected Stations; (b.) The examination of soldiers in the former class and not in the latter; (c.) The transmigration of prostitutes from protected Stations into unprotected Stations; (d.) The extensive Lock Hospital accommodation for women in the former class, compared with the scanty provision of that kind in the latter class of Stations.

All these important points are ignored in the Majority Report, with the exception of a paragraph on the subject of the examination of soldiers, which was introduced by vote as an amendment, after the draft Minority Report had been issued. Even that amendment, however, studiously ignores the evidence that the result of the present practice is to prevent propagation of disease by soldiers in the protected Stations, while allowing it without interference in the unprotected districts. Practically, therefore, the Majority Report in dealing with the two classes of Stations, adopts entirely the assumption of the official Witnesses in favour of the Acts, *i.e.*, that the only material difference between the two classes is the operation of the Acts in one group and not in the other; and that their respective conditions as to venereal disease are otherwise equal. A consideration of the evidence will prove the absolute unfairness of this assumption.

As to the accuracy of the deductions drawn in this Minority Report from the official statistics, with regard to the real effect of the Acts upon venereal disease in the military forces, a careful examination of the figures and evidence upon that subject is manifestly requisite to form an opinion. But it may be observed that such deductions are the product of an independent consideration of the official data; while the conclusions which are stated in the Majority Report as the results of the hygienic evidence, consist simply of an absolute and exclusive adoption of official interpretations of official statistics, without any regard whatever to the manifest discrepancies and acknowledged defects of the Departmental Returns, or to the evidence adduced to show the fallacies of those official versions of 'doubtful' and 'unreliable' official statistics.



With regard to (II.), the conclusion stated in the Minority Report as to the increase of disease among the registered women, the only reference in the Majority Report to that important subject consists of a paragraph which was also inserted as an amendment therein in the manner before mentioned. Yet that amendment studiously ignores the fact that such actual increase is officially proved by the Annual Police Returns ; and, by adopting the misleading preamble '*it is alleged* that disease has shown a *tendency to increase*,' induces an inference directly contrary to the truth. When, however, the effect of the evidence noted in paragraph 14 of this Minority Report is considered, it will be manifest that as an increase of disease among 'a given number of registered women in a given period' has actually occurred, contemporaneously with an apparent decrease of disease among the soldiers in the given districts, the fact denotes either (1) that more venereal disease exists among such soldiers than appears from the official Returns, or (2) that such disease is spreading among male civilians in those places. In either case the conclusion expressed in the Majority Report as to the decrease of such disease among both soldiers and civilians in the protected districts is disproved.

With regard to (III.), the improvements really effected by the administrators of the Acts, and (IV.), the objections raised to the Acts and their administration, there is a total variance between the two Reports. The Majority Report adopts absolutely, as indubitable evidence, the statements of 'trustworthy officials' and 'respectable officials connected with the administration of the Acts,' in favour not merely of the system administered by such officers, but even of the personal acts of the witnesses themselves ; notwithstanding the contradictory statements of independent persons, whose testimony has no suspicion of professional or personal interest. This preference obtains, indeed, in some instances, where only 'opinions' were offered by official witnesses, to controvert 'facts' vouched by unofficial testimony.

In this Minority Report the endeavour is made to present a fair representation of the conflicting evidence on the various important matters comprised in the extensive enquiry as to the constitutional, moral and social aspects of the Acts and their administration, by comparing and balancing the testimony on each point, which evidence is fully indicated by marginal references. The result of this exhaustive method yields conclusions remarkably different from those presented by the Majority Report. Thus, while that Report finds, as a fact according to the official evidence, that the numbers of prostitutes and brothels in subjected districts has largely decreased since the Acts, this Report shows from evidence of official as well as unofficial character, that the accepted statistics do not represent the real state of prostitution in those places ; and moreover, that a diminution of prostitution is possible without the aid of these Acts, and has, in fact, been effected in unsubjected districts without such means. Again, while that



Report adduces the acknowledged recent improvement in street order in subjected districts as attributable to the Acts, this Report proves from the evidence on the other hand, that it is principally creditable to other agencies; and that the public behaviour of registered women is often peculiarly disgusting and scandalous. Further, while that Report declares on official testimony that the moral and spiritual influences brought to bear in the certified hospitals under the Acts, are 'largely productive of reclamations'—completely ignoring the fact that such reclamations are mostly effected in Asylums which are not under the Acts—the present Report demonstrates from the complete evidence that such reclamations are proportionately less numerous, and comparatively more difficult, than the reformation of unregistered prostitutes. While, also, that Report strongly insists on the necessity for maintaining the existing system of periodical examination and compulsory detention in hospital, it carefully ignores the beneficial results effected by Voluntary Lock Hospitals as compared with the Government Hospitals. A summary of the evidence on this important subject will be found in paragraphs 16 and 17 of this Report, and will probably convince most minds of the deliberate injustice of the Majority Report in this respect. On other points the recommendations of the Majority Report are even of a more partizan character than the pro-Acts evidence on which they are professed to be based.

Of the manifold objections to the Acts and their administration the Majority Report makes 'light work.' 'Objections of principle' are treated as matters manifestly unworthy of serious consideration, so far as they are 'arguments' for repeal; although they are subsequently represented as furnishing sufficient 'grounds' for recommending the non-extension of the Acts at present! 'Objections of practice' are also easily disposed of, on the assumption that 'the Acts are necessary for the good of the community,' and that as a fact the system has been administered as well as it could be. Consequently that Report absolves the administrators of the Acts from all blame, even for so-called 'irregularities' which have actually been censured by the authorities. This Minority Report will, it is hoped, satisfy the discerning reader that the balance of evidence not only clearly proves the Acts to be unnecessary for any good purpose, but also that the system is practically capable of abuses beyond the extent of any allegations yet made against the officials administering it, who have certainly hitherto acted with the abundant caution continually prescribed by the authorities, and stimulated by the vigilant observation of those 'large numbers of persons' whose conscientious religious convictions have made them opponents of such system. It remains for that considerable 'part of the community' whose opinion (the Majority Report acknowledges) 'it would be unwise and unjust to neglect,' to demonstrate that the same 'convictions' are sufficiently powerful to compel that absolute repeal of the Acts, which is the sole recommendation of this Report.



# THE SELECT COMMITTEE ON THE CONTAGIOUS DISEASES ACTS, 1866-69.

## MINORITY REPORT.

THE evidence taken by your Committee has been limited to the operation of the Acts in the United Kingdom, the Committee having determined not to receive evidence as to British Colonies or other countries. Such evidence has been mainly directed, in the first place, to the consideration of venereal disease among the forces composing the Home Army, and of certain sections of such forces; and also among the women affected by this legislation. In the second place, the social and personal condition of the subjected women; and also the method and results of the administration of the Acts by the several classes of officials engaged therein, have been investigated.

1882. Min.  
April 4.

The voluminous evidence taken by the Committee may be conveniently considered, with reference to the principal subjects, as follows:—

- I.—*As to Venereal Disease in the Home Army.*
- II.—*As to Venereal Disease among Prostitutes in the places to which the Acts apply.*
- III.—*As to certain alleged social improvements claimed by advocates of the Acts as the beneficial effects of their administration.*
- IV.—*As to certain evil consequences alleged to have resulted from the operation of the Acts, and other objections to this legislation.*

### I.—AS TO VENEREAL DISEASE IN THE HOME ARMY.

1. The official Returns which furnish the statistical evidence on this subject comprise a total period of 19 years—*i.e.*, from 1860 to 1878 inclusive. Of this period the first seven years (1860—1866) may be considered as anterior to the existing legislation. The first Act prescribing the periodical medical examination, although passed in June, 1866, came into operation at a few stations only towards the end of that year. The remainder of the total period



—*i.e.*, 1867—1878—comprises two equal terms of six years each, viz.: 1867—1872, and 1873—1878. In the former of these periods the Acts were applied successively to the “protected” stations, in all of which they were in full operation early in the year 1870. During the latter period—*i.e.*, 1873—1878—the Regulation (generally known as Lord Cardwell’s Order) stopping the pay of soldiers in hospital for venereal disease (except secondary syphilis) was in force, with the result of induced concealment of disease—a fact which is acknowledged by both Sir William Muir and Ap 1879, No. 1, p. 156, and Mr. Lawson to vitiate the Returns for such period. Consequently the period of application and operation of the Acts—*i.e.*, 1867—1872—is the only one which can fairly be compared with the period preceding the Acts, 1860—1866, for the purpose of ascertaining what effect on venereal disease may have been produced by those means among the protected forces.

App 1879 The Returns originally adduced by Sir William Muir purported to show the results of the Acts, by “contrasting” the ratios of disease at the 14 Military Stations which were successively brought “under the Acts” with those at 14 selected stations “not under the Acts,” during the entire period 1860—1878. Mr. Lawson also adopted those Returns as the basis of his original calculations given in evidence in the Session of 1879. Strong objections to the method of those Returns were, however, made, principally by Dr. Nevins, who contended that they presented an “entirely fallacious comparison for statistical purposes,” for these reasons—first, that the respective characters of the two classes of stations were essentially different; and, second, that the given unsubjected stations were unfairly selected, many having exceptionally high ratios of disease, while the majority of the unsubjected Stations with little disease in the aggregate was left out of the comparison. In fact, the 14 Military Stations brought “under the Acts” are large Camps, Dockyards, and Arsenals, some of them having only a small “fringe” of civil population; on the other hand, the Stations “not under the Acts,” in number about 100, comprise the largest Cities (*i.e.*, London, Dublin, Manchester, &c.), in which comparatively small bodies of soldiers are placed amidst dense populations, and wherein the ratios of disease are exceptionally high, as well as small garrison places, in which there is often no such disease at all; *e.g.*, in 1878 the ratio of admissions for Primary Venereal Sores in London was 250 per 1000 of force, while “no admissions” for this (primary) disease were returned at 31 stations having an aggregate annual strength of 2141 men.

In deference to these objections Mr. Lawson furnished, in 1881, new Tables compiled from further Returns supplied by Sir William Muir in 1880, and showing the ratios of disease respectively at “stations which came under the Acts,” and at “all stations never under the Acts” during the entire period 1860—1878. Although these new Tables are in the same form as the



original Returns, "contrasting the results" at the given two sets of stations, Mr. Lawson explained that he did not intend thereby to "compare one [set] with the other for the purpose of the Acts," and added, "I never have done so." This witness acknowledged that the new Tables gave lower ratios of disease in the unsubjected stations than the original tables, and were therefore not so advantageous as evidence in favour of the Acts. Ev 1881. 2148 2156-7

An additional objection to the original Returns was also raised to the effect that they showed only the average annual strength of force at the several stations which were successively brought under the Acts, instead of the actual forces for the time being under the "protection" of the Acts. In consequence of this criticism a further Return was furnished by Sir William Muir, which forms Appendix No. 2 to the Minutes of Evidence, 1881. On comparing this Return, however, with the other official statistics, serious discrepancies between them became apparent, which were admitted by Mr. Lawson. It is important, therefore, to notice this circumstance as furnishing a preliminary caution in dealing with the statistical evidence. Ev 1879. 1042 Ev 1881. 1609 to 1611 Ev 1881. 1981 to 1985

2. The *classification* of venereal diseases adopted in the official statistics is the following:—

- (a) Primary Venereal Sores.
- (b) Secondary Syphilis.
- (c) Gonorrhœa.

The Returns also comprise an aggregate heading:—

- (d) All forms of Venereal Disease combined.

3. (a) *Primary Sores*.—The official evidence includes under the term "primary sores" all venereal cases which cannot be classed under either of the other distinctive heads. This class, therefore, comprises cases of true primary syphilis which subsequently develop "secondary" symptoms, as well as cases of a non-syphilitic character, which have no secondary or constitutional consequences. The former species form about one-third of the whole class. It is objected to this method of classification, by the medical witnesses on behalf of repeal, that it is both unscientific and misleading, inasmuch as it does not distinguish the cases of true syphilis (chancres) from those cases of local sores which are not syphilitic in character (chancroids). It is consequently impossible to ascertain from the official statistics with the requisite exactness, the history of the course of true syphilis, even in its primary stage, among the forces "protected" by the Acts. The authorities quoted by the objectors to the official classification, leave no doubt that the two different kinds of sore comprised in the one class are now generally regarded by the medical profession at large as the respective products of two distinct kinds of virus; and this theory or doctrine of the "duality" of this disease may therefore be assumed to have superseded the opinion formerly held as to the "unity" of the poison, which might produce either form of sore according to Ev 1879. 308-10, 3115 Ev 1881. 36-51, 339, 423, 370-71, 1000-1004, 1135-1136 Ev 1881. 354-385, 836-843, 987-92, 1002



- Ev 1879. 2611 determining circumstances. Two of the official witnesses, however,  
 Ev 1881. 2330 defended the "unity" theory, but Mr. Lawson thought that "the  
 " 1987 evidence is rather in favour of duality," and he was "inclined to  
 " 1802 admit" the doctrine. The result of the evidence on this point  
 may therefore be taken to be, that the two kinds of sore are  
 essentially different in their nature and consequences, and that only  
 those which are syphilitic, and capable of being followed by  
 secondary symptoms affecting the constitution, can properly be  
 termed "primary" sores. It is evident therefore that the term  
 "primary" should be applied only to the cases of true syphilis in  
 its first stage, and that some other and more appropriate term (such  
 as "local venereal sore," as used by Professor Lee) should be  
 adopted to describe the non-syphilitic species. It appears indeed  
 that it was at one time the practice in making out the Army  
 Hospital Returns to classify venereal sores under the two distinct  
 headings (1) "Primary Syphilis," and (2) "Local Venereal  
 Ulcer;" but that practice seems to have been superseded by  
 the form of return at present in use. The only reason for  
 this alteration by the Army Medical Department is an alleged  
 difficulty in accurately diagnosing some sores (such as those  
 of compound character termed by Professor Lee "mixed  
 chancres") upon the admission of the patients to hospital  
 —but it appears that a correct classification is undoubtedly prac-  
 ticable in every case within a short period after admission. If  
 therefore it were necessary, for the purpose of the regular weekly  
 returns, to group originally all venereal sores in the manner at  
 present adopted, it is manifest that more accurate classification  
 might have been made in subsequent returns which would have  
 enabled the Department to give a correctly classified summary in  
 each annual report.

4. The actual Returns, however, show the following annual ratios  
 of *admissions* to hospitals for "*Primary Venereal Sores*" per 1000  
 of average strength, in the two groups of stations, viz., "Protected,  
 and all the remaining 'Unprotected Stations,'" during the entire  
 period, 1860—1878 :—

Years.		Stations which came under Acts.	All Stations never under Acts.
		Ratios per 1000.	Ratios per 1000.
1860	Before existing Acts.	146	132
1861		142	122
1862		117	99
1863		107	108
1864		102	101
1865		95	99
1866		87	84



Years.		Stations which came under Acts.	All Stations never under Acts.
		Ratios per 1000.	Ratios per 1000.
1867	Gradual application of Acts.*	91	101
1868		83	95
1869		66	106
1870	Complete application of Acts.	55	93
1871		51	81
1872		54	90
1873		50	81
1874	Concealment of disease.	42	66
1875		35	59
1876		33	64
1877	Ld. Cardwell's Order.	35	68
1878	{ Reserves called out	40	88

\* The Acts were applied successively to the several Stations at different dates, between 8th Oct. 1866 and 21st Jan. 1870.

It appears from these figures that during the period preceding the existing legislation (1860—66), the amount of so-called "primary" disease declined regularly and continuously in the stations subsequently subjected to the Acts, while in the never subjected stations collectively, a final reduction was effected after considerable intermediate fluctuations. These figures are important as evidence that quite anterior to the operation of the Acts, some cause, or causes, produced a reduction in this combined class of venereal diseases, in both groups or sets of stations; but while the fall in the afterwards subjected stations was continuous and regular, that in the non-subjected stations was fluctuating and irregular, besides being less in degree. An essential difference in character between the two sets of stations is thus indicated at the outset, and prior to legislative interference. It should be observed that during this period, 1860—66, Windsor is not included in the "subjected" stations, for the reason that the Returns for that station during this period are not separable from London, and it is therefore included with London in the "unsubjected" group. In 1867 and subsequently, however, Windsor is properly comprised in the group of "subjected" stations—a fact which probably accounts for the sudden apparent increase of ratios in that group from 87 (in 1866) to 91 (in 1867). So far therefore as any proper comparison can be made between the two entire groups of stations in respect of venereal sores, it obviously commences with the year 1867, when the respective ratios of admissions were—in the "subjected"

Ev 1880. 93

Ev 1881. 1258  
1259, & Note  
App p. 447



group, 91; and in the "unsubjected" group, 101 per 1000 of force respectively.

Ev 1880. Dr. Nevins's Table & Diagram, App 1880, p. 54 (facing) Ev 1880. 97-107

In the succeeding period (*i.e.*, 1867—1872), which witnessed the gradual application of the Acts and their complete operation in the subjected stations, before Lord Cardwell's Order was made, there was a further reduction of disease, both regular and continuous (until the last year of the series), in the subjected stations, contemporaneously with an ultimate fall, after intermediate fluctuations, in the unsubjected districts. It is to be observed, however, that while the reduction during this period in the subjected districts is approximately a continuation of the average diminution throughout the previous period, the contemporaneous improvement ultimately effected in the non-subjected stations is less than in the former period before the Acts.

Ev 1879. 84-5, 1137-8

In the final period—(1873-78)—the same respective characteristics are observable, although, as before seen, the effect of Lord Cardwell's Order renders the figures unreliable. The general increase of disease in the last year (1878) was consequent on the calling out of the Reserve Forces—the rise being greater in the unsubjected stations.

App 1881, facing p. 446

App 1880. No. 1, p. 47, (Table) and Diagram p. 54

A diagram, furnished by Mr. Lawson, illustrates the figures given in the Returns, and shows that in the period before the Acts (*i.e.*, 1860—1866) the course of "primary sores" in the two groups of stations was practically parallel during the years 1860—62, and about identical in the following years, 1863—66. In the period of successive application of the Acts, 1867—1869 inclusive, marked divergencies occur, and the unsubjected stations, which originally held the lower place, are thereafter represented by the upper line. These divergencies therefore exactly synchronised with the successive steps of legislation, and they individually denote a sudden rise in disease in the free stations, contemporaneously with a fall in the subjected stations, which fall was, on the average, a continuation of the pre-existing reduction throughout the period before the Acts, as calculated by Dr. Nevins. But during the final period of complete operation of the Acts—(1870—1877, excluding 1878 as abnormal)—the respective courses of disease continued parallel in both groups. This yields a comparative advantage to the subjected stations represented by the lower line of ratios.

Ev 1881. Ap 2

5. The Return of the "Number of men in hospital daily" for "primary sores" (also presented by Mr. Lawson) affords generally the same conclusions—*viz.*, that although an ultimate reduction in the amount of such disease has been effected in both sets of stations upon the average, the fall in the subjected districts has been, on the whole, uniformly regular and continuous throughout the entire period 1860—1877 (excluding 1878), while the diminution in the unsubjected districts has been accomplished by reduc-



tions more irregular and intermittent in character as well as less in amount, particularly during the period of the gradual application of the Acts to the subjected stations. In that important epoch (1867—1869 inclusive), the figures of the “constantly sick” show, like the Return of “admissions,” a sudden increase of disease in the unsubjected districts, contemporaneously with a continuance in the subjected districts of the original fall, which up to 1866 was common to both sets of stations. Again, during the period of complete application, 1870—1877 (excluding 1878 as before), the figures show a reduction in both classes of stations, which is approximately parallel.

The two Returns, therefore, of the “admissions” and the “constantly sick” agree in demonstrating these results as to “primary sores,” viz., (1) that the reduction of this disease which has been effected in the subjected stations since the Acts were applied thereto has not exceeded the diminution in the same stations before the application of the Acts; and (2) that since the complete operation of the Acts (*i.e.*, 1870—1877), the reduction of disease in the group of stations *not* subjected thereto has been upon the whole practically parallel with the abatement in the stations *under the Acts*, resulting in a comparative advantage to the latter. Ev 1881. 2159

On further comparison, however, of these two Returns as to “primary sores,” it becomes apparent that the reduction in the ratios of “constantly sick” in the subjected districts during the period of complete operation of the Acts has not been equivalent to the diminution of the ratios of admissions. This fact denotes that the *average duration* of the cases under treatment in hospital in the “protected” districts has gradually increased. In this respect the Returns disclose a difference between the two groups of stations which is unfavourable to the districts under the Acts. Dr. Nevins put in a table compiled from the original Returns, showing the comparative duration of cases of “primary sores” in the 14 “protected” and 14 “unprotected” stations, and proving that the average duration of those cases in the stations under the Acts had increased from 26·85 days in 1874 to 28·58 days in 1878; while in the stations without the Acts it had decreased during the same years from 28·57 days to 24·80 days. This incident undoubtedly indicates that on the average the cases of “primary sores” are of greater and increasing severity in the “protected” stations compared with the “unprotected” stations; and that fact in turn affords ground for the presumption that, in the stations under the Acts, a larger proportion of “primary sores” is of syphilitic character than in the unsubjected stations. Ev 1880. Ap. 2 p. 53.

6. The Returns of “constantly sick” for “primary sores” form the basis of the evidence as to the *saving in efficiency*, which is claimed by the Army Medical Department to have resulted from the operation of the Acts in respect of that class of disease. Sir Ap 1879, No. 1



- Tab. II, p. 158 William Muir's original Table, produced in 1879, related only to the two groups of 28 selected stations, and showed the comparative ratios therein during the period 1870—1878. The inference drawn from those figures was, that the average rate of the subjected group is less than half that of the other. The Table shows, however, that the average difference throughout the period of complete subjection is in fact nearly the same as the original difference in the first year, 1870. The initial ratios then were 4·46 and 9·74 (or 1:2·18), the average ratios were 3·47 and 7·99 (or 1:2·30). The "protected" stations therefore started with the advantage of a ratio "less than half that" of the unprotected stations, and the extent to which the former class increased that original advantage—or in other words, the difference between the two sets of ratios—is the only result apparently attributable to the protected stations in respect of this comparative saving in efficiency. For it is clearly not the gross difference, but only the net difference, after taking into account the original or initial disparity, which can properly be claimed on behalf of the stations "protected" by the Acts. Another inference was drawn by Sir William Muir from a series of similar ratios for the five years 1868—1872, viz., that the actual saving effected in the "protected" stations on the average of those 5 years was 190 men, which was equal to a possible saving of 300 men, if calculated for the entire Army. As to this inference it was subsequently shown by Mr. Lawson that the basis of Sir William Muir's calculation was the absolute difference between the averages of the two sets of ratios, and not their comparative or net difference. Such calculation therefore appears to us to be unsound in two essential particulars: (1) It compares the ratios of actual inefficiency in the two groups of stations again without taking into account their initial difference, and estimates the saving accordingly at 190 men. (2) It assumes that an extension of the Acts to "unprotected" stations would reduce their inefficiency to the same ratio again without regard to the same initial difference, and thus adding an hypothetical saving of 110 men. It is quite clear to us that no saving can be shown approaching these figures, and that the alleged saving of efficiency affords no sufficient reason for the Acts.
- Ap 1879, p. 158  
Footnote to Table  
Ev 1881. 1845, 1846
- Ev 1879. 59. 63, and Note p. 15 of Minutes.
- Ev 1881. 1845, 1846.

- Among other various official calculations as to the daily saving in the efficient strength of the army attributed to the operation of the Acts, it is calculated by Mr. Lawson to amount to 5·17 men per 1000 of force, which, on the average strength of 50,000 in the protected districts would yield a total of 258 men. This saving, even assuming it to be effected by, and to be attributable to the Acts, is gained at the total expense of 30,000*l.* per annum, which is equal to 116*l.* a year for each man saved.
- Ev 1881. 1529
- Ev 1882. 4941

7. Regarding, however, as a simple fact, the greater reduction which has actually been effected in "primary venereal sores" since the introduction of the Acts in the subjected stations, the question remains whether such reduction has taken place alike in the



syphilitic and non-syphilitic sores, or, if unequally, in what relative proportion. From the form of the official Returns it is impossible to decide this question otherwise than by way of deduction from the statistical evidence as to secondary syphilis.

8. (b) *Secondary Syphilis*.—In considering the evidence as to the effect of the Acts upon this form of venereal disease—the most important part of the whole enquiry—considerable difficulty arises from the fact that while discrepancies exist between the official Returns in all respects, the most serious are involved in the statistics furnished to the Committee on this particular subject. This statistical evidence consists principally of the following Returns:—

- (1)—The ratios given in evidence in 1879 by Sir William Muir and Mr. Lawson (Ev. 219, 600—603).
- (2)—The Return of Sir William Muir, forming App. No. 3—1880.
- (3)—The further Return of Mr. Lawson, forming Appendix No. 2—1881.

Sir William Muir and Mr. Lawson gave in evidence in 1879 Ev 1879. 219, total ratios of this disease in the entire Home Army during the 600—603 whole period 1860—1878; and similar ratios are contained in Sir William Muir's and Mr. Lawson's new Tables, furnished in Ap 1880, No. 3, 1880 and 1881. But these latter Returns present wide differences Table A from the figures of 1879, which discrepancies have been tabulated Ap 1881, No. 2 by Dr. Nevins. It is apparent from his Table that the ratios " No. 8 originally given (1879) showed a great reduction of secondary disease in the period before the Acts 1860—1866, which reduction reached its lowest point in the last year; and that the ratio for that year was in fact lower than the average of the Ev 1879. 219- entire subsequent period of legislation, *i. e.*, from 1867 to 1878. 30 The ratios afterwards furnished (1880—81) all differ from the original figures down to the year 1872, and show a smaller reduction, but the most important alteration is in the year 1866, the ratio for which in the new Returns is higher than the average of the succeeding years, thus showing a fall in the average amount of this disease during the period covered by the Acts, instead of the increase indicated by the original ratios.

The explanation of these discrepancies is that the original Ev 1881. 1445, ratios were computed in accordance with the rule of the Army 1960, 2194 Medical Department, of excluding from returns of secondary syphilis all forces which had been in the United Kingdom less than one year—the excluded section being about one-tenth of the entire Home Army—while the new ratios comprise all men who may have been at Home Stations any time within the year. The original rule was adopted to prevent the inclusion of secondary disease which was due to primary infection at foreign stations, and Ev 1881. 2953- thus to restrict the Returns to disease contracted within the 54 Kingdom. That such rule was regarded by the authorities as a



good one is sufficiently testified by the fact that it was uniformly followed in all Departmental Returns from 1860 to 1880, in which latter year the new method was for the first time adopted in a Return furnished expressly for the purpose of this enquiry. The fact, however, would not have been material, if the additional forces thus included had been affected with only the average amount of syphilitic disease throughout the entire period; or if the exported disease balanced the imported, as Mr. Lawson assumed; but Dr. Nevins's Table demonstrates that the newly included forces must have had not only a total ratio of disease far exceeding the average,—since the practical effect of adding them has been to raise the average of the whole to a remarkable extent—but also that the “imported” disease was greatest in the years before the Acts, particularly 1866, in which the new ratio is more than 11 per cent. higher than the original figure. To have produced this effect, the added section (say one-tenth) must have had more than twice as much syphilis per 1000 men as the residue of the whole Home Army. After the year 1866 these differences gradually disappear, with the result already indicated. In the face of these remarkable and inconsistent features, it is obviously impossible to regard the new method of these Returns as satisfactory themselves, or the Returns as reliable. It was admitted indeed by Mr. Lawson that the statistics originally furnished were not only “more trustworthy,” but also that they afforded greater facilities for verification.

But a further difference, of even greater practical importance in this enquiry, exists between the original and later Returns in the fact that the original ratios were furnished only for the entire Home Army, without apportionment between the two groups of stations, while the new figures are apportioned to show the incidence of secondary disease in the two classes of stations respectively, and thus are designed to represent the comparative effect of the Acts. The reason assigned for the original mode of Return was that any such apportionment as that now made would be fallacious, on account of the transfer of troops in the course of the development of syphilis between one station and another. Nevertheless, although such reason remained untouched, the apportioned Returns (which include the “imported” cases as already observed) were subsequently furnished, on the theory that the transfers of men between the two sets of stations may be taken to balance; yet Mr. Lawson, who furnished the Returns, admitted that the statistics cannot be accepted as being an exact representation of the case, and warned the Committee that the figures must be received “with caution.” No Return showing the apportionment of “secondary” disease without including the “imported” cases has been produced.

On proceeding to consider the two Returns which show the apportioned amount of secondary syphilis, even further discrepancies became apparent. The only particulars in which the



two Returns are comparable are the yearly average ratios of men "constantly in hospital" in the two classes of stations; but although the apportioned forces after 1870 are the same in each Return, the respective ratios differ more or less in nearly every year. It is therefore impossible to regard these statistics as absolutely and reliably accurate, but taking them for what they may be worth, Mr. Lawson's table furnishes the data for the following calculation:—

Ap. 1, No. 2.  
Ev 1881. 1967  
" 1970-74

CONSTANTLY SICK FROM SECONDARY SYPHILIS.	Subjected Stations.	Unsubjected Stations.
	Ratios per 1000 of force.	
Ratios in year 1869 .....	2·02	2·39
Average ratios during years 1870-78 .....	1·72	2·15

These ratios for 1869 conclusively disprove the exaggerated ideas as to the amount of syphilis in the Home Army which were prevalent before the passing of the Acts, and which have furnished reasons for their enactment and continuance. On comparing the average ratios during the subsequent period of complete operation of the Acts (1870—1878) with the initial ratios for 1869, it appears that in the "protected" stations the average rate of reduction in secondary syphilis has exceeded, to a slight extent, the contemporaneous diminution in the unprotected stations. If the reduction in the ratios of constantly sick had been equal in both groups, the average rate in the unsubjected stations would have been 2·00 instead of 2·15. In other words, the difference in favour of the protected stations is equal to 0·15 of a man per 1000 of force. But the advantage thus apparently attributable to the protected stations is subject to an important qualification, which is disclosed by Mr. Lawson's Table showing the proportion between cases of "secondary syphilis" and "primary venereal sores" in the two groups of stations respectively, viz.: that such proportion is gradually increasing in the subjected districts, as compared with the unsubjected stations. The average ratios furnished by Mr. Lawson are as follows:—

Table 6 B  
Ap1881,p.451

Periods.	Percentage of 'Secondary Syphilis' on 'Primary Sores.'	
	Protected Stations.	Unprotected Stations.
1861—66	34·1	29·8
1867—72	37·6	31·2
1873—78	56·0	42·4

These figures show that the proportion of the cases of syphilis to the general class termed "primary sores" is increasing to a greater extent in the stations under the Acts, than in the free



Ev. 1881—  
1796  
1800  
1797  
1803-6

stations; and, moreover, that this comparative increase distinctly attaches to the period of the complete operation of the Acts. In short, the figures represent the fact admitted by Mr. Lawson, that a soldier has comparatively more chance of contracting syphilis in the "protected" stations than in the "unprotected" stations,—i.e., to the extent of 36 against 33 out of 100 cases of "primary sores" in each case. This fact denotes, as Mr. Lawson also admits, that there is "a little more syphilis" among prostitutes in the "protected" districts than in the "unprotected" districts.

It follows as a consequence from these deductions that the reduction which, as before shown, has been effected in the subjected districts since 1870 in the general class of disease termed "primary sores," must have been mainly in the non-syphilitic sores, and not in cases of real primary syphilis.

The statistics on this subject, moreover, show that the cases of secondary syphilis in the subjected districts are also more severe in character than similar cases in the "free" stations, as proved by the comparative times occupied in effecting their cure respectively. Ap 1881, No. 7 Dr. Nevins's Table, compiled from Mr. Lawson's data, shows that since 1870 the average duration of cases of secondary syphilis in the subjected districts has exceeded that of similar cases in the unsubjected districts, in every year, by periods of time extending from less than one day (in 1872) to more than six days (in 1877), the maximum period in either case not exceeding one calendar month.

Upon the whole, therefore, the evidence adduced by the official witnesses upon this subject may be fairly stated not to have succeeded in establishing the conclusion that the Acts have had any beneficial effect on true syphilis, either "primary" or "secondary;" Ev 1879. 142, although (as Sir William Muir admitted) the suppression, or at least the reduction, of such disease was distinctly the main, or real, object of the legislation. 171

1881. Ap No. 1, Tab. 1 9. (c) *Gonorrhœa*.—The Return showing the numbers of cases of this kind of disease admitted to hospital, in the two entire groups of stations, during the entire period 1860 to 1878, proves that an ultimate general reduction has been effected, after considerable fluctuations common to all stations, both "subjected" and "unsubjected." The annual ratios give the following average results:—

	Subjected Stations.	Unsubjected Stations.
Average ratios per 1000 for years 1860-69 ...	126	112
do. do. for year 1869 ...	106	108
do. do. for years 1870-78 ...	82	81

If, therefore, the ratios for 1869 be adopted as fixed points of comparison between the average amounts of this disease in the respective groups of stations, before and after the complete opera-



tion of the Acts, it appears that in the earlier period, the rate of reduction was greater in the afterwards subjected stations, but that in the latter period the average rate of diminution in the stations without the Acts has exceeded the average fall in the stations having the benefit of "protection."

Mr. Lawson's further Table showing the numbers "Constantly in hospital" for gonorrhœa and *sequelæ*, gives the following ratios for three equal periods for comparison:—

App No. 1,  
Tab. 3

Periods.	Average ratios per 1000.			
	Subjected Stations.		All Unsubjected Stations.	
	Ratios.	Percentage of Diminution.	Ratios.	Percentage of Diminution.
1861—66	10.44		8.35	
1867—72	6.83	34.6	5.78	30.8
1873—78	3.83	43.9	3.34	42.2

These figures also show that the relative rate of improvement effected since the complete operation of the Acts has been somewhat greater in the unsubjected districts than in the subjected stations.

The period of complete operation of the Acts thus manifests—in respect of gonorrhœa—a comparative disadvantage to the "protected" stations.

Moreover, in respect of the *duration of cases* of gonorrhœa, the "subjected" stations compare unfavourably with the unsubjected class. The figures given in Mr. Lawson's Tables yield the following results on calculation:—

App 1, No. 1  
and 3

Periods.	Average duration of cases in Hospital.	
	Subjected Stations.	Unsubjected Stations.
1861—66	30.4 days.	28.1 days.
1867—72	21.7 "	20.0 "
1873—78	20.0 "	16.6 "

Here, therefore, the rate of improvement in respect of duration of cases in the stations under the Acts is manifestly less in the period of complete operation than before, as well as absolutely less than in the free stations during the same period. The fact thus



denoted must undoubtedly be the greater severity of this form of disease in the "protected" stations.

It is of course assumed, as Mr. Lawson does with regard to the figures for the period 1873—1878, that whatever effect Lord Cardwell's Order may have had in inducing concealment of this disease, the result affects alike (or proportionately) both classes of stations.

Upon the whole, therefore, it is proved that the stations having the benefit of the Acts have not only a larger amount of this kind of venereal disease, as well as greater virulence thereof, than the free stations, but also that the rate of reduction effected therein, under the operation of the Acts, is not comparatively equal, either to the previous reduction in the same stations without the Acts, or to the contemporaneous decrease in the non-protected class of stations.

Consequently, the opinion expressed by the Army Medical Department in their Report for the year 1872, with respect to the inefficiency of the Acts in reducing this form of disease up to that time, may be considered as equally applicable to subsequent experience.

10. So far, therefore, the general results of the evidence as to the several kinds of venereal disease in the two entire groups of subjected and unsubjected stations, during the period of complete operation of the Acts, may be shortly stated thus:—

- (1)—*Venereal sores not syphilitic* have been reduced in the "protected" stations at a greater rate than the contemporaneous reduction in the "unprotected" districts collectively, although not exceeding the average rate of decrease effected in the same stations before the application of the Acts thereto.
- (2)—*Syphilis*, in its two (primary and secondary) forms, has (so far as the Returns can be accepted as reliable) decreased in the "protected" stations to a slightly greater extent than in the unprotected stations (*i.e.*, equal to 0.15 of a man constantly in hospital per 1000 of force), but with a comparative increase in the proportion of syphilitic to non-syphilitic sores in the "protected" stations; and moreover with greater (and increasing) severity of disease in those stations.
- (3)—*Gonorrhœa* has been reduced at both sets of stations, but with a larger amount and greater virulence of disease, and with a lower relative rate of improvement, in the "protected" group, compared with that effected in the "unprotected" stations.

11. The fact of the actual reduction of venereal disease in general, and of "primary venereal sores" in particular, in the "protected" stations, during the period of complete administration of the Acts, raises the principal question on which the supporters and opponents of the Acts are at issue, *viz.*, to what cause is such reduction attributable? The official witnesses assert that the result is entirely, or



mainly, the effect of the Acts, and rely on the fact of such reduction as a sufficient proof, *per se*, of their allegation. They moreover adduce such alleged result of the hygienic benefits effected by the Acts as sufficient reason, not merely for the maintenance of the system as at present established under the Acts, but for the extension thereof throughout the kingdom, or at least to all places wherein any of the national forces may be located, including London. The witnesses on the other hand who are in favour of repeal, deny the alleged efficiency of the Acts, and base such denial on the twofold fact, that the causes which effected a general reduction of venereal disease before the legislation have continued in operation during the subsequent period of administration of the Acts; and that the rate of improvement in the subjected stations during that period has not exceeded the previous average rate of reduction, even in the case of primary sores, while in the other classes of disease, viz., syphilis and gonorrhœa, it has been less.

Ev 1879—  
1397-8  
1465-6  
1798-1803  
1666-85  
2111-13  
2123-4  
2240-51  
2566  
3124-31  
Ev 1881. 4706  
„ 1143-5

Dr. Nevins's calculations indeed show a close average approximation between the actual annual ratios of "primary sores," in the stations under the Acts, during the period of "protection," and the computed ratios representing the theoretical course of that disease, on the assumption that the average rate of diminution in the preceding period would have continued subsequently independently of the Acts. Mr. Lawson, on the contrary, contends that, but for the interposition of the Acts, the course of disease in the subjected stations would have retrograded, probably until the average of the second period equalled that of the first; but this is inconsistent with the history of the disease in those stations during the previous period, as well as with the fact that in all the "unsubjected" stations a reduction of disease was contemporaneously effected without the aid of the Acts. The "incidence of disease" independently of the Acts evidently, on the whole, denoted a general decrease throughout the Army. The official Returns, as already observed, show a characteristic difference between the two classes of stations in the aggregate, in respect of the regular and continuous decrease of "primary sores" in the subjected districts, contemporaneously with the intermittent and lesser reduction in the unsubjected group. But on comparing together the ratios of the unsubjected stations individually, it is apparent that the reduction was very unequal in the several districts; and, moreover, that several of the subjected stations had ratios continually higher than any of the unsubjected stations, except the largest cities and chief towns; while as many as 31 "free" stations with 2141 men had no such disease at all returned in the given year 1878.

1880. ApNo.1,  
p. 47, and  
Diagram p.54

Ev 1881. 1691

1879. App. 1,  
p. 156

Also App. 1,  
1880, Tab. 6  
and 7

1881. No. 3  
1879. App. 1,  
Tab. 2

1880. App. 1,  
Table No.6,  
p. 49

The official Returns show, as demonstrated by Dr. Nevins, that from 1867 to 1877 (inclusive), the average ratios of "primary sores" were lower in two of the fourteen selected unsubjected stations than in any of the "protected stations," and that two of the subjected stations (viz.: Windsor and Maidstone) had higher



average ratios of such disease than any of the unsubjected stations, except the large towns and cities—viz.: Preston, Sheffield, Manchester, Dublin, and London. One unsubjected city (Edinburgh) had, moreover, an average ratio less than Aldershot and Colchester, and far below that of Windsor and Maidstone, all “protected” stations. The case of Windsor is the more remarkable, because according to the Police Returns, that station has fewer prostitutes than any subjected station, except Winchester and Deal, the average number since 1876 being only 14, and that during the same period there have been *no* brothels of any kind in that district. Nevertheless, in 1877 and 1878 (the last years comprised in the Army Returns) the total ratios of venereal disease of all kinds at Windsor considerably exceeded those of any other subjected station. It is stated, indeed, by the Regimental Surgeons of the Infantry (the Guards), periodically stationed at Windsor, that the majority of the admissions to hospital there for “primary sores” and gonorrhœa are cases contracted out of the district (principally in London). But as these troops are regularly examined—wherever they are located—once a fortnight (and sometimes every week), the amount of disease possibly thus “imported” would form only a small part of the total amount debited to Windsor during the entire stay of each battalion there—*i.e.*, nearly six months. Moreover, the hearsay evidence on which the statement is founded is obviously uncertain and unreliable.

It is evident that the mere fact of the presence or absence of the Acts in any station, or set of stations, will not, *per se*, account for high or low ratios of disease; and this inference is remarkably illustrated and confirmed by a fact proved by Mr. Lawson, viz.: that in Aldershot Camp in 1868—9, while the Acts were in full operation there, the ratios of “primary sores” in different regiments varied from 142 to 23 per 1000 of force—the higher ratio being more than six times that of the lower—a difference considerably greater than that which in the same years existed between the highest unsubjected station and the lowest subjected station. This fact, indeed, indicates that the amount of disease in different army stations is dependent, to a great extent, upon the character and habits of the men composing the forces at such places respectively. Mr. Lawson said, “It depends vastly upon the customs which exist among the men in the regiment.” The disparity shown by the Army Medical Reports between the annual ratios of disease in the Household Cavalry and Foot Guards, both stationed in London, is a further illustration of the same axiom.

12. The allegation of the official witnesses who support the Acts, as to the beneficial effects of the statutory operations on the health of the forces in the “protected” districts, rests upon the assumption that the only material difference between the two groups of stations consists of the operation of the Acts in the one set and not in the other; and that in all other particulars



the respective conditions as to venereal disease are equal. It appears, however, from the evidence adduced, that in addition to the essentially different character of the two sets of stations in the aggregate, and of the various kinds of stations grouped together in the "unsubjected" class, as already observed, there are certain other important circumstances which must fairly be taken into consideration in forming a sound judgment upon the subject. The first is, the fact that all soldiers entering a "subjected" district—even after a short absence—are individually examined with the special object of detecting and preventing venereal disease being "imported" by them into the district; while in the unsubjected districts no such examination is made. The declared intention of this practice (which is a Departmental and not a statutory regulation) is to secure a fair trial of the "great experiment" in legislation, by preventing the importation of disease into the "protected" stations only. The immediate effect of the examination is to debit each of the subjected stations with the cases of disease detected thereat, although such disease may possibly have been contracted in "unsubjected" stations. But the ultimate effect is undoubtedly to diminish the total amount of disease which would otherwise have been returned at such station. The result of the experiment is therefore to prevent propagation of disease in the subjected stations, but to allow it without interference in the unsubjected stations, with a proportionate effect on the respective Returns. Thus, if a badly diseased regiment (such as that instanced by Mr. Lawson, in which one half of the men had venereal sores on the average within twelve months) were sent to a subjected station, their disease would be arrested on the threshold, and propagation prevented; the result in such case being the increase of disease returned at that station, to the extent only of the number of men at once sent to hospital, and no more. But, if the same regiment were sent to an unprotected station, the same amount of disease would be multiplied enormously by the spread of the disease through the women of the district, and the returns would be increased accordingly. The fact that this method of examination has been adopted in the protected districts, as auxiliary to the system of the Acts, is a sufficient proof not only of its practicability, but also of its value. Moreover it supports the recommendations to that effect of the Army authorities generally, as well as the Medical Committee, on whose Report the present legislation was based, and who in recommending the periodical examination of public prostitutes, added, "However efficiently the regulations as regards women may be carried out, their success in arresting the spread of disease must be very imperfect unless similar precautions be adopted for preventing the men from carrying infection to the women. These health inspections should be universal throughout the Army. Without such a regulation the proposed periodical examination of women must lose half its value." The Select Committee of the House of Commons, in 1869, also recom-

Ev 1879. 284-295

Do. 611

Ev 1881. 6865

Ev 1879. 614

Ev 1881. 1275

Venl. Com.  
Report 1868,  
p. xxxi.  
Ev 1881. 6866-72Rep. 1869,  
par. 6



mended the periodical examination of soldiers, with the exception of non-commissioned officers and married men of good character. It is clear to us that the limitation of such a successful and valuable method of preventing disease to the stations in which the Acts are applied is utterly inconsistent, not only with that essential condition of equality between the two groups, which is necessary for purposes of fair experiment, but also with those principles of humanity and economy, on which the whole legislation was ostensibly founded.

Ev 1881.  
899-900,  
2116-22

Another fact which materially affects the comparison between the two sets of stations, as furnishing reason for the greater fluctuations and slower reduction of disease in the unsubjected districts is the transmigration of prostitutes from the subjected stations. That this legislation had a very disturbing effect upon prostitutes who successively became subject thereto, is conclusively proved by the Annual Reports of the Assistant Commissioner of the Metropolitan Police relative to the Acts, which show that, since the operation of the Acts, and more especially since the complete enforcement of the periodical examinations, a large proportion of the registered prostitutes in each district "left the district," independently of others who "married," "entered homes," "returned

Capt. Harris's  
Report 1880,  
Return No. 1

to friends," or "died." During the years 1865—1870 inclusive, the number of women who "left the districts" gradually and steadily rose from about 8 per cent. to 28 per cent. of the total number on the register. Since that year that proportion has

Ev 1881. 900

remained about the same. There is no positive evidence of the reason for this fact, but there is little room for doubt that they went away to avoid the Acts; and those most likely to depart would be diseased women, who became thus liable to be at once committed to hospital. Being soldiers' prostitutes, they would naturally resort to other military stations not under the Acts; and the result of their ingress would be a proportionate increase and multiplication of disease therein. Some evidence was adduced

Ev 1880. 111-  
124, 443

Ev 1881. 902

that diseased women from Portsmouth went to the Isle of Wight and Winchester, and others from Plymouth went to Exeter, with injurious consequences in each case. Besides the registered women, the same reasons would influence the movement of prostitutes who desired to avoid registration; but of such there is no record, nor

Ev 1879. 904-5

indeed any accurate information. It appears indeed, on the other hand, that considerable numbers of diseased women annually come into the subjected districts for the purpose of getting medical treatment in the Government hospitals, which they cannot obtain elsewhere, in which case they are at once brought under the Acts and sent to the certified hospitals. The propagation of disease by such women is thus prevented, or at least speedily arrested. On considering, however, the figures in the Police Reports above referred to as to the departure of registered prostitutes from the subjected districts, with the Returns showing the fluctuations and



less reduction compared with the protected stations of "primary sores" in the unsubjected districts, during the entire period covering the application of the Acts, it appears evident that the relation between the facts denoted by these statistics may reasonably be regarded as that of cause and effect.

A third circumstance which undoubtedly affects the comparative amount of disease in the two classes of stations is, that in the subjected stations there is ample hospital accommodation for women with venereal disease, while in the unsubjected districts in the aggregate there is scarcely any; London, Dublin, Glasgow, and Liverpool being the only unsubjected stations where Lock hospitals are established, and in the two first-mentioned places only to an insufficient extent. At a few other places a small number of such patients are admitted to ordinary hospitals. The total number of beds appropriated to the registered women under the Acts in England alone is 645, which, on the 31st December, 1880, were available for the total number of women then on the register, *i.e.*, 1879, being equal (nearly) to one bed for every three women, although they were then occupied by only 242 patients, *viz.*, nearly three beds to each woman for the time being actually diseased. Those proportions of accommodation and use had existed for several years previously, as shown by the figures for preceding periods in the Police Reports. The number of beds available for female venereal patients in places not subjected to the Acts is not exactly ascertained according to the evidence, but it is certain that the total hospital accommodation for unregistered women venereally diseased is not only far less than that afforded to registered women under the Acts, but also is quite inadequate to the demand. The inequality of conditions denoted by these facts is very striking. In the subjected districts every diseased prostitute can ensure medical treatment and be prevented from communicating disease by placing herself under the Acts (if she be not already registered), while in all other places (except a few) a diseased woman in poor circumstances has no means whatever, except entry to the workhouse, of obtaining cure, and therefore continues to ply her avocation, and to spread disease so long as physically able. Even in the few places having Lock hospitals, except Glasgow, such woman has no chance of admission until her case becomes severe. That a considerable portion of the disease in unsubjected districts is attributable to these facts is unquestionable; indeed, so great is the advantage of the subjected districts in this respect, that according to Mr. Lawson "many women from stations not under the Acts come into the stations where the Acts are in force to be cured, they being unable to get medical treatment outside." This statement is supported by Capt. Harris' Reports, *e.g.*, in 1880 as many as 612 prostitutes "are known to have come into the several (protected) districts from unprotected places; 404 (or 66·01 per cent.) of these were found to be diseased on their first examination."

Ev 1881. 2152,  
2153

Capt. Harris's  
Rep. 1880,  
p. 4, n. 1

Id. Ret. 1, col.  
26

Ev 1882.  
5485-6  
1882. App 29,  
p. 7

Ev 1881. 893

Ev 1879. 904-5

Report 1880  
par. 6  
App 1881,  
p. 461



1881.

2855-65

A further advantage has been afforded to the subjected stations in the preference which, according to the Army Medical Reports, has been practically shown to them, as being "Barracks of magnitude and importance," in the gradual application since 1859 to Army Stations in general of various physical, social and educational improvements having a beneficial sanitary effect on soldiers generally; such improvements having been introduced in the subjected stations earlier in time, and on a larger scale, than in the unsubjected stations. The great practical benefit of these various salutary innovations and regulations on the physical, moral and intellectual habits and condition of the soldiers is abundantly testified by all persons of experience.

It is of course impossible to decide to what extent the several circumstances above mentioned may have affected the comparative ratios of disease in the two groups of stations, but that they have had considerable effect apparently favourable to the subjected stations, not even the most ardent advocate of the Acts can deny.

1881.2137,  
2138, 2158,  
2151

13. (d) *Loss of Efficiency in the entire Home Army from all forms of Venereal Disease combined.*—On comparing the two official Returns which afford information on this head, during the entire period 1860—1878, it appears that although the "Strength" for each year in the first table agrees exactly with the "Force" stated in the second, yet the number of cases, and consequently the ratios of disease, differ considerably. The following average ratios of "Daily loss of service per 1000 of strength" from all venereal diseases combined are shown by the two tables:—

App 1880.  
No. 3 A, p. 55,  
and 1881, No.  
2, p. 448

Years.

Average daily loss per 1000.

Table No. 1.

Table No. 2.

1860	Before existing Acts in operation.	23.35	Lord Cardwell's Order—concealment of disease.	23.42
1861		23.13		23.38
1862		21.98		22.24
1863		19.94		20.25
1864		19.82		18.72
1865		17.81		18.05
1866	Gradual and Complete operation	16.16	Reserves called out.	16.13
1867		17.42		17.87
1868		17.53		17.37
1869		14.86		14.49
1870		12.64		12.64
1871		12.40		12.40
1872	of the Acts.	13.22		12.98
1873		11.28		11.32
1874		8.90		8.90
1875		8.54		8.69
1876		8.78		8.78
1877		9.08		9.07
1878		10.53		10.32



These figures prove that there was a regular and continuous decrease of the loss of efficiency from all forms of venereal disease throughout the entire period before the Acts from 1860 to 1866, at the end of which year the first existing Act came partly into operation. The ratios for the following years 1867 and 1868 show a rise, but thenceforth until 1873 a further reduction ensued, with a slight intermediate fluctuation. After 1873 the "concealment of disease," presumably induced by Lord Cardwell's Order, is apparent in suddenly lower ratios, with a further rise in the final years 1877 and 1878, the great increase in the latter being probably due to the inclusion of the Reserve Forces. It is evident, therefore, from these figures, that the improvement in efficiency in the entire Home Army, which was effected throughout the years 1860—66, before the operation of the Acts, was continuous and without fluctuation, and has never been exceeded in any like period during their administration; while the improvement effected subsequently to 1866 has been intermittent and fluctuating.

None of the Returns furnished to the Committee show the ratios of the annual loss of efficiency from all forms of venereal disease combined, in the two complete groups of stations respectively, during the entire period, 1860—1878, comprised in the general Returns.

Upon a general review of the statistical evidence of venereal disease in the entire Home Army during the entire period from 1860 to 1878, it is apparent, therefore, that whatever the real effect of the Acts may have been, the rate of improvement in the health of the entire body has not increased since their administration. Nor does the sanitary condition of the portion put under the "protection" afforded by the Acts, as proved by the official Returns, show any substantial advantage over the "unprotected" forces,—except in the one particular of non-syphilitic sores,—even under the several unequal conditions already remarked, which afford comparatively, and practically, considerable advantages to the stations under the Acts.

## II.—AS TO VENEREAL DISEASE AMONG PROSTITUTES.

14. The evidence as to such disease among the registered women under the Acts is comprised in the Annual Reports of the Assistant Commissioner of Metropolitan Police, supplemented by the testimony of Dr. Barr, the medical officer at Aldershot. Captain Harris' last Report (1880), Return No. 1, shows that although the number of registered women has decreased almost regularly in the period of complete administration, 1870—1880, yet the annual percentage ratios of disease have inversely increased; and that since 1875 such increase has been regular and continuous, from 148 per cent. in the former to 176 per cent. in the latter year. The significant fact denoted by these latter figures is, that on the

Report, p. 5,  
col. 31



Report p. 2, par. 7 average every woman was sent to hospital nearly twice in each year. More accurately, the total number of cases of disease was 3316, representing 1849 individual women out of the total number of 3268 on the register. The several kinds of disease are not distinguished in the Reports. It is certainly remarkable that notwithstanding the vigilance of the police and the examining surgeons, aided by the liberal, and even lavish, hospital accommodation, as shown by the excessive number of beds provided for these women, as already observed, the percentage of disease among them has for several years past steadily increased, and, according to the latest Reports, is still increasing. If the average duration of the cases admitted to hospital be calculated from Capt. Harris' Returns, it appears to have been in 1880 nearly 30 days per case, so that on the average each individual woman spent about 52 days (or about one-seventh) of that year in hospital at the expense of the public.

Report p. 6-13 On examining the records of the several stations comprised in Return No. 1 as to venereal disease among registered women, it appears that in 11 of the largest stations the percentage of such disease was higher in 1880 than in 1870, after 11 years' working of the Acts, contemporaneously with a reduction in the number of women, viz., in Portsmouth, Devonport, Chatham, Woolwich, Aldershot, Windsor, Shorncliffe, Colchester, Greenwich, Canterbury, and Maidstone. In some of these stations disease has been progressively rising for several years past. The other six stations (there being 17 in the police statistics which are grouped as 14 in the Army Returns) show an actual decrease in disease, although in only one case (Sheerness) is the fall considerable. At Devonport the disease among the registered women has risen continuously from 102 per cent. in 1875 to 171 per cent. in 1880, notwithstanding that the police there employ special means to detect disease, auxiliary to the periodical examinations by the medical officers, by obtaining information from men in hospital, upon which the particular women indicated are dealt with. This practice may possibly be followed in other districts. The case of Aldershot is very remarkable. The average number of women on the register increased from 135 in 1867 to 326 in 1870, while the ratio of disease decreased from 325 per cent. in the former year to 206 per cent. in the latter. Between 1870 and 1880 the average number of women declined almost regularly from 326 to 150, while the ratio per cent. of disease inversely rose from 206 per cent. in the former year to 356 per cent. in 1880. During the whole of this latter period a large number of women annually "left the district," amounting on the average to nearly one-third of the total number on the register. The percentage of cases of disease to the actual number on the register in 1880 was higher than it had ever been before, *i.e.*, 194.55 per cent.

These figures, therefore, show comparatively a higher average rate of disease at Aldershot than at any other station, and Dr. Barr



admits that such is the inevitable consequence of the reduction in the number of prostitutes,—or, as he expresses it, “one reason for the want of greater success of the Act has been the small number of women, comparatively, to the large number of troops.” This increase of disease has also been effected in spite not only of the most careful administration of the Acts in the examination of all registered women, but also of certain precautionary measures against contagion, in the use of which Dr. Barr has gratuitously instructed the women; and, moreover, with the valuable aid of the examination of all troops entering the district, to prevent importation of disease by them.

Dr. Barr’s testimony supplements the police Returns in one important particular, *i.e.*, the classification of disease among the prostitutes. He stated that during the 13 years in which the Acts have been administered at Aldershot he had conducted 54,848 individual examinations, which resulted in the detection of 7,981 cases of disease, about 15 per cent. of the number of examinations. Of these, 314 cases were sent to London unclassified, leaving 7,667, which were respectively as follows:—

Gonorrhœa.....4,941 cases = about 65 per cent. of the cases of disease.

“Primary” sores ...2,085	„	„	27	„
Secondary Syphilis . 641	„	„	8	„

It is evident, therefore, that it is only in a small proportion of the entire number of cases that the disease is of a constitutional character, and that the operation of the Acts is mainly upon non-syphilitic cases.

15. Considerable further light was thrown upon the subject by the evidence of Professor Lee and other medical witnesses in favour of repeal, who argued the necessary failure of the system, on the following grounds, *viz.*:—

(1.)—That a woman once infected with syphilis remains protected against reinfection for a considerable period, and that prostitutes are generally so infected early in their career. That the *secretions* of a syphilitic woman may be contagious and communicate constitutional disease, although the woman present no objective symptoms of such disease. (This has been demonstrated by inoculation.) That such a woman may remain for a long time in an infectious condition through her secretions, even if she be regularly examined and passed as “free from disease.” (Dr. Lee ascribed “more than half” the cases of syphilis in men to contagion from women in such condition.)

(2.)—That even the infecting chancre—the characteristic symptom of syphilis in its “primary” stage—is often difficult, and sometimes impossible, to discover in women, and in practice frequently escapes detection.

(3.)—That the relative success of any system of periodical exa-

Ev 1879. 1369  
Ev 1879. 1597,  
1703, 1728  
Ev 1879. 1419,  
1575

Ev 1881. 4635,  
4665, 4666,  
4677

Ev 1881. 483,  
506-508,  
2498-2524,  
4714-6  
Ev 1881. 776-  
82, 663-4  
904  
828-9  
903-922  
1030-52  
920

Ev 1881  
91-101  
475-8  
549-62  
951-53



Ev 1881. 485 mination of women being proportionate to the frequency of inspection, the intervals of individual examination under the Acts (*i.e.*, 14—21 days) preclude the possibility of detecting much disease in its inception, and before propagation thereof.

(4.)—That the disease of one man may, by “mediate contagion,” be communicated to other men having connection successively with the same woman without even infecting herself. This particularly applies to the old and hardened camp prostitute.

Ev 1881. 68-70 (5.)—That no system of registration can prevent clandestine prostitution, which is a distinct source of disease.

Venereal Com. (6.)—That no system of examination designed to prevent the propagation of disease common to both sexes can be successful when applied to members of one sex only.

Ev 1879. 1716 As to these propositions, (1) and (2), Dr. Barr denied the probability (and indeed almost the possibility) of the existence of disease in the women who have been passed by him as “free from disease,” notwithstanding the testimony given by other witnesses of the difficulty, and sometimes impossibility, experienced in practice, in discovering the evidence of existing disease in women; and this after examinations of greater length than Dr. Barr’s, which averaged 30 women in three hours. He acknowledged, however, that a woman “syphilised” is protected against contagion, while she remains herself infectious to any man consorting with her. “She may appear to be free from syphilis, and still this sore (in her) may produce syphilis.” The small proportion of syphilitic cases discovered on examination at Aldershot is thus accounted for.

As to (3) the possibility of contagion and propagation of disease between successive examinations of individual women, it is obvious; especially as, according to Dr. Barr, “a large number of these women afford intercourse to an almost incredible number of men.” Mr. Lane admitted that disease might be so propagated “to a certain extent” as a matter “of course,” but that practically the examinations could hardly be made “more frequent than fortnightly.”

(4) The danger of “mediate contagion” is fully admitted by Dr. Barr, not merely as a theory, but as a fact:—“I believe in it from actual proof,”—and he mentions a case of “a woman having had intercourse with 20 different men” in the course of “the afternoon and evening,” the woman remaining unaffected while disease is communicated between the men. He admits also the increased danger of this kind arising from the excessive use of the women individually in consequence of their reduced number and assuming the same amount only of indulgence on the part of the men. If, as alleged on the other hand, male indulgence is stimulated by the Acts, this danger is still further increased.

Dr. Barr also admits (5) the existence of clandestine prostitution even at Aldershot, in which district the practice must be comparatively far more difficult than in garrison towns and seaports.



As to (6) the co-ordinate examinations of male profligates, Dr. Barr admits the advisability thereof, although he thinks there would be practical difficulty in effecting it. The Regimental Surgeons also support the view of necessity, but they disprove the idea of impracticability, so far as soldiers are concerned. Other Army authorities also agree, as before observed.

Ev 1879. 1686  
1688  
2105-10,  
2605  
Report Ven.  
Com., 1866,  
p. xxxi.

Upon the whole, therefore, the grounds upon which the medical witnesses in favour of repeal base their opinion of the necessary failure of the Acts as hygienic measures, designed principally for the suppression of syphilis, may be regarded as established, and as being confirmed by Dr. Barr's evidence as to disease of that kind among the Aldershot women. The fact of such failure was also practically admitted by Mr. Lowndes—a strong advocate for extension of the system—who said, "The present partial application of the compulsory system, while it may cure a very few, does, in fact, nothing more than scratch the surface of a great evil."

Ev 1881. 6866

Ev 1882.  
12512  
12265

16. Dr. Barr, however, claimed one distinct advantage in favour of the Acts, in dealing with venereal disease among the women at Aldershot, in that the severity of such disease has been mitigated by means of the system of treatment; in proof whereof he contrasted certain severe cases, which he asserted were ordinary in 1867—8, with the present prevalent milder type. It appears however that the severity of the earlier cases was certainly aggravated, if not caused, by the miserable circumstances of the women at that time—many of whom were homeless vagrants. The provision of hospital accommodation and treatment for such wretched outcasts would, under any circumstances, have been attended with beneficial results, both immediate and permanent. The mitigation of disease, therefore, so far as it has been the result of medical skill and care, could have been effected in a voluntary hospital as well as in a compulsory one; provided, of course, that the requisite co-operation on the part of the patients was secured. On this point hinges the important question, whether the machinery of the Acts affords any real advantage over an adequate system of voluntary hospitals.

Ev 1879. 1365-  
1368

1322-5

1563

The principal hygienic benefit alleged by the official witnesses to have resulted from the operation of the Acts, and which, as before observed, induces them to advocate, not merely the continuance, but, moreover, the extension of the Acts, is thus expressed by Dr. Barr: "The good that we do is positively this, that we restrict them (the women) from acting as prostitutes when they are diseased, by keeping them in hospital." The practical question therefore in this respect, is, whether results equally beneficial as regards the prevention and cure of disease can be attained without the compulsory periodical examinations and the restrictive hospital system imposed by the Acts. The evidence furnished on this subject relates to the four principal voluntary Lock hospitals in the United Kingdom, viz., at London, Dublin,

Ev 1879. 1563



Glasgow, and Liverpool, and also two smaller hospitals of that kind, one instituted in 1876 in London, by the Society for the Rescue of Women and Children in connection with their Homes, and the other in Bristol.

- Ev 1881. 2319 &c. The information as to the London hospital was furnished by Mr. Lane. Part of that institution is appropriated to Government patients (under the Acts), who are sent from subjected districts (especially Aldershot), and paid for out of Government funds. The other part is allotted to voluntary patients, the expenses being defrayed by public subscribers, which are only sufficient to maintain about 40 or 50 beds out of about 180 which might be available in better circumstances for such cases. The Government patients are always admitted compulsorily; the voluntary patients only when there is room; but as the beds allotted to the latter are "generally full," the worst cases only are selected, and the others refused. Upon these facts Mr. Lane instituted three comparisons—1st. That the cases of disease on the voluntary side were more severe than on the Government side; 2nd. That the voluntary patients took longer to cure than the Government ones; 3rd. That the Government patients were received in the early stage of disease, and remained until completely cured, while the voluntary patients did not come in until badly advanced, and could not be detained sufficiently long to complete their cure. It is manifest, however, that the essential difference in the conditions of admissions of the two classes—the Government cases, however slight, being always admitted, while the voluntary cases are not generally admitted unless and until severe—precludes any fair comparison between them in any respect, except the length of stay. As to this, the figures furnished by Mr. Lane show that without any coercive measures the unsubjected women voluntarily remained in hospital for various long average periods, gradually diminishing from 86 days in 1873 to 37 days in 1880. That remarkable diminution in duration denotes a corresponding mitigation in severity. It is true that this is qualified by the fact that, on the average, 20 per cent. of such patients left hospital before being completely cured; but there is no proof that these prematurely discharged women were prostitutes, and if they were not, they would naturally be anxious to return home as early as possible, especially if they were married. In confirmation of this inference, it appears from the Return that the number discharged for misconduct was less than 2 per cent. in 1878, under 4 per cent. in 1879, and only 5 per cent. in 1880. The residue, therefore, of the 20 per cent. prematurely discharged were orderly, and perhaps respectable, persons—such as married women diseased by dissolute husbands, &c.—whose departure did not necessarily imply prostitution. A Return subsequently put in by the Chaplain of the hospital showed that in 1881 the total number of voluntary patients was 502, of whom 270 were avowed prostitutes, 120 domestic servants, and 24 married women living with husbands. It was afterwards stated in evidence by the Deputy Chair-
- 2664
- 2560-4
1881. Ap.No.6 p. 456
- Id. p. 457
- Ap.1881,p.457
- Ev 1882. Ap. 8



man of this hospital (Mr. Seton-Karr) that "the Government patients are more difficult to manage than the others, *because we cannot control or dismiss them*; on the other (the voluntary) side, we can control and dismiss them, and that makes a great difference." This implies that premature dismissal is, in fact, regarded by the voluntary patients generally as a punishment, and not a boon.

The evidence as to the Dublin Lock Hospital was furnished by Mr. Macnamara, surgeon of that institution. The hospital is supported by a grant from Government of (at present) £2600 per annum, and is worked on the voluntary system. In 1879 there were 874 patients, of whom 60 per cent. were professional prostitutes, and about 13 per cent. were married women diseased by husbands. Disease was severe in character; the voluntary system had failed to secure the mild cases. The majority also left the hospital before completely cured, in the absence of powers to restrain them; but no detailed or statistical information on this point was furnished. Of those, however, all who were not prostitutes—*i.e.*, 40 per cent. of the whole,—especially the married women having homes to attend to,—would naturally be anxious to depart. This witness considered that Dublin was at a disadvantage, compared even with London, with regard to facilities for admitting women patients into hospitals for venereal diseases. "In Dublin the law of almost all the hospitals is not to admit venereal cases, but occasionally females slip in under some other name of a disease," who would not be admitted if the governors knew "the real disease." This witness supported the Acts on humanitarian principles, "for the sake of the women alone," and "not with the view of protecting men." He, moreover, expressed his personal preference for a complete system of free Lock hospitals, in substitution for the system under the Acts, with every possible inducement to women affected with venereal disease to remain voluntarily, but with the super-added power of detention when necessary.

The evidence furnished by the Reports of the Glasgow Lock Hospital (produced by Mr. McCall, Chief Constable of that city, and subsequently supported by the personal testimony of Dr. Patterson, surgeon to that institution), is, on the contrary, entirely in favour of the voluntary system. In their Report for 1880 the managers testify to the reduction of venereal disease, and the mitigation of its severity, and add:—"Various causes are in operation which help to bring about these results. One of the more prominent causes is that there is no restriction placed upon the admission of patients, and no case suitable for treatment is now ever refused on the ground of want of accommodation. Every encouragement is afforded; and as the patients are seen early in the disease they are more readily cured, and their period of residence in hospital shortened." Other Reports show that no difficulty is experienced in inducing patients to remain till cured.

This documentary information was verified and illustrated by

Ev 1882.  
12615

Ev 1881. 6434-  
6439

6482

6463

6512

6508-9

6522-3  
6591

6583-4

Ev 1881. 7478

7489-90  
678, 737



- Ev 1882. Dr. Patterson's evidence. The accommodation prior to 1870 having been found insufficient for the demand, was in that year increased from 35 beds to 60 beds; but all of them had never since been occupied at one time. The number of admissions had greatly decreased, while the population had largely increased; and the severity, as well as the amount, of venereal disease in both sexes in Glasgow had diminished in recent years. The admission of patients was entirely free, and since 1870 no case had been refused. The local cases came in the early stages of disease, and earlier now than formerly; but occasionally aggravated cases, due to delay in treatment, came from rural districts. No power of detention existed, nor was any needed. Very few cases were now discharged irregularly before being cured. There is no trouble in inducing prostitutes to remain, "some of the older ones would stay all their days." In 1871 the directors prescribed that an undertaking to remain should be signed by incoming patients, but the regulation was found to deter them from entering, and was soon abandoned. Students are not admitted to the wards.
- 2895-90  
2903-4  
App 9. 2879  
2943-4  
2905-6  
2964-5  
3132  
2907-12  
App 9. 2914-22  
2934
- Ev 1882. The evidence of Mr. Cooper, the Secretary of the Rescue Society, showed that out of the total number of patients in that Society's Lock Hospital about 13 per cent left uncured. Of these, however, a large proportion did not return to an evil course of life, but were reformed. The percentage of the inmates of the small Lock Hospital at Bristol who left prematurely was about 12 per cent.
- 3833-41  
3842-3
- In both these latter cases the proportion of irregular discharges was less than in the London Lock Hospital. In the Rescue Society's Hospital the average sojourn of all the patients amounted to 74 days, which is even a longer period than the average length of stay of the voluntary patients in the London Lock Hospital.
- As to the Liverpool Lock Hospital, it appears from the evidence of Mr. Lowndes—surgeon to that institution—that it provides 25 beds for female patients, and the same number for male sufferers. It is supported by subscriptions to the Royal Infirmary, of which it is a branch. The female wards have not always been well filled; but now are so. Since 1877 there has been a "remarkable increase," in consequence of new rules forbidding students attending the female wards, and abolishing the performance of menial work by the patients. The place has also been made more attractive in other respects. In 1880 there were 291 women patients, and 280 in 1881. Nearly all were prostitutes; but 10 or 12 were married women. The number discharged uncured was in 1880 about 12 per cent. of the total; but this probably included the married women who desired to return home. The difficulty of detaining uncured patients, especially at holiday times, in Liverpool, appears to resemble the like circumstances at Glasgow; but Mr. Lowndes adduced the facts as a sufficient reason for having the compulsory powers of the Acts extended to the former seaport, in opposition to Dr. Patterson's opinion, founded on his experience in the latter
- Ev 1882. 12123  
12119  
12139  
12142  
App 29, p. 8. 12154  
App 29, p. 8. 12252  
Ev 12271. 12268  
12251



maritime city, with about an equal population. It does not appear why persuasive methods, which have proved so effectual at Glasgow, should not succeed at Liverpool if seriously tried.

12358

However, upon the whole, the interesting evidence afforded on the subject of voluntary hospitals for female Lock patients furnished sufficient proof that the system of free hospitals, when attractively equipped and well officered, as advocated by Mr. Macnamara, is quite practicable, and completely successful; even without the compulsory power of detention, which he deemed expedient, at least in Dublin. It is remarkable, also, in contrasting the evidence as to the Glasgow Hospital with that of London, that the rule of "no case being refused for want of accommodation," is evidently the secret of that complete success in the former, which is wanting in the latter institution.

Ev 1881  
6593671 83  
733-7  
1126-9

In all other parts of the Kingdom the scanty provision which exists for venereal patients is principally furnished by workhouse hospitals and infirmaries. In some few of the general hospitals such patients are received, but in small proportions only to the general body, varying according to the prejudices of the managers or of the charitable subscribers to the respective institutions. It is therefore to the workhouse that the majority of such patients, who are unable to pay for medical treatment at home, ultimately go. Workhouse authorities are empowered by the 30 and 31 Vict. c. 106, s. 22, to detain, when necessary, paupers suffering from contagious disease, if not in a fit state to leave without danger to themselves or others. It would therefore be important to know the general experience of workhouse medical officers as to the necessity of exercising such power. With the view of ascertaining this, Dr. Nevins obtained as many as 80 Returns out of 160 applications to such officials; and "with scarcely an exception," they all say that the patients can easily be induced to remain in the hospital as long as they think necessary without the employment of compulsory detention." The witness was not allowed, however, to give further information on the subject, nor to put in a summary of the returns which he had compiled, in consequence of a decision by a majority of the Committee, that a witness who had collected evidence should not be permitted to state the general result of the information so received.

1882. App 29

Ev 1881. 2967-  
2969Min. 16th May  
1881  
Rep. p. vii.

Taking the evidence as it stands, it appears certain that the number of actual prostitutes who would in any circumstances under the voluntary system discharge themselves prematurely from hospital for the purpose of resuming prostitution is proportionately small, and probably does not exceed (even if it equal) the number of those who, in places subjected to the Acts, now actually evade registration. These "clandestine" prostitutes are consequently precluded from local hospital treatment altogether, for workhouse authorities in subjected districts, where hospitals certified under the Acts are established, no longer receive female venereal cases except occasionally from such hospitals.

App 1881,  
No. 9  
" No. 11  
" No. 12, M  
7184-6  
7344-7  
1882. App 29,  
p. 7, and  
Ev 12243Ev 1881.  
5551  
5724



17. It was strongly objected to several witnesses in favour of repeal, who advocated the substitution of voluntary hospitals (either as distinct institutions or as part of general hospitals) in lieu of the system of State hospitals established or subsidised under the Acts, that funds adequate for their provision and maintenance would not be obtained from the public, whose total subscriptions at the present time to the few existing Lock hospitals do not suffice to support them in full efficiency. It is certain, however, that the apathy of the benevolent public in the present circumstance is no criterion of their probable action in the event of a necessity arising for supplying, by voluntary effort, curative means equal in extent and efficiency to those now provided by the State under the Acts. Indeed, it seems clear that some at least of the present indifference on the part of the public is due to the intervention of the State, which discourages and deters individual effort, and tends to reduce, and in some cases destroy, private enterprise. A Return put in by Mr. Lowndes shows that in London alone only 57 beds in all London hospitals (except the Lock Hospital) are now available for females with venereal disease, in lieu of 211 beds, which were formerly provided. Moreover, subscriptions are refused to the London Lock Hospital on account of their connection with the administration of the Contagious Diseases Acts. As a practical matter, the witnesses to whom the objection was addressed considered that no insuperable difficulty would be experienced in obtaining the necessary funds, especially if the plan of seeking to reclaim and reform the unfortunate women were combined with the benevolent work of healing them, according to some such system as that adopted in the hospital founded by the Rescue Society (of London), which forms part of their general establishment of Reformatory Homes.
1882. App 29, P. 7
- Ev 1882. 3988
- Ev 1882. 3988-93  
4939-42  
5484-6
- 4941
- Capt. Harris' Report, Return No. 1
- 12173
- 12190
- 12188
- 12267
- Ev 1879. 3124-7
- In that event it is evident that the same amount now spent—equal to £30,000 per annum—might be more economically and usefully applied so as to deal efficiently with a much greater number of cases than those now treated in the districts subjected to the Acts, where, on the average, only one out of every three beds provided is, for the time being, occupied. That the present system as administered is excessive and extravagant is further made evident by Mr. Lowndes' calculations respecting Liverpool, *i.e.*, that, taking the number of prostitutes there at 2,500 to 3,000, from 400 to 500 beds would be required for the women diseased at one time—that is, one bed to every *six* women, instead of one to every three, as provided under the Acts. Moreover, he assumed the diseased women there to amount to 25 per cent. of the whole—a proportion nearly double that existing in the subjected districts. On the present scale of provision the cost of extension of the Acts to Liverpool, advocated by Mr. Lowndes, would exceed the total current expenditure in all the now subjected districts; while the application of the system to London, as recommended by Mr. Bond, would entail an enormously greater expense.



We do not, however, understand the opponents of the Acts to object in principle to public provision for the treatment of venereal in common with other diseases out of public funds, as, in fact, at present happens in the case of workhouse infirmary provision for such cases.

18. The entire evidence on the hygienic branch of the enquiry as to both the men of the Army and the women affected by the Acts appears, therefore, to establish the following conclusions:—

(1.)—That a reduction of *non-syphilitic sores* has been effected in the stations under the Acts, but such reduction, although greater than the contemporaneous decrease in the unprotected stations collectively, has not exceeded the average rate of decrease effected in the same (now subjected) stations before the application of the Acts thereto.

(2.)—That so far as the Returns can be accepted as reliable, *syphilis* has decreased in the “protected” stations to a slightly greater extent than in the unprotected stations, but with a comparative increase in the protected stations of the proportion of syphilitic to non-syphilitic sores.

(3.)—That no improvement in respect of *gonorrhœa* has resulted from the operation of the Acts.

(4.)—That any comparison of the “protected” stations with the unprotected stations in the aggregate is unreliable, on account of the essential difference in the character of each group of stations, and that, in fact, greater differences in the amount of disease may and do exist between different regiments in the same “protected” station than between the least diseased protected station and the most diseased unprotected station. Moreover, that such comparison is absolutely vitiated by the vital difference that the protected stations have the twofold advantage of ample hospital accommodation for the women, and a system of examination of troops entering the district, while in the unprotected stations there is little (and in some places no) hospital accommodation for women, and no similar examination of soldiers.

(5.)—That, after eleven years complete operation of the Acts (*i.e.*, 1870—1880), the annual ratio per cent. of cases of disease among the registered women was higher in 1880 than in any previous year of such period, and had been steadily increasing since the year 1875.

### III.—AS TO CERTAIN ALLEGED SOCIAL IMPROVEMENTS CLAIMED AS THE BENEFICIAL RESULTS OF THE ADMINISTRATION OF THE ACTS.

19. These alleged results are comprised under the following heads:—



- (1)—Reduction in the number of brothels, and other houses used for sexual immorality.
- (2)—Reduction in the number of prostitutes generally, and particularly young girls.
- (3)—Improvement in character and conduct of prostitutes.
- (4)—Reclamation of prostitutes generally, and particularly juveniles.

Evidence on these several subjects has been given by several witnesses on behalf of the Acts, supported by the statistics of the annual Police Reports "on the operation of the C. D. Acts," as proving the advantages resulting directly and indirectly from the system. In this respect the whole of such evidence, both statistical and oral, is absolutely delusive, and calculated to mislead public opinion upon the subject. It is obvious at once, that even if, and to whatever extent, such results as alleged have really been effected, there is no section of the Acts directed to their accomplishment, and therefore the evidence thereon can properly enter the present enquiry only so far as may concern or relate to the system of administration of the Acts. In addition to the statistical evidence as to all the stations, collectively and individually, contained in the Police Reports, personal testimony, both in favour of and in opposition to the Acts, has been given respecting a few of the subjected districts, viz.:—Plymouth, Portsmouth, Chatham, Woolwich, Deal, Maidstone, and Cork. Evidence has also been furnished as to the state of prostitution in two unsubjected cities, viz., Glasgow and Liverpool.

Pars. 1 and 6  
p. 19  
Ev 1881. 6736

20. (1)—*As to the reduction of Brothels, &c.*, Captain Harris's Report for 1880 states that the total diminution effected under "the operation of the Acts" in the number of brothels (including public-houses and beer-houses used as brothels) within the protected districts, since the Acts were put in operation, amounts to 781. (The process of computation is explained in the footnote to Return No. 3.) This statement is, however, open to the immediate objection that the duty of repressing brothels does not form any part of the operation of the Contagious Diseases Acts, nor of the appointed work of the officials employed under those Acts. These Acts in fact do not in any way interfere with or amend the pre-existing legislation on the subject, which practically leaves the matter entirely to the discretion of local authorities. The only enactment in the present Acts touching brothel-keepers is sec. 36 of the Act of 1866, which imposes a penalty for harbouring a diseased prostitute. The special police under the Contagious Diseases Acts have, therefore, no legal power to "reduce" brothels; and the only practical aid they can give is by furnishing evidence to the local authorities, for the purpose of prosecution. Such evidence could, however, always be obtained before the Acts, and no sufficient reason is suggested why it could not still be furnished



independently of the police engaged in their administration. Mr. Shaen stated that he had prosecuted dozens of cases in London with the aid of the ordinary police, and never experienced any difficulty in obtaining sufficient and conclusive evidence.

As to dealing more especially with public-houses and beer-houses used as brothels, the same remark applies. Such cases are in fact prosecuted under the Licensing Acts, and the Contagious Diseases Acts police have no part in such proceedings, except as witnesses, and their assumed place in that respect could still be supplied, as it formerly was, by the local police officers, or by other persons.

Passing, however, from this preliminary objection to the actual facts, the subjected stations in respect of which evidence on this point has been furnished which is comparable with the official Returns are Devonport, Portsmouth, Woolwich, Chatham and Maidstone. As to the *Devonport* district, the three superintendents of local police in the three towns, Plymouth, Devonport and Stonehouse, comprised in that district, unanimously denied that the C. D. Acts police had any part whatever in the closing of public-houses and beerhouses used as brothels, which had been effected entirely by the local police by proceedings under the Licensing Acts, and that the C. D. Acts officers had only occasionally given assistance as witnesses in prosecutions of private brothels by the local authorities under the ordinary law. Inspector Anniss was subsequently recalled to controvert some of these statements, but it is clear that whatever he may have done in such matters was beyond the scope of his duties under the Acts. He admitted that he never interfered with a brothel, however disorderly it might be, so long as the keeper thereof did not harbour diseased prostitutes, or children, or obstruct the C. D. Acts police. The Chief Constable of *Portsmouth* proved that the reduction of brothels in that town was entirely the result of local street improvements, coupled with measures taken by the local police with respect to the renewal of public and beerhouse licences, and the prosecution of bawdy-house keepers, which had been conducted by the local police without any assistance from the C. D. Acts officers, except in one case. As to *Woolwich*, an experienced witness, whose avocation as a town missionary afforded special opportunities for observation, stated that the number of brothels had not much decreased within the last five years, which is confirmed by the official Returns, showing that in 1876 the total was 48, and 44 in 1880. But the witness proved that this fact did not imply any real reduction in the amount of prostitution—which after all is the essential matter—for that existing brothels are not only much more frequented now than formerly, particularly by young men, but also that much illicit intercourse is practised in other houses, and in fine weather in open places about the district, by prostitutes both registered and clandestine.

Ev. 1882.  
11922-44

Report 1880,  
p. 21

Ev 1881.  
8749  
8642  
8196  
7697-8



Ev 1882. 1206 In *Chatham* the number of brothels according to Capt. Harris' Returns has continuously increased from 64 in 1876 to 84 in 1880, although the number of soldiers there has been contemporaneously reduced. The number of brothels of all kinds in *Maidstone* is "returned" as only 8; but a witness residing in that town declared from his own observation that there were considerably more. In *Cork* (which is not included in Capt. Harris' Report) all the brothels are said to have been suppressed, but that was effected by the personal action of the Roman Catholic clergy in 1876 after the C. D. Acts had been for several years in operation there.

Do.  
3255-79

Id. 10999-  
11000

That the ordinary law under the administration of the local police is able to effect reductions both of brothels and also of prostitutes in an "unprotected" place, even greater in number than the decreases respectively claimed in the subjected districts, is conclusively shown by the evidence of the Chief Constable of Glasgow. This witness proved that between 1870 and 1879 the number of brothels in that city known to the police had been reduced from 204 to 22, and the number of known prostitutes living in brothels from 559 to 37. The number of persons prosecuted during the same period "for harbouring prostitutes for purposes of prostitution" was 990. The beneficial results of these proceedings was shown by the fact that the number of informations for thefts in brothels during the same period was 808, while the comparative number during the previous decade (1860—69) was 3804. Moreover, the number of informations of theft by prostitutes in the streets during the same period (notwithstanding the current repressive action against brothels) was 2887, as compared with 5067 in the previous period 1860—69. These proceedings, moreover, had resulted in many advantages to the community, both social and moral; and had not produced any mischievous results: "While the reduction in the number of brothels has been so considerable, and the streets have been to a great extent cleared of the loose and abandoned women who used to frequent them, I am at the present time without one single complaint from any respectable citizen, that prostitution has gone into more secret or private channels," &c. Such was the report of this witness made in 1872 to the authorities, and confirmed by his testimony given in 1881. He was satisfied that prostitution by prostitutes not living in brothels had not increased in Glasgow; and that solicitation there was less than in any other large city. He had also deduced from the Returns of the Registrar-General evidence that the percentage of illegitimate to legitimate births had not increased, but had in fact materially decreased, during the period (1870—1879) in question. There had not, moreover, been any "complaints against the police for the way in which they had exercised their powers." Upon the whole, therefore, Glasgow furnishes in respect of prostitution as remarkable an example of police administration as it does of hospital opera-

Ap. 1881. No.  
21, Tab. 1

Do. Tab. 2

Do. Tab. 4

Do. Tab. 3

Ev 1881. 7433,  
p. 375

(Report 1872)

7647

7611

App. 21, Tab. 5

7620

7640-1



tion, without any of the auxiliary powers of the Contagious Diseases Acts, and with results more beneficial in all respects.

21. As to (2) the *reduction of prostitutes*, it appears from Capt. Harris' Report, 1880, that the average number of registered women in the several districts under the Acts has been largely reduced during the period of operation, particularly among the younger prostitutes. The total decrease is 2973. In 1880, however, there was an actual increase of 84. This return is supported, so far as the Devonport (Plymouth) district is concerned, by the testimony of Inspector Annis, which station may be regarded, in respect of police administration, as the "model" station under the Acts. The accuracy of this witness' figures (from which the Return for Plymouth was compiled) has, however, been challenged, and it is evident that serious discrepancies exist between them and the Judicial Statistics published by the Home Office from Returns made by the local police. These latter Returns ceased after 1865, in consequence of the subsequent publication of the Reports of the C. D. Acts police, but evidence as to the approximate number of women and girls actually practising prostitution at the present time in many of the subjected districts has been furnished to the Committee by the local police and other witnesses. The result of their testimony presents an important objection to Capt. Harris' Returns, viz., that the register is not conclusive proof of the fact of diminution in the number of prostitutes, because (as is alleged) there is a large and increasing class of "clandestine" prostitutes, particularly young girls, who evade registration. It should be observed that only persons actually on the register on the 31st December in each year are returned, although others may have been entered and removed therefrom during the year. This particularly affects the registration of young girls. The subject of "clandestine" prostitution is obviously one of which accurate knowledge is difficult to obtain, especially for the police, who are bound to register every known prostitute—i.e., known to them. In the case of Devonport, the inspector stated that there were not more than 40 clandestine prostitutes in that district, and his Returns show not one girl under 17 years of age on the register. The evidence of the three superintendents of local police leaves no doubt, however, that such figure is far below the real number of unregistered prostitutes; that such number is, perhaps, even equal to that of the registered women, and that the official estimate is "quite absurd." They comprise, also, many very young girls. It appears indeed, from the evidence, that the attention of the C. D. Acts police there is confined to women and girls who resort to brothels, or solicit men publicly, methods of prostitution which the real "clandestines" would carefully avoid. Mr. Shaen put in a tabulated statement proving that since 1870 a total number of 173 unregistered prostitutes—i.e., women who confessed themselves to be prostitutes—were rescued and reclaimed by a charitable

Return 1  
Report p. 2,  
par. 3

Ev 1881.  
3848-54

Ev 1881. 7268  
7273

Ev 1882.

147  
282  
443  
668  
786  
130  
142  
423  
711

Ev 1882.  
3389-99

1881. App. p.  
484



App 1882. No. 11 Ret. 5 society in that town, of which number 39 girls were under 17 years of age. A Return subsequently made by the Secretary of the Rescue Society of London, showed that during the 12 years, 1870—1881, that society had received from all the subjected districts a total number of 358 fallen women and girls who were not registered, and of whom 123 were under 17 years of age, and many of these were venereally diseased. The experience of this society is that more than half the number of fallen females go astray under the age of 18 years. The majority of fallen women who are not registered or “avowed” prostitutes, but who practise prostitution clandestinely to a greater or less extent, are domestic servants and girls in factories and workshops.

Ev 1882. 3660 Further evidence was given by other witnesses from their own observation as to the prevalence of clandestine prostitution by both adults and juveniles, at specific subjected stations, viz. :—

1126-39	Chatham.
3195-3254	Maidstone.
5562-69	Southampton.
2544-60	Cork.

Ev 1881.	}	. . . . . Woolwich.
7712-28		
7776-85		

Ev 1882.	}	All this evidence explicitly controverted the official statistics as to the numbers of common known women in these several places.
2052-78		

It is true that some of this evidence was subsequently contradicted by the C. D. Acts police and other witnesses, who had not observed the facts alleged, and therefore did not believe them to exist. But the positive testimony to the contrary has the comparative advantage that it is the result of actual observation of acts and persons when not under the eye of the police. It must of course be assumed that the register itself represents the total number of prostitutes “known” to the police, and therefore their additional testimony that they do not believe that any prostitution, or “not much,” beyond that so represented and “returned” by them really exists, leaves positive evidence to the contrary quite untouched. In short, therefore, while the fact of clandestine prostitution is admitted by the police, the extent of it will evidently be better discovered by unofficial observers. The comparative inefficacy of police observation is remarkably illustrated by the astonishing evidence given by Mr. Krause, as to the proceedings in the examination-room at Woolwich being observable from the public footpath—a fact never discovered by the official eye.

Ev 1881. 8245-76 8794-8822 The actual reduction of registered women shown by the official Returns is adduced as proof that the effect of the operation or the system of administration of the Acts is to deter women and girls from a career of prostitution on which otherwise they might and probably would embark. But the right conclusion from the evidence appears to be that the Acts have a “deterrent effect” to this



extent only, that such persons avoid open and avowed prostitution, which would cause them to be "registered." They are, in fact, only deterred from "registration," and not from prostitution. This conclusion appears indeed to be confirmed by Capt. Harris' Report for 1880, wherein he says that the strict observation of the police upon the brothels has no doubt "deterred many women of doubtful character from resorting thereto for fear of being brought under the operation of the Acts."

Par. 6

The actual reduction of registered women has also been quoted as proving that the amount of sexual indulgence of men—more particularly soldiers and sailors in "protected" districts—has diminished. If this, however, be the fact, the credit for such diminution must be undoubtedly given to the many improvements in the barrack life of soldiers, and to the institution of Homes for sailors, and other means and regulations devised for their protection from "crimps" and "harpies," as well as to the numerous benevolent agencies now happily in increasing operation for promoting intellectual and moral improvements in the national forces.

Ev 1882.  
180-6  
481-8  
963-1005

On the other hand, it is conclusively proved by the evidence as to Glasgow, already noticed, that a substantial reduction in the number of "known" or avowed prostitutes may be effected by ordinary police action, and without the means of the periodical examination under the Acts.

22. As to (3) the *alleged improvement in character of the registered prostitutes*, it is advanced as a proof of the beneficial administration of the Acts that the women who are now registered under the Acts are more decent in appearance and conduct, as well as in domestic circumstances, than formerly, and that solicitation in public has diminished. Taking Woolwich as a specimen case, and comparing the testimony of Mr. Tuffield with that of Mr. Krause upon the subject, it is undoubtedly the fact that the women are now better dressed and more decently lodged than formerly, and also that there is but little solicitation in the public streets. But these results indicate the possession by the women of more money than formerly, and as that can only be derived by this class from their evil avocations, Mr. Krause's opinion that prostitution in Woolwich is a prosperous and attractive pursuit is evidently well founded. There is consequently, as he says, "no need" now for public solicitation; men visit the registered women in increased and increasing numbers, and although each woman now has a separate room, he has himself discovered in the course of his ministerial visits as many as eight men in a bed-room with one woman. According to his observations the demand for prostitutes, owing to the increase of vicious men in recent years, is greater even than the supply. If, therefore, the improved appearance and public behaviour of the women be attributable to the Acts, it is inevitable that the proximate cause of such improvements, *i.e.*, the increase of professional gain, must be also attributed to them, together with the fact of the increased vice

Ev 1881. 7729-  
7734  
7763  
7764  
7733  
8546  
8597  
7766  
7762



among males which it denotes, as the effect of this "experiment" in legislation.

With regard, however, to the public behaviour of the women at Woolwich, it must be observed that Mr. Tuffield's opinion was derived from the observation of the "better parts" of the town, which are frequented by prostitutes having the appearance of ladies; but in the lower parts of the town, where the majority of the registered women live, and with which Mr. Krause's vocation renders him exceptionally familiar, scenes still occur (according to his statement) which for indecency and disorder can scarcely have been exceeded, if indeed equalled, at any previous time. The most serious part of the matter is that some of the worst misconduct is connected with the journey to and from the periodical examinations. On this point his evidence stands unquestioned, as Mr. Tuffield was ignorant even of the locality of the examination room. That the registered women are in fact a violent and lawless class, whose better conduct is influenced solely by motives of self-interest, was subsequently fully proved, by the incident of a personal attack by some of them upon this witness, in consequence of the evidence given by him, some report whereof having been communicated to them by (as they said) their "inspector," who was "possibly" one of the police engaged in the administration of the Acts at Woolwich. In point of fact the informant can scarcely have been any other person.

Ev 1882. 1167-98 Evidence was subsequently given by Mr. Wheeler, of Chatham, showing that the registered women of that town were frequently disorderly and indecent, and sometimes drunk, in their progress to and from the examination room. The medical officer had not observed this public scandal, but admitted that the women sometimes came up for examination in a drunken state.

The official witnesses, in attributing to the C. D. Acts the general improvement in the order of the streets of the subjected towns which has taken place contemporaneously with the operation of the Acts, ignore the fact that the maintenance of street order is entrusted by the Legislature entirely to the local police, and that in recent years greatly increased efforts have been made by these officers to effect this public improvement by a more vigorous exercise of their powers. The evidence on that subject given by the head officers of local police at Plymouth, Devonport, Stonehouse, and Portsmouth, and the Returns put in by them, afford good reasons for that improvement in the public behaviour of prostitutes which is testified by witnesses on behalf of the Acts. Similar activity of the local police in Chatham and other subjected towns has produced similar beneficial results.

23. (4)—*As to the rescue and reclamation of prostitutes.* The witnesses in support of the Acts allege two practical advantages in respect of reclamation afforded by the operation of the Acts:—



- (a)—That the process of bringing women under the Acts affords means of warning them, which in many cases results in their abandoning the immoral life they have commenced.
- (b)—That the system of administration of the Acts presents opportunities of moral instruction and influence, which in many instances result in reclaiming the women from vicious habits.

The first of these allegations concerns the action of the police; the second that of the hospital authorities. As to the former, neither the Acts nor the official instructions to the police appointed under them contain any directions upon the subject, but the practice is alleged in Capt. Harris' Report (1880) to be this:—"Whenever a chance exists of reclaiming a woman, every effort is made before she is brought under the operation of the Acts; and after she has signed the voluntary submission form, the opportunity is still given her of returning to her friends." In addition to this, "young persons" (*i.e.*, not exceeding 18 years of age) are "cautioned by the police," and if they thereupon abandon the immoral life they have commenced they are not registered. Other girls found in bad company and improper places are "rescued." The method employed in these proceedings is fully stated by Inspector Anniss, from whose evidence it appears that the action of the police in the matter is confined to the discovery of these women and girls, and that the substantial work of rescuing and reclaiming willing subjects is effected by benevolent persons, who seek or accept the aid of the police for effecting their charitable purposes, and without whose efforts and means there would be no rescue or reclamation at all, although the police assume the credit for the entire work. The method employed by the police for this discovery is the daily domiciliary visit to all known brothels—a fact which is evil in itself, and in its consequences, according to the views of the opponents of the Acts. Moreover, such visits are made not for the purpose of rescuing or reclaiming, but only of discovering persons qualified to be brought under the Acts, and consequently of subjecting them to periodical examinations—a fact which induces one of the strongest supporters of the Acts to acknowledge a preference for any other method of attaining the same results. It is evident that the rescue of young girls from vicious circumstances and the initiatory stages of an immoral career does not require the machinery of the C. D. Acts, nor the special powers of the police employed under them. As a matter of fact, such benevolent work is often performed by the local police to the extent of their opportunities (which might easily be increased), and without the objections which attach to the procedure under the Acts.

As to reclamatory efforts of hospital authorities, the only provision of that kind made by the Acts is for the "moral and religious instruction" of the women detained. Instruction of a similar kind is in fact provided in all hospitals for the moral and spiritual

Par. 4

Par. 5

Ev 1881.

3183-3204

3311-13

3960-3991

4890-4

5351-61



- benefit of the patients. There is no presumption that such instruction—whether received from an appointed chaplain or from benevolent volunteers—has any better effect in a hospital certified under the Acts than it would have if given in an equally well managed voluntary hospital. Indeed, assuming the periodical examinations to have the hardening effects which are attributed to them by opponents of the Acts—and which are in fact proved so far as the evidence of actual experience on the subject has yet gone—and taking into consideration also that each patient in a certified hospital is compulsorily sent to and detained there, the greater chance of effecting reclamation by means of such instruction manifestly lies among the voluntary patients. On this point there is a consensus of opinion of all witnesses who have had practical experience in rescuing and reclaiming both registered and unregistered women. Rescue societies, in fact, prefer to rescue unregistered women on account solely of the greater difficulty in reclaiming registered women. Dr. Cook, the Chaplain of the London Lock Hospital, in contrasting the two classes of patients in that Institution, said, “The ordinary patients (the majority of whom are known London prostitutes) are very mixed, . . . but the Government patients are brutalised beyond description in appearance and manner. The probability and hopes of reclamation would be greater in the ordinary than in the case of the Government patients.” It is agreed on all hands that the longer a woman remains in a career of prostitution the less chance there is of her reclamation. One of the undoubted effects of the system of registration and periodical examination is that the normal average term of prostitution is increased, and is continually increasing in the case of registered women. Capt. Harris’ Return (No. 2) shows that while the number of young prostitutes registered in all the districts has decreased, the average ages of the women remaining on the register has steadily increased; the number of women above 30 years having risen from 202 in 1870 to 398 in 1880, contemporaneously with a reduction in the total number. From these figures it is evident that the prostitutes remaining on the register are a confirmed professional class, growing old in the service of vice, whose reclamation consequently becomes more and more hopeless. The actual results of the reclamatory efforts in hospital under existing circumstances are therefore certainly not greater—and are probably less—than might have been attained without the machinery of the Acts. Regarding the facts, however, it appears from Capt. Harris’ Report that in 1880 the total number of admissions of registered women to hospital in all districts was 3,316; and the total number of cases of such women, who “returned to friends,” &c., was 453, *i.e.*, rather more than 13 per cent.; all the rest, “the great majority,” returned to prostitution. In Plymouth the proportion is about the same on the average. At Chatham it is on the average about 17 per cent. There is no positive evidence as to what proportion of the women who “returned to friends,” &c., were permanently reclaimed, and
- Ev 1881. 7313-7320
- 7753-60  
8222-3  
8683-4
- Ev 1882.  
3317-8  
3390-96
- 2684  
2756-67
- 3379-82
- Report 1880,  
p. 14
- Return 1, col.  
21-24
- Table  
App. 1881,  
p. 468
- Ev 1881. 5955  
6904-18



there is great difficulty in obtaining such information; all that even Inspector Anniss can say on the subject is that the reclaimed women did not return to prostitution within his district; and that in a "large number of cases, but not all," he knew they were permanently reclaimed, but no particulars of this knowledge were given. However, even in this case, the ultimate operation and results are effected by charitable people, by whose aid the repentant women are really rescued, when they leave the hospital, and by whose efforts alone they are, if at all, permanently reformed, although the administrators of the Acts now take credit for the whole work; in addition to the unproved assumption that all women not known to return to prostitution are necessarily reclaimed.

3571-2  
3694-3711

The proportions of women reclaimed from Voluntary Lock Hospitals furnish a remarkable contrast to the Government Institutions. In the London Lock Hospital, the number of voluntary patients who during the year 1881 entered the Lock Asylum or were sent to service, restored to friends, or sent to other homes, was about 75 per cent. of the total admissions, while the number of Government patients similarly disposed of was only about 19 per cent. of those admitted for the first time, and only about 10 per cent. of the total number of registered women admitted. The Government women are admitted to hospital over and over again,—many of them several times in the course of a year—the voluntary patients from the hospital wards are only admitted once. The Government women admitted to the Lock Asylum are of the "better class," and enter after a probationary training and testing.

1882. App 8

Ev 1882.  
12616

In the Voluntary Lock Hospital of the Rescue Society, the permanent reclamations amount to about 70 per cent. of the admissions. As already observed, that Hospital is worked as a part of their general establishment of homes for rescue and reclamation of fallen women.

App 11, Ret. 9

The actual result of reclamatory efforts in Lock hospitals under existing circumstances, therefore, clearly shows that the proportion of fallen women reclaimed without the machinery of the Acts is much larger than that effected with such aid—or, in other words, the system of the Acts is proved to have greatly increased the normal difficulty of rescuing and reclaiming women who have entered upon a career of prostitution. That appears to be the inevitable result of such system, superadded to the ordinary debasing influences of that course of life.

Upon the whole, therefore, it appears, on a review of the evidence as to the beneficial effects alleged to have resulted from the operation of the Acts, that the only social or moral improvement which is attributable to the action of the Contagious Diseases Acts police, is the incidental rescue of young girls from a probable career of vice; but that such results have been effected without the aid of the essential



machinery of the Acts (viz., registration and periodical examination), and might have been accomplished by other means entirely independent of the police employed under the Acts.

In all other respects, the positive evidence on this branch of the subject clearly negatives the allegations as to the beneficial results of the operation of the Acts, for it is clearly proved that their tendency is neither to diminish vice nor to reclaim the vicious, but that in fact they have had the contrary effect.

#### IV.—AS TO CERTAIN ALLEGED EVIL CONSEQUENCES OF THE OPERATION OF THE ACTS, AND OTHER OBJECTIONS MADE TO THIS LEGISLATION.

24. The principal allegations and objections made against the Acts are the following :—

(1)—That the Acts, and the statements of their administrators, have induced a popular belief that the system of controlled prostitution thereby established, affords protection against contagion of venereal diseases ; which belief has stimulated and increased sexual indulgence on the part of men.

(2)—That under the Acts prostitution has become a more lucrative, and therefore a more attractive avocation for girls and women, whose reclamation has consequently become more difficult.

(3)—That the system established in the administration of the Acts amounts practically to a licence of prostitution and brothel keeping, which is scandalous in itself and injurious to public morality.

(4)—That the Acts violate the principles of morality and true legislation, and of constitutional law.

(1)—As to this point, the only positive evidence appears to us clearly to establish the allegations. The medical witnesses who gave evidence against the Acts furnished actual instances within their own professional experience. The increase of vicious habits among the male population at Woolwich—particularly young men—is also fully proved by other witnesses whose professional duties afford special opportunities for observation. On the contrary there exists only opinion ; which, in the case of official witnesses, is based on the theory that soldiers are neither deterred from fornication by fear of contagion, nor induced to indulge their passions by the prospect of immunity from disease. In the case of unofficial witnesses, such opinion rests upon the assumption that facts which they individually have not observed necessarily do not exist. If the official theory be sound, it denotes that the majority of soldiers have lost in their military education the ordinary instincts of civilised and reasonable men. But the evidence shows that soldiers do think about the matter,

Ev 1881. 75-77  
110-12  
512  
937-8  
Ev 1881.  
8192-99  
8206-9  
8213  
8464-77  
Ev 1882.  
2081-4



with the deplorable conclusion, that "as the girls were provided for them," there was no harm in visiting the brothels; "they thought it was intended to visit them," and "they did not think it a vice;" and that they act accordingly. Soldiers resort with prostitutes more generally and more openly than formerly, and without shame or concealment, "on account of the provision which they consider is made for them," and the men take note of the discharge of particular women from hospital. Such incidents are now the common talk of barrack-rooms, and the effect, especially on young recruits, is deplorable.

Ev 1881.  
8192  
8619-35  
Ev 1882.  
1259-66  
Ev 1882.  
5963-6004

As to the male civil population, it is proved that many men actually utilize the periodical examination for their own vicious purposes. At Woolwich and Chatham men wait near the examination place for the return of the women. Even at Plymouth, as Inspector Anniss admits, "women not knowing the regulations" bring men with them. The practice there at some time must evidently therefore have been sufficiently extensive to be made the subject of regulation; and is probably now modified only so far that the meeting takes place beyond sight of the officer stationed at the door. There had not been such a case for "two months." It is clear, therefore, from the evidence given on the point, that the system of the Acts is appreciated by some men, at least "cautious" ones, as affording a practical assurance of safety in sexual indulgence, which could not otherwise be so easily obtained. To the woman the incident of examination presents the opportunity of exacting higher payment, which the man whose caution induces him to await the result of the examination is doubtless willing to make, in consideration of the certificate of fitness implied by her reappearance; and the total gain results to the woman, inasmuch as the work of examination is performed by the State gratuitously. The approval of the Acts by the registered prostitutes and brothel-keepers is therefore quite intelligible; and the opinion that similar feelings prevail among the same class of persons in other subjected districts is only reasonable. Inspector Anniss also says his experience is that "men prefer women who are supposed to be free from disease. . . . It is generally known the women are more free from disease where the Acts are in operation." If, therefore, it be true, as alleged by the supporters of the Acts, that while the present conditions of the community exist, prostitution will inevitably continue; it appears equally true, that so long as the Acts remain in operation, viciously inclined men will regard those measures as affording the approved means of safe indulgence, and will act accordingly. An actual and continuous increase of the class of vicious men is therefore consequently ensured by any such legislative scheme as that presented by these Acts. Moreover, the practical effect is to introduce sexual vice to the knowledge of youth at an earlier period than they might otherwise acquire it, and thus to facilitate the inception of vicious practice. It is a sad

Ev 1881. 8758  
" 1882. 1184  
" 1881.  
4055-6  
4055  
7793-7801  
7921-4  
8113-24  
8161-62  
8210-12  
8823-6  
Ev 1882.  
3891-3  
Ev 1882.  
10922  
12076  
5017  
Ev 1882.  
4495-8  
Id. 2050-1  
3243-54



but indubitable fact, that juvenile depravity is alarmingly increasing in subjected districts, whether it be confined to such places or not.

(2)—It is clear also that prostitutes registered under the Acts have, consequently, by reason of their "status" as "protected" women, the means afforded to them of exacting larger gains, both from better paying customers, as well as an increased *clientèle*. The apparent improvement in personal appearance and domestic circumstances, effected by the money thus gained, must certainly prove attractive to girls of the industrial classes, from whose crowded ranks the body of professed prostitutes is mainly recruited. It is undoubtedly the fact that benevolent efforts to reclaim fallen women are rendered more difficult by the apparent success of prostitution, as an easy and pleasurable means of livelihood; and consequently any system of regulating or dealing with this immoral trade, which results in making the practice thereof more lucrative, will inevitably have the effect of attracting into that life the idle and vain who might otherwise avoid it, in addition to the vicious, who would probably adopt it under other circumstances.

(3)—It appears from the evidence of Inspector Anniss, that under the administration of the Acts a systematic method of co-operation is practically established between the police on the one hand and the prostitutes and brothel-keepers on the other. A system of regular diurnal domiciliary visits to all the known (or registered) brothels is carried out, by permission of the brothel-keepers, as the police have no legal right of entry; by which means fresh prostitutes are discovered, and put (after caution) upon the register. To the brothel-keeper the system is welcome, as affording an easy and cheap method of protection, so far as the Contagious Diseases Acts police are concerned; for it is only when a brothel-keeper criminally infringes the Acts—*i. e.*, by knowingly harbouring a *diseased* prostitute—or indiscreetly offends the administration (or the administrators) of the Acts—*i. e.*, by disobeying police requirements—that penal proceedings ensue. Then, and then only, the delinquent is, at the instigation of the Contagious Diseases Acts police, either "placed out of bounds"—which, being interpreted, means, deprived of the military and naval customers—or prosecuted by the local authorities. A threat of such proceedings is generally sufficient to compel compliance with the requirements of the Contagious Diseases Acts police. Thus the law designed for suppressing vice is used by officers of the Executive as an instrument for regulating vice in open co-operation with systematic law-breakers. There is no pretence of legality in such proceedings—"it is matter of discipline." Even the official instructions only sanction such domiciliary visits for the purpose of making "the necessary communications" to the women at home, instead of in the streets. But it is clear from the evidence that to a zealous officer the legal power of enforcing a woman upon the register, at his discretion, is sufficient for all practical purposes;

Ev 1881.  
3194-5  
3203

Ev 1882. 1231

Ev 1881.  
3938-41  
3952-3

Ev 1882.  
11922-44

Ev 1881.  
3203  
3296  
3432  
3454  
3952-7

Ev 1882.  
9156-8



and that his actual achievements by such means are approved and adopted by his superiors in the public service. To the community, however, the scandalous spectacle is afforded of open co-operation between the administrators of the law and those who are in con-temptation of law offenders against law and morality. For, while every brothel-keeper is an offender, and every brothel an offence against the law, a certain number of brothels and brothel-keepers in each of the subjected districts are practically under the protection of the law; and are utilized by the administrators of the law as instruments for preventing, not vice itself, but certain physical consequences of vice. The registered prostitutes are also comprised in this scheme of co-operation, for practically they act on behalf of the police, as spies upon women and girls engaged clandestinely in prostitution, and furnish information which, in some cases at least, is the undoubted invention of malice. It is remarkable that while the police invariably refuse to believe the assertions of any prostitute regarding herself, they seem ready to credit her statements respecting other women. The legal position is, therefore, at once both inconsistent and scandalous. And the system of toleration and co-operation thus established, amounts in reality to a "licence" of brothel-keeping and of prostitution. To the public, especially in the neighbourhood of these operations, the result of the whole system is necessarily demoralizing. The frequent domiciliary visits of the police to the brothels—the regular concourse of women on examination days, escorted or accosted by men, and sometimes accompanied by open exhibitions of indecency both of action and speech—and the occasional forcible removal of an unwilling woman to hospital—all necessarily exercise a demoralizing influence among the poor and ill-educated in the vicinity, especially the younger persons of both sexes, and familiarize them with vicious ideas, which have their legitimate consequences in scenes which are a public scandal, and disgraceful to civilization. It is true the police do not appear in uniform (except at Aldershot), but they soon become known in the neighbourhood. Moreover, the default of uniform induces impersonation, for purposes either of indecency or fraud—in one case apparently with both objects. Even Inspector Anniss himself has been the subject of impersonation; although he nevertheless defends the practice of appearing without uniform (which was condemned by the Royal Commission).

Ev 1881.  
6879-81  
8083-93

Ev 1882.  
1232-3

Ev 1881.  
4013-4

Ev 1882.  
6868-6919  
7312-5

Ev 1881.  
5122-30  
5681-2

Ev 1882.  
4501-12

Ev 1881.  
5056  
6731  
8214  
8545  
4060-8  
8210

7774

App 487  
Sec 2

Ev 6893-4  
7047-50

App 481  
Ev 7050

4032-6  
6765-6

25. (4)—The various objections urged by the opponents of the Acts, on the general ground of the violation of moral legislative and constitutional principles involved therein, are fully stated in the evidence, and may be briefly summarized under the following heads of particulars in which such violation is principally alleged, viz. :—

(a)—In making provision on the subject of sexual vice, not for its suppression or punishment, but only for preventing the physical consequences of vice.



(b)—In dealing, with such object, unequally with the two parties concerned in such vice, by imposing an obligation—in itself immoral, and therefore illegal—upon one class (*i.e.*, certain women) of the community, for the benefit of another (vicious men, particularly of the national forces); and for the purpose of carrying out such enforced obligation, subjecting the servient class to penal consequences, involving the loss of personal liberty, and imposing obstacles to the abandonment of their career of vice.

(c)—In entrusting the officials charged with the administration of these measures with arbitrary discretion unprecedented in law, irresponsible in practice, and mischievous in results.

As to (a)—It is proved by Captain Harris' Returns, that out of the total number of 504,607 examinations actually made, the women in 457,243 cases were found free from disease, and accordingly dismissed; in the remaining cases, about one-tenth of the whole, the women went into hospital. Therefore, on the average, in about nine-tenths of the whole number of cases, the examinations were practically made for the absolutely immoral purpose of ascertaining that the women were in a condition physically fit to carry on their immoral trade of prostitutes.

(b)—It is impossible to deny, from the evidence adduced on the subject, that some weight is to be attached to these objections. And it is indeed remarkable that the scheme of legislation should have been strictly limited to the examination of women, in face of the strong recommendations for the co-ordinate examination of soldiers expressed by the Army authorities and Medical and Parliamentary Committees, on the result of whose investigations the Acts were framed.

(c)—There can be no doubt that very large discretionary powers are vested by the Acts in the police and other officials engaged in their administration, which are practically capable of abuse beyond the extent of any allegations yet made against those officers. The mere fact of watching in plain clothes the coming and going, and making notes concerning young women, many of whom they admit to be respectable, is an exercise of discretion evidently liable to serious objection and considerable abuse. The Acts leave the police free to institute proceedings against any woman whom they may believe to be a "common prostitute," and to institute proceedings against such person, with a view to her registration, without having actual proof of any specific act of prostitution. It is clear from the evidence adduced, that, notwithstanding the abundant caution on their part which is prescribed by the authorities, and stimulated by the vigilance of public observation, the police are liable to error in laying informations, which may in fact prove to be unfounded when properly tested by judicial investigation.



In cases of "voluntary submission," the police are free to exercise any influence or representation to induce the suspected woman to sign the document; and are, moreover, at liberty to insert any term, not exceeding 12 calendar months, as the period of submission. In practice it appears that in many cases the signature of this document is the result of representations which amount to threats of a magistrate's order in the event of refusal; indeed, the official instructions to the police imply that this is the established order of procedure, viz.:—"It is desirable that all common prostitutes should be brought under the Acts by voluntary submission, but if *any refuse to submit voluntarily*, the Commissioner's authority is to be applied for to bring them before a magistrate." In these circumstances it is not surprising to find that cases have occurred wherein the women declared that they did not know the nature of the document they signed; some even denied the signature; others that they did not understand the nature of the examination; and others that they did not realize the obligation of continued and periodical examination. In the majority of cases, moreover, the full term of 12 months is inserted by the police, without consulting the women; indeed, at Southampton, formerly, that term was printed in the form of submission.

Ev 1881. 6932  
App 20, p. 487,  
sec. 10

7358-66  
7827

6808  
6935-9

The police at Aldershot appear to have a special coercive method of procedure. The documentary evidence furnished by Mr. Shaen, as to the cases of Mrs. Percy (who was found drowned after being threatened with a summons), and Ellen Vokes, show that they commenced proceedings in those cases by warning persons who employed the suspected women against continuing such employment; and followed that step by a summons to the police station, and there trying to induce her to sign: on refusal, the statutory summons was taken out.

Ev 1881. 6963-  
6970  
App 19, p. 478  
Ev 1881. 6976-  
6980

The case of Mrs. Percy was not further investigated; but with respect to Vokes's case the inspector was called before the Committee, and stated that he personally had not adopted the irregular course complained of. But he was not aware whether any subordinate officer had done so, and as the constable who alone is alleged to have committed the act was not called, the charge is practically unanswered.

Ev 1882.  
9155

At Dover other methods of compelling a "voluntary submission" are adopted. In one case two police officers even pursued a suspected girl (named Burley) through the streets, until she threw herself into the dock, when they withdrew while she was rescued from drowning by some civilians. In a more recent case, a written direction or order "to attend" at the examination room was served by the Dover police on a girl named Southey, suspected by them of prostitution. She did not obey this illegal order, whereupon the statutory summons was taken out. On hearing the case for the prosecution the magistrates dismissed the summons. The incident was reported to the Committee, who then fully investi-

1882. Min. 16,  
19, 23 and  
26 May



gated the matter. The evidence given by the Contagious Diseases Acts police before the magistrates was repeated by them (on oath), but it was supplemented by other evidence which was not adduced before the bench, although it was at that time fully known to the Contagious Diseases Acts police. The evidence on the part of the girl fully confirmed the view taken by the magistrates, that no case whatever had been made out against her as being a "common known prostitute."

At Chatham, in the case of Caroline Wybrow, a series of unauthorised acts was committed by the officials. The police "warned" her up "for examination" before she had signed any submission, accompanied by the intimation that she would be sent to Maidstone (gaol) if she did not attend. She attended, but on her refusal to be examined, she was sent unlawfully into hospital for detention, although there was no evidence nor any reasonable ground for belief (according to the Home Secretary) that she was diseased. On further refusal she was, moreover, illegally punished by being put on low diet. On her ultimate submission to examination under protest, she was found to have no disease. The medical officer admitted, indeed, that she might possibly be a virgin.

1882. App 5  
and 6  
App 6, p. 1,  
par. (2)  
Do. par. (3)  
Ev 1882.  
9793

The illegal practice of "warning" or directing, either by oral or written order, suspected women to attend at the police station or the examination place for the purpose of being induced to sign the voluntary submission, is apparently still the current practice in all districts, although it was condemned by the Home Secretary in 1876, and instructions to the contrary directed. All that has been done is to issue a new regulation quite recently, that the submission form shall be signed by the woman and attested by the police in the presence of the visiting surgeon. That regulation is now followed at Chatham, and at Plymouth, "if practicable."

Ev 1882.  
11959-64  
10054

The effect of sec. 6 of the Act of 1869 is to make the so-called "voluntary submission," which is undoubtedly in many cases obtained by procedure which practically amounts to compulsion, as binding as a magistrate's order. It is not, therefore, a voluntary submission, for if voluntary it would necessarily be revocable at will.

Ev 1881.  
6804-8  
6830-34

The abuse of discretionary power is not, however, confined to the police, for some magistrates also have, in their discretion, made orders against women under the Acts, notwithstanding that the allegation of prostitution has not been substantiated by evidence; and there is no appeal from such decisions. The magistrate may sit alone; he may appoint any place for the hearing, and such place is not even to be deemed an open Court, unless the accused demand it; but no duty is imposed on any person to inform her of her right in this respect. It is a remarkable and objectionable fact that three Visiting Surgeons appointed under the Acts have been made magistrates, in accordance with recommendations to that effect

6958-61  
6783  
6791  
6962-3  
6796-6800  
Ev 6795  
6812-3  
8175-77



officially made, and as such are legally qualified to adjudicate in all cases. It is remarkable, also, that while the police are authorised voluntarily to institute proceedings which result in putting a woman on the register, neither they, nor even the Magistrates, have any power spontaneously to remove her name from the register, even although the woman has in fact "ceased to be a common prostitute." If such a woman absent herself from, or refuse to submit to examination, she *ipso facto* infringes the Act, and is punishable accordingly. If she desire to be relieved from examination she must apply in writing to a Justice (or Visiting Surgeon), who will "hear the application," and at his discretion make, or refuse, an order for relief. The police have no duty imposed on them by the Acts of instructing the women in the process of getting off the register; and, indeed, they are shown in some cases to have withheld such information.

Although a woman discharged from hospital is then legally free from the Acts, she is generally practically within the sphere of their operation, and the usual result is formal re-submission.

In answer to the objections made by the opponents of the Acts to the statutory provisions on the subject of relief from examination as practically opposing obstacles to the voluntary relinquishment of a career of prostitution, Inspector Anniss stated that as a matter of fact, if a woman in his district wishes to leave her immoral life, or gets married, or goes to service, she merely applies to him, and he immediately removes her name from the register; she never makes a written application unless she continues living in a brothel. This summary procedure is not only a clear infringement of the Statute, but it also amounts to a confession that the provisions of the Acts do in fact constitute obstacles which are better avoided. But the substitution of a police code of discretion for the requirements of the law is in itself a dangerous innovation.

Again, the nature and method of the personal introspection, vaguely described in the Acts and the form of submission, and also the magistrate's order as a "periodical medical examination," is left entirely to the individual discretion of each visiting surgeon. But in every case the examination is surgical, and, in nearly all cases, instrumental. The official witnesses indeed regard the inspection as similar in every respect to the examination of virtuous women, by an ordinary medical practitioner; thus overlooking entirely the essentially different object and intention in each case, which have been already noticed by the Report of the Royal Commissioners:—"Assuming that in either case the operation is conducted with equal regard to decency, the object with which it is performed makes all the difference. In the one case the examination is voluntary, occasional, and may never be repeated. In the other, the examination is compulsory and regular, and instituted, not because the woman is diseased, or even suspected of being diseased, but because she may be diseased."

H. C. Com.,  
1869, 719

R. Com. 4581  
10956-8

Act, 1866,  
sec. 28

Act, 1866,  
sec. 33-4  
" 1869,  
sec. 6.

Ev 1881. 6939-  
6956  
7166-71  
7186-7  
7790-3  
6814-18  
Ev 1882.  
4439-45  
5350-5

Ev 1882.  
10936

Ev 1881. 7367-  
7368

Royal Com.  
Report, par.  
48



The Regulations for the management of the Hospitals certified under the Acts appear, so far as disclosed to the Committee, to render the detention in hospital practically an imprisonment during the period of cure. Without express permission, patients are not allowed communication, even by letter, with persons outside, and no visitors are admitted to the wards; letters are opened, read, and delivered at the discretion of the chaplain or matron; and the only persons to whom complaint is allowed are the officers themselves, so that complaint of *their* conduct to an independent authority is quite impossible. Proof that these stringent regulations produce practical injustice was furnished by Mr. Shaen.

Ev1881. 6812-6813  
App 1879, No. 10  
Ev1881. 6809-6811  
8050-51

While "discretion" is thus practically the only limit of the authority of the various officials engaged in the administration of the Acts, the right of action of persons aggrieved by their proceedings is stringently, and even abnormally, limited. The requisite notice of action often precludes redress altogether. In any case the defendant can plead generally that the alleged injurious act was done in execution, or "intended execution," of the Statute. Thus, practically, discretion may not only be exercised, but may be pleaded as a sufficient answer to an action. Even in the event of success, a plaintiff must suffer pecuniary loss in costs; while the full reimbursement of a successful defendant is ensured. However, presuming that the object of this unique enactment was to afford complete protection to the administrators of the Acts in any circumstances, practically it possesses certainly the exceptional merit of having been entirely successful.

Ev1881. 6820-6823  
8181-2  
Act, 1866, sec. 42  
Ev 1881. 6823

26. The various objections entertained by a large number of persons of all classes to the legislation in question, has induced the formation of many Associations throughout the Kingdom for the repeal of the Acts. They include one association of women, called the Ladies' National Association, whose opinions on the essential features of the Acts have been forcibly expressed by Mrs. Josephine Butler; and one association of medical practitioners, the National Medical Association, located at Liverpool. The repeal movement also includes the systematic and continuous action of many religious bodies on the subject. The movement has resulted in the presentation to Parliament of an enormous number of petitions, and of many memorials, &c., to the Prime Minister and the Home Secretary. It appears from the evidence of the representative Ministers of the principal Nonconformist Churches in England, Wales, Scotland, and Ireland, that they have all passed resolutions condemning the Acts, and praying for repeal. Of the clergy of the Established Church of England, about 2000 have signed a memorial in favour of repeal to the Prime Minister (in 1873), comprising many distinguished names, and also that 310 clergy of London alone have signed a petition to the like effect. A return proved by Mr. Bunting shows that the total number of petitions presented

Ev 1882. 5278-80  
5286  
4544  
App 13-22  
Ev 1882. 5312  
5326



between 1870 to 1881 was 10,135, containing a gross total of nearly two and a quarter millions of signatures. Of these a considerable portion came from subjected districts. One of the petitions, signed by women only, had the enormous number of 248,000 signatures. On the other hand, all the petitions presented against repeal amount only to 45, with 3,579 signatures. The majority of these, containing 3,266 signatures, were presented in 1872, and included no less than 1,112 signatures of women registered "under the provisions of the Acts." As to the opinion of the medical profession, there is no doubt that the majority are in favour of the existing system under the Acts, and probably many reasons conduce to this result. However, in Liverpool, where the subject has been much discussed among medical men, professional opinion is divided in the proportion of 174 in favour of the system to over 100 against it. But a petition in favour of repeal has recently been presented from medical men in Belfast, signed by about two-thirds of the practitioners there.

Ev 1882. App  
No. 23.

Ret. 1

Ret. 2

Ret. 3, 4  
Ev 8312-9

Ev 1881.17-18

Ev 1882.  
12307-13

The general opinion of the majority of the inhabitants in the subjected districts is stated by witnesses of local knowledge to be in favour of the Acts, although that evidence is not supported by the results of public meetings in those places generally, or of the petitions therefrom. But, if the fact be as stated, some reasons are apparent for such opinion, arising principally from the connection and dependence of a large proportion of the population of such places on the Naval and Military Establishments, with which the administration of the Acts is associated, and other circumstances—one influential consideration being that, under the existing system, the poor-rates are relieved from the former burdens incident to the treatment of diseased prostitutes in the Workhouse Infirmaries of those places.

27. To sum up, the following conclusions appear to be established by the evidence:—

- I. That even under the unequal conditions obtaining in favour of the stations protected by the Acts, venereal disease in the Home Army has not substantially diminished in those stations to a greater comparative extent than in the stations not under the Acts, except in the one particular of "non-syphilitic" sores.
- II. That the percentage of cases of disease among the registered women has increased continuously during several years, and is still increasing.
- III. That the only real good effected by the police employed under the Acts is entirely beyond the scope of their statutory duties, and could be better effected by other means.
- IV. That the religious, moral, and constitutional objections



presented to the Acts, and the system established under the Acts, are valid in principle, and are confirmed by the practical results of their operation.

We are of opinion, therefore, that these conclusions afford ample reasons for the repeal of the Contagious Diseases Acts.

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