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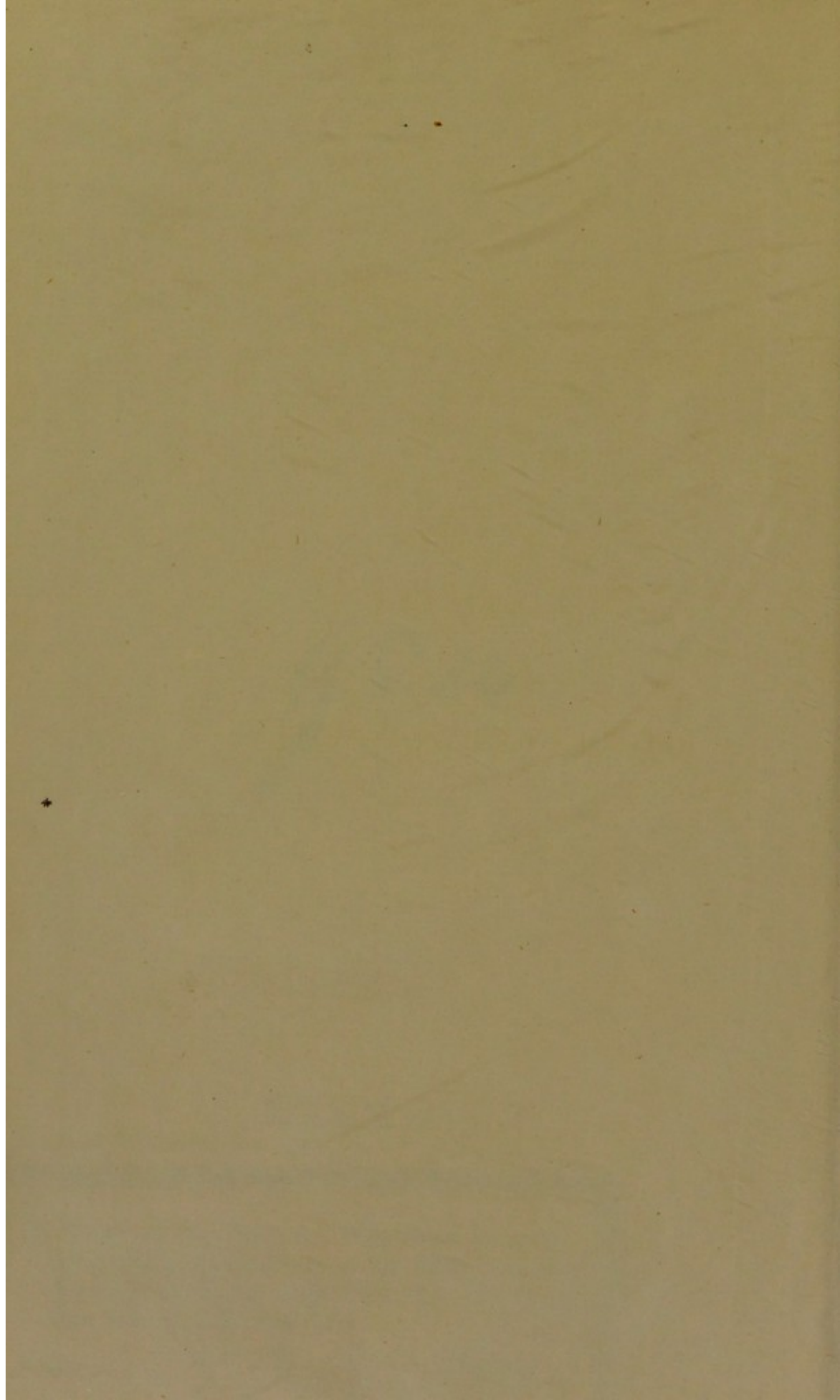
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9 July, 1832





ARTICLES

ON

REFORM IN PRIVATE ASYLUMS.

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REFORM IN PRIVATE ASYLUMS

BY

JOHN CUNNINGHAM

OF THE LANCET

WITH A PREFACE BY THE EDITOR OF THE LANCET

LONDON
WILSON AND OGILVY
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JOHN CUNNINGHAM, M.D., F.R.C.P.

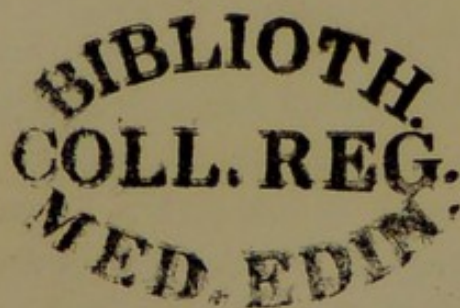
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ARTICLES
ON
REFORM IN PRIVATE ASYLUMS.

BY
HENRY MONRO, M.B. O_{XON}.

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AUTHOR OF "REMARKS ON INSANITY, ITS NATURE AND TREATMENT," ETC. ETC.



LONDON:
JOHN CHURCHILL, PRINCES STREET, SOHO.

1852.

SYNOPSIS

RETURN BY VISITATION ASYLUMS

INTRODUCTION

1. The general object of these articles is directed to be the removal of the civil responsibility incurred by detaining a patient in a private asylum from the proprietor to the Commissioners in Lunacy.—2. The attainment of this object is shown to be in the way opposed to the continued existence of private asylums; the peculiar advantages of private asylums are dwelt upon.—12. A few objections raised against these articles are combated.—13. A sketch of the articles is given.

PART I.

14. In order to render the responsibility of the proprietor as possible, the proposed visitation of private asylums is shown to be necessary; a visitation of four times a year is declared inadequate to the wants of the patients; a visitation once a month, or even more often, is urged.—15. What the wants of patients are, is discussed and compared with the mode of other persons who are subject to the jurisdiction of an individual.—16. A frequent visitation is necessary, so that the interests of patients is satisfied.—17. Frequent visits are necessary.

SYNOPSIS.

INTRODUCTION.

1. The general object of these articles is declared to be the removal of the civil responsibility (incurred by detaining a patient in a private asylum) from the proprietor to the Commissioners in Lunacy.—7. The attainment of this object is shown to be in no way opposed to the continued existence of private asylums: the peculiar advantages of private asylums are dwelt upon.—12. A few objections raised against these articles are combated.—15. A sketch of the articles is given.

ARTICLE I.

17. In order to render the removal of this civil responsibility possible, an increased visitation of private asylums is shown to be necessary; a visitation of four times a year is declared inadequate to the wants of the patients; a visitation once a month, or even more often, is urged.—19. What the wants of patients are, is discussed and compared with the need of other classes who are subject to the authority of an individual.—22. A frequent visitation is necessary, to free the minds of patients of injurious anxiety.—25. Frequent visits are neces-

sary to free the mind of the proprietor in doubtful matters of discharge.—26. Frequent visits are wanted to settle matters of unavoidable disagreement between patients and their ordinary superintendents and advisers.—28. Frequent visitation is necessary to free the mind of the Commissioner of those inaccuracies of judgment which a rare visitation engenders.—30. Such *possible* evils of a rare visitation as are the result of cruelty and misconduct, are purposely not considered here, but only such evils as *must* result from rare visitation.—32. Frequent visitation will afford a reference to a disinterested tribunal a short time after a patient's first confinement.—37. Frequent visitation will assist to disarm that morbid suspiciousness to which most patients are prone.—39. And it will reveal the comparative value of different asylums.—40. An increased board of commissioners better than any other remedy.—42. Upon the expense which the increase would occasion.

ARTICLE II.

44. The advantages of increased and sufficient reports on private asylums urged as a motive for increased visitation, and the existence of such reports as a means of making the Commissioners responsible for the detention of patients.—47. On increasing the means of information as to the condition of private lunatic asylums; what means of information exist at present?—49. We may judge of this in some measure by the motives which induce the selection of an asylum.—50. Who can afford sufficient information on this matter?—52. Only the authorised inspectors.—53. How can the Commissioners assist in this work?—55. Objections as to the necessity for increased reports answered.—56. 1st objection (namely, that this need is not much felt) answered.—56. 2d objection

(namely, that asylums in the present day have already attained an average amount of excellence) answered.—58. 3d objection (namely, that the present means of inspection are sufficient) answered.—The conclusion.

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64. The necessity for the removal of the civil responsibility of detaining a patient from the proprietor to the Commissioner, urged on the ground of the invidiousness of the position at present occupied by proprietors. — 65. This invidiousness only felt in certain cases; these cases described.—67. A proprietor, in defending himself against a charge of unjust detention, is exposed to peculiar and intolerable difficulties; some of these difficulties described.—70. Cases given wherein these difficulties would be peculiarly felt.

ARTICLE IV.

By the removal of this civil responsibility, the matter of improving the condition of attendants might be materially assisted.—74. The importance of this question considered; the important position of attendants considered.—77. The ordinary faults of attendants considered; the remedies for these defects considered.

ARTICLE V.

As an Appendix to various matters considered in the pre-

ceding articles, the need for self-supporting private asylums for the middle classes is urged.

Errata. — The Sketch given at page 15 is incorrect: the articles having been printed off at different times is the apology for this and similar inaccuracies.

For "much pain arises," p. 11, 4th line from bottom, read "much harm arises."

For "large proportion," p. 14, 5th line from top, read "certain proportion."

For "Article I." on first page of Appendix, read "Article V."

ARTICLES

ON THE

REFORM OF PRIVATE LUNATIC ASYLUMS.

INTRODUCTION.

On the motives which have induced the following articles.

—On the advantages of a good asylum.—On some of the arguments raised against these articles.—A sketch of their contents.

THE following articles on improving the condition of the insane have already appeared in various medical periodicals,* each in a separate form. This fact will, I trust, be deemed sufficient to account for that repetition of phrases and sentences which will occur in different places, and which, under other circumstances, would be inexcusable. I have somewhat altered the arrangement of the papers, in order that those may appear the first upon which the succeeding ones more or less depend. With this excuse for the imperfection of the succeeding remarks, if viewed as one compendious work, I must commit them to my readers' kind consideration, only requesting him to study the synoptical table at the commencement, which may in some degree give order and a scheme to that which is so deficient in these respects.

* Psychological Journal, October 1851; Medical Gazette, October and December 1851; Lancet, January 1852.

As a preface, however, to these papers, I would state most distinctly my principal object in adopting the course which I have taken. I do so, because I wish to be clearly understood in this matter, and to avoid that misconception to which I am of necessity so much exposed.

It is to make the Commissioners and other public inspectors as responsible as possible for the conduct of private lunatic asylums,—to remove all civil responsibilities from medical proprietors as much as may be,—and to leave to them what is quite sufficient alone, the medical care and the charge of carrying out the details of the economy of the house.

I aim at this end,—First, from the conviction that the public, and in consequence their representatives, are, and must be, the most unbiassed judges in many matters of great importance connected with the welfare of the insane. Second, from the conviction that the public *have proved themselves* to be the most trustworthy depositories of this responsibility. Third, from the conviction that little short of this can render the position of any officer of a private asylum who has a sensitive regard for his character, comfortable, in the present day, when the public are naturally so suspicious of the private system.

I will in a few words state my reasons for these conclusions.

First: as to the fact that the public are the most unbiassed judges, there can be no doubt, for they and they alone can have no private interest either in the detention or release of a patient. This consideration must be satisfactory to all; and one of the best results of this belief is, that the appeal to the Commissioners has been a source of comfort to many patients before they have become acquainted with the good intentions of those they are placed with.

Second: that the public has proved itself to be the surest defence to the insane, is a matter so conspicuous and significant, that it has led me to consider the sound sense and good feeling of the *sane public* the best antidote for the morbid sense of the *insane*, and a refuge more to be depended upon than the

care of either relatives or medical men. Experience of the past has declared this truth in a manner not to be mistaken; common sense shows us the reasons for this fact; and if such is the case, humanity demands that their voice should be attended to.

For example: Experience has proved to us that the care and affection of friends, with good intentions, were not in former times equal to the task of insuring the best treatment to their suffering relatives. And common sense tells us that this deficiency was occasioned, partly by a blind trust in others and a belief that nothing could be done, and partly by such morbid fears and false shame as caused persons so closely allied to the sufferers to stop their ears. In these cases (which I am thankful to say are becoming daily more rare under the influence of greater enlightenment of mind), sympathy seemed to have reached its boundary, and self-protection to urge flight from a disease which so shocks the feelings; and thus, too often, even tender minds endeavoured to become callous at almost any hazard. On the other hand, general philanthropy proved itself able and willing to stand the shock which the more sensitive feelings and the selfish fears of friends quailed before. The public sympathy resembled in this respect a rock in the ocean, which can offer a firm hold to him who is sinking beneath the waves; while private affection exhibited the helplessness of a companion a little stronger than his fellow, who refuses to reach out his hand lest he should be dragged into the abyss which awaits one less happy than himself.

2. Experience of the past, and common sense, have declared that the various officers of asylums, allowing them to be humane men and honourable gentlemen, are unfit to have the sole charge of the insane without aid or observation. Among many causes which contributed to this, I would particularly note the following: The patients, many of them, are so apathetic, so imbecile, so little affected by kindness or the contrary,—many of them take so much advantage of kindness, and try so to make

it manifest that they will not appreciate it,—many complain so equally of good and bad,—are so morbidly suspicious of the best intentions, &c. ; that superintendents easily flagged in their endeavours, and relapsed into bad old customs, from the fact of dwelling too much on such unfortunate instances, and not having the sympathy of their fellows to help them, or their observation to stimulate them. In saying this, I do not mean to assert that there were not some of a higher tone of mind—some who devoted themselves to the cause of the sick and unhappy, with a spirit of self-denying good-will and untiring zeal—some who were hardly aware whether they were observed by man or not, and who never flagged on account of repeated instances of failure and misinterpretation. But of the generality it must be said that they required the spur from public opinion to reanimate them, and still require it to keep them up to that mark which has been so happily attained. I know that it was a medical officer of the French Hospitals, the great Pinel, who, stimulated by his own philanthropic mind, and the liberal sentiments of his age, first introduced the present improved treatment of the insane. I know that other great men of our own country have energetically followed in the path he opened to them. But their works are to be considered the fruits of an enlightened age, rather than the growth of the narrow school of lunatic asylums ; and it is owing to the continued sympathy of the public that their efforts are so successful.

3. Experience has, however, proved that the absence of sufficient scrutiny has occasioned much worse results than these. What I have spoken of hitherto are but the consequences of leaving the insane with persons of good intentions but natural infirmities. No acts of cruelty or very culpable neglect have been supposed ; and yet these existed, before public supervision was demanded and exercised, to an amount which would astonish any one in the present day, and would make us doubt the existence of one spark of humanity in the hearts of either the friends who did not interfere or the officers who permitted

these evils, if we were not prepared to recognise the truth, that ignorance and sloth will allow of almost anything.

If we for one moment glance at some of the earlier reports of the Commissioners of Lunacy on some of the licensed houses of *the lower class*, our whole being will be shocked at the details therein recorded. Facts are spoken of in a language so plain and brief that it convinces us of their reality, and of the impossibility to increase them by any effort of the imagination. The scenes therein depicted possess heroic horrors such as we may hope could not exist in the present day. They resemble somewhat the visions of childhood, when midnight finds the mind under impressions which the youthful reasoning power cannot dispel at waking; they are so dreadful that the fancy of grown man can hardly conceive such misery, and if the novelist attempted to pourtray them he would but sicken, not interest, his reader.

I will not do more than advert to them, as I am loathe to sketch from scenes which have now we may hope long passed away, more especially as any one, desiring to know more of what I allude to, can examine the reports for himself. But I cannot too forcibly recall to the mind of the reader that such is a specimen of the results of irresponsible authority and the absence of supervision when men without conscience are in power. They are strong pictures, I grant, but they are true ones. They were permitted to continue by men who wished to be humane, who were surrounded by many of the same influences and associations as ourselves, but who ignorantly believed this state of things to be a necessary evil, however terrible, and who had not vigour of mind sufficient to see their way out of it. Any schemes for emancipation would have appeared utopian, till public opinion declared the contrary; and then all was changed.

One pities the inspectors who had to witness such scenes as these. What, then, must be our feelings for those poor outcasts who endured them for years? The only alternative in

such misery, either for the sane or the insane, is to become as insensible as possible either to good or evil. A certain amount of misery causes anguish; an increased amount often does not cause greater anguish, for the burden of that would be more than could be borne. It produces that far more terrible condition,—an apathetic despair. As tears indicate only a certain amount of suffering, and as greater suffering closes this flood-gate of natural relief, so does the recklessness of intense misery indicate far more than any expressions of sorrow. If thoughts of a happy childhood, and the recollection of the tender nursing of a parent's love, should have ever entered into the mind of persons thus situated,—if the dream-like happiness of the past was ever compared with the dread reality of the present, no wonder that the belief should have often arisen in the mind of the poor lunatic, as he rolled his hot head and tossed his wearied limbs, as he sought in vain for the voice of sympathy and the thrilling touch of kindness, that the judgment was passed, and a terrible world of retribution had arrived at length. It will be said, Why revert to the scenes of misery endured under a system which has passed away? My answer is, that I wish to depict, in language as forcible as I can, what was the history of some of the licensed houses before they were subjected to public inspection. Much of the unhappiness which I have alluded to must be the lot of the insane under the best régime, but a heartless and cruel system of treatment must have added to this a hundredfold.

Thirdly. But the motive which presses *most cogently upon me*, in urging the removal of the civil responsibility, incurred by detaining a patient, from the officials of an asylum to the Commissioners, is, that this responsibility is on certain occasions *intolerable* to the former if they have not become inured to it by a process of habits and associations which it would be well for all to avoid, but which capricious fashion sometimes allows even in the pursuit of an honourable profession. I will give a few examples of this disagreeable

responsibility in a future chapter. Suffice it now to say, that the questions which arise are principally such as the following:—*Should a partially insane person, who is legally sent to an asylum, be retained or not? Should a convalescent patient, about whose continued residence there is much cause for doubt, be discharged or not?* There can be no doubt as to the propriety of an asylum for a complete maniac, or for one whose monomania is constantly inspiring him to some overt act of a dangerous tendency. There is hardly any civil responsibility in retaining such patients, for we know that any jury possessing common sense must support us. But the cases in which an English jury fail to give medical men support, are those where the delusion is subtle, the insane phenomena partial, and the consequences of them uncertain; where the most impartial judges are liable to errors, and where persons privately interested in the question of detention cannot escape animadversion, be their course what it may. And let me here say, that while I agree with those who think that our present juries are by no means fully equal to judge of the more abstruse matters of insanity, I give them full credit for judging fairly of all that really comes under their cognizance.

On the advantages of a good asylum. — I am, however, the more anxious to see asylums placed in as good a position as is possible, because I believe that a well-conducted one affords the best means of treatment for many insane patients. That I began my professional life with a strong prejudice against asylums, and that this prejudice has gradually not only faded away but been supplanted by the opposite conclusion, are circumstances which might be allowed to add weight to the convictions here expressed; for I trust that my reader will believe that this change of opinion has not been the result of caprice, but that of a long-earned experience, during which I have seen *what may be done in an asylum, and what can be done elsewhere.*

My reasons for arriving at this conclusion may be briefly

stated. They are :—1. That a well-conducted house offers remedial appliances which can be obtained no where else in an equal degree,—such as large and private airing-grounds, baths of every description, a number of attendants, and, owing to the size of the establishment, a most useful means of classification, &c.; all of them advantages of a physical nature, the importance of which those only can sufficiently appreciate who have seen insanity in private houses and in the domestic circle. 2. Long experience and habit enable a superintendent to organise modes of employment and amusement, and carry them out in practice, notwithstanding the opposition of the patient,—to form a good judgment as to the propriety or not of insisting upon these things in individual cases, &c. &c., and to do all these things with a degree of ease which those not conversant with such matters cannot understand or imitate. 3. But thirdly, there is one reason, more cogent than any of these, which induces me in many cases to prefer the private asylum to any other mode of treatment; and it is, that here exists a degree of surveillance which is to be found no where else. When a relative is the victim of insanity, it is well known that a continued residence at home is most disadvantageous, not only to the patient, but to every member of his family. Few truths are less questioned than this by those conversant with this disease; and, when it is pressed home to the attention, the only choice which usually remains is between a private lodging and a private asylum. The former of these systems is preferred at first by those who can command its expense, for its adoption is thought to bring less stigma on the family, and less alarm and disgust to the patient than the latter. But, while I would advise this course in many cases (such as when insanity is only incipient, and its full terrors may be warded off,—where patients are convalescent, and are very susceptible of impressions about their position, and capable of restraining themselves to a great degree, &c. &c.),—I should, for the reason just given, prefer the asylum for most of those who are subject to the full

phenomena of active insanity, or are in the various stages of imbecility.

For let us take a hasty glance at the condition of those who cannot speak for themselves while in lodgings with one or two attendants. Such a patient is confined to a small house, with probably a little dull garden attached. A physician visits him periodically. His friends purposely keep away, and no stranger is of course admitted. Under these circumstances, is not his whole happiness and welfare entirely at the mercy of those who are placed over him? These may be good and conscientious men, but are they not also often the contrary? and even if well-intentioned, are they not frequently coarse-minded, and utterly unable to appreciate those little modes and expressions upon which the happiness of a refined mind depends? What can be more distressing to a patient, who already has a morbidly excited sensibility, than to be thus in the hands of one who continually offends him, and (what in some respects increases the difficulty) does not even know when he offends? In an asylum, on the other hand, a hundred ways of modifying and neutralising this state of things exists; among them we may reckon regular visits from the Commissioners (which do not take place in lodging-houses), a continual visitation throughout the day from the superintendent, the observation of other attendants, the observation of other patients. The honest rivalry of attendants, even, is most useful. Again, the effect in cheering the spirits which the presence of other attendants has upon the one in authority is a most important matter; for what can be worse than the tyranny of a man who is not only unfit in many ways for this sole authority, but is rendered morose and gloomy by seclusion and want of society? The asylum is a centre of living interest to many persons, and a scene of action and life; while the lodging has the silence of the grave. In health, and with the glow of life around us, we can rejoice in solitude, and feel sympathy with silence; but those who are sick fly to the city for refuge, and to company for

relief. In that theoretic vein, which some persons of the upper rank possess to a degree which sets all reason at defiance, some may profess to prefer the lodging; but in its practical effects, in its daily influence, there can be no doubt of the superiority of a well-organised asylum for the classes mentioned above. It is very advisable, however, that, in all large licensed houses, private wings or detached cottages, with separate gardens, should exist for certain cases, and thus the advantages of the asylum and private lodging be happily combined: indeed, no asylum is perfect without this means at hand.

In families where wealth is possessed, and a large establishment can be at the command of the patient, including very probably a resident medical attendant and friend, means are offered which present a very different aspect to the ordinary lodging-house above mentioned, and nothing can be better than such a scheme for many patients; but there are others for whom I should even prefer the asylum to this mode, if I could thoroughly rely on the excellent conduct of it.

It may be said at this point, if you have so high an opinion of asylums as they are, why do you call for reform so loudly? My answer is, that I have this high opinion of good asylums, for those conducted on the best possible principles; and it is because I wish to insure those best principles in all, that I demand such increased supervision, &c. If all asylums were equal, and in the best condition, there would be no need of reform; but it is because they are very unequal in conduct, and because I know what they might become if seen to sufficiently, that I call attention to the matter.

Much has been said as to the effect that the presence of other patients has on an insane person in an asylum. Upon this head I am inclined to believe that, in some cases, more good than harm is the result of witnessing the insanity of others, at certain periods of the disease and in certain cases. Thus, for example, I remember a young lady saying to me on her recovery, that it

seemed to do her good to witness the vagaries of others when she became capable of observing what was passing around her ; it shewed her how absurd they were, and induced her to control herself more, though at a subsequent period, and when she was convalescent, it was painful to her. If we watch our own minds, we shall find that when suffering most under that irritation (which is a degree of the same condition which in excess would cause insanity), few things soothe our state more than to go abroad and see greater sufferings than we ourselves endure ; it humbles our desires and conceits, and renders the heart thankful for the blessings still enjoyed. It may be said that this argument cannot apply to the insane, because they are not capable, while absorbed in their own miseries, of observing or interesting themselves in those of others. This applies to complete and raving madness ; but in proportion as it is partial, and in proportion as moral means are at all applicable, patients of course are capable of being influenced in this way. At least, those who fear that they are susceptible of injury by the presence of others, must grant that they are in a position to derive good ; for the first hypothesis presupposes a capacity for moral influence. Indeed, nothing is more common than to observe that patients, who are not even able to conceive that there is anything mad about themselves, perceive the madness and absurdity of others keenly. Much discrimination, certainly, is required in the matter of classifying patients, and judging of the probabilities of good or harm likely to arise from intercourse with other patients ; but a large asylum, when in a proper condition, should afford to us the opportunity of taking advantage of the good, while we avoid the evil part of this intercourse.

In cases suited to an asylum, our chief anxiety should be to ensure a patient's admission sufficiently early in his illness. For much pain arises from that delay which is so natural under the circumstances, but which is the result of an uninformed anxiety. Nothing can show the importance of this question more significantly than those statistics which demonstrate the

comparative number of cures at early and late periods of their illness. We must of course make allowance for the fact, that, independently of remedial means, a disease which has obtained a greater hold on the constitution is more inveterate than that which is recent; but if we take this precaution against an exaggerated view of the influence of remedies, it is very striking to find the computation, that recoveries under treatment before the third month, when compared with those for whom treatment has been delayed twelve months, bear the proportion of 12 to 1.

Should any one argue that the insane are not so capable of feeling intensely the absence of refinements, and the presence of evils, as I have here declared them to be,—that they are so occupied with their own delusions, or so apathetic in their imbecility, as to care little for the things of the external world,—I would charge such an one to draw distinctions. This may be the case with a raving maniac, or with those who are past the power of observation; but, on the other hand, many insane persons possess a morbidly acute sensibility, and a faculty of exaggerating real evils to a remarkable degree; just as dreamers feel horror and pleasure in a way unknown to the waking mind. Indeed, we may justly imagine that the condition of the nervous system in the insane when awake, is very similar to that of the sane when asleep, namely, a state of vital depression which causes mental phenomena to assume undefined and monstrous shapes; a state where the highest *earthly* endowment of mind is lost, namely, moral liberty to control and direct the mind; when reason and judgment are in abeyance; and when, in consequence, the emotions and sensations occupy an undivided attention and a clear field of action, and run riot in a manner which is not experienced when these various faculties which restrain the imagination occupy that position which is necessary for the guidance of man in this world.

Objections answered.—It has been argued, and may be argued again, that such views as I have adopted in these papers

are utopian ; that it is unpractical to expect so much from high motives, and to make so little of self-interest ; that in the long run marketable qualities alone will stand the test of time, and that private interest will beat public philanthropy out of the field. In answer to this mode of argument, let me observe that it would have been very well in the last age, but is comparatively obsolete now. Philanthropy is no longer an *ignis fatuus*, and private interest the only stronghold on which to rely. A Howard is not now-a-days a strange animal ; and a man of good intentions, who tries to represent himself to be an object of ill usage and non-appreciation, only receives that contempt which all self-immolated martyrs deserve. Philanthropy is in fashion ; and though the beldame fashion is a fallible guide and an insecure support, the ever youthful genius of philanthropy, which it has adopted for the time, is not so. I can trust to the present age to remedy an evil when it is seen, and the means of amelioration are at hand. Our danger is rather on the side of indiscreet zeal than of apathetic negligence, and it is a blessing which we cannot too much appreciate, that we are inclined to err on the side of too much than of too little care.

Again, it has been urged that it is absurd to doubt the good conduct of proprietors and the other officers of private asylums, for that bad conduct would in the long run be bad policy ; that negligence would shorten the lives of their inmates, and thus shorten their means of gain. This mode of argument might have succeeded before slave-holders and factory proprietors were obliged to hide it in a corner,—before abolition was conceived possible, or a ten hours' bill was passed,—but it will not do now. It is not imagined that any one would injure the viability of those out of whose existence he gains his livelihood. But happiness and viability are any thing but identical. Our care need not be that a patient *lives as long* as he can, but *as happily* as he can ; and what I deplore is, not the committal of the *existence* of a class of mankind to one who is interested in their continued life, but the surrender of the varied his-

tory which constitutes the happiness of each, to one who looks upon his duty towards them as one of routine and not of personal interest, and who is unstimulated by public observation: and this routine view of the case is, I fear, all that we have any right to expect from a large proportion of those who have the charge of the insane.

In saying that such arguments are obsolete, I am far from imagining that we are approaching perfection; but I do believe that the cause of high moral truth has gained a hold on society which we have occasion to rejoice at, and should endeavour to foster, not seek to depreciate. And, let me add, not as condemnatory of others, but to vindicate my own position, that though I know we must seek to employ "the wisdom of the serpent" in rendering our efforts at good appreciable and practical, we are bound to follow a high standard in all that we do, and not to be content with a low one. It is needless to say that "this truth will never be universally recognised," and "I do not profess to be better than my neighbour:" these modes of argument may be plausible, but they will not stand the proof in the hour of *our own greatest need*.

Again, it has been urged that the position in which I would place the officers of private asylums would be one of such subordination, and subject to such surveillance, as would render it most disagreeable to many honourable minds. I would ask such a disputant whether of the twain is the most disagreeable to the feelings of a gentleman,—to be acting under subjection to competent authority, and freed from liability to suspicions and charges, or to be independent, and in consequence subject to aspersions and suspicions of a most unwarrantable nature. The changes which I suggest would drive the proprietor and medical officer somewhat into the condition of a government official,—subject certainly to superior or general officers, but very far from incurring odium or degradation on that account. What would be lost in independence would, in my opinion, be more than compensated for by a position of

greater credit. I do not, however, care much for this argument one way or the other, for my conviction is, that in these matters the good of the patient, and that alone, should be considered; and my belief is, that no need of competent men to conduct the affairs of private asylums would arise from such reforms as I propose. Persons long accustomed to the old régime would of course dislike a change, but this must be expected in all circumstances of a similar nature.

A sketch of the articles.—To assist in effecting the removal of this civil responsibility from the officials of asylums to the public commissioners, I urge in the following chapters:—1st. That the inspectors should be made physically capable of possessing a thorough acquaintance with the wants and habits of the patients. 2nd. That they should publish reports on licensed houses of a nature so specific and elaborate as would enable the friends of patients in want of an asylum to know more of the good and bad of a house than they at present do, before they commit their relatives to one. 3rd. I endeavour to press on the attention of the public some of those points of detail in the economy of a house which appear to me more urgently than others to require attention: such as the education of attendants, &c. 4th. In the Appendix I place an article which has already appeared in the *Psychological Journal*, upon self-supporting private asylums, for those who cannot afford the high prices of private establishments. I would here observe that since this article has been written and printed, the subject has been much discussed by those interested in the matter, and that it has been thought it will be better to raise a sum sufficient to meet the first liabilities in starting the scheme, to leave the house when full to its own resources, and thus allow it to become self-supporting at a rate of payment averaging fifteen shillings a week per head.

To give a brief abstract of the scheme, it is proposed to open a house capable of holding fifty inmates, including chronic

cases; to give these inmates *private rooms* and all the conveniences and comforts of a private asylum; to have a resident medical officer and a matron; and to require payment from each inmate ranging from half-a-guinea to a guinea a week. It is calculated that a sum of about £3000 would be necessary to meet the liabilities of the first opening of this house, and the chances of its filling but slowly. Those interested in the scheme believe that if this sum were guaranteed it would have a fair trial, and would, at the end of a few years, be so firmly established as to require no more nursing at the hands of charity. It should be observed, that in the provinces an asylum of this nature has already been established on a large scale; the chief difference between the two being, that the prices in the asylum referred to have a much larger range of inequality than that now proposed. Schemes also of a similar description are receiving much support in other quarters. At Highgate, the Asylum for Idiots is able to be self-supporting at about 15s. per head, vide Commissioners' Report, 1851, page 34. The chief argument which has been raised against the plan is, that already many private asylums are open for patients at fifteen shillings per week, and that, therefore, a self-supporting one is not required. This reasoning would have much weight were it true that proprietors could give *the same description* of accommodation as that proposed, could ensure the absence of paupers, &c., and obtain a profit by their patients; but I do not imagine that this is contemplated by them as possible. The project must, however, be allowed to grow and develop itself without any unnatural forcing, and this I hope that it will do. All that I would now say is, that I trust, when a scheme has been fully matured, it will receive due support from all those who are interested in the wants of this class of the insane.

ARTICLE I.

ON IMPROVING THE CONDITION OF THE INSANE BY AN INCREASED
INSPECTION OF PRIVATE ASYLUMS.*

THE matter which I would now discuss affects not only the happiness of the patient, but the honour and serenity of mind of his medical advisers : *I allude to a sufficient inspection, by those in authority, of private lunatic asylums.*

There are lying before me at the same moment the two documents from which I make the following extracts. They both of them interest me, because they touch upon matters which have weighed much upon my mind. The first awakes my sympathy, as being the work of honest men endeavouring to advance the interests of the insane in a bold and fearless manner,—and I say this, notwithstanding my belief that many of their ideas are impracticable and utopian. The second carries with it no weight, as being the production of an anonymous writer ; and its general tone does not excite my sympathy, except in the matter of the inadequate nature of the present inspection of asylums. Of each I must say—το μὲν ὀρθῶς εἶπε, το δ' ἡμαρτεν.

The first is an extract of the alleged Lunatics' Friend Society, containing a summary of suggestions for additions to the law of lunacy. Amongst many other matters, it states that nothing but a weekly or fortnightly inspection can be adequate to prevent the abuses which still exist in private asylums ; it goes on to say—"nor can any less frequent inspection do efficient justice to all parties concerned in the detention of persons alleged to be insane." The summary, moreover, urges that these inspections should be conducted by persons living in the neighbourhood.

* Reprinted from the Medical Gazette, October and December, 1851.

The second extract is from a letter signed "E. B.," and published in the Provincial Medical and Surgical Journal (Oct. 1, 1851), in which the writer complains of the inquisitorial nature of the visits of the Commissioners of Lunacy—of there being no appeal from their decision—of their being utterly unable to acquaint themselves with the habitudes of the patients, however long their visits may be; and it ends with these words—"I presume to observe, that the law establishing the Commissioners of Lunacy is neither useful nor can be useful; it often promotes strife, it often engenders bitter feelings," &c. &c.

I agree with the statement of the alleged Lunatic Society in thinking that an inspection of private asylums approaching in frequency to what they demand, is necessary to meet the evils to which private asylums *are prone*. I say, in consequence, that the present mode of visitation is unequal to the work intended, and cannot do justice to all persons concerned—proprietor and commissioner, as well as patient—till it is rendered more adequate to its work. But I repudiate, on the other hand, their theory that the inspection should be conducted by ordinary neighbours, however respectable their class; for I believe ordinary neighbours to be incompetent: "*ne sutor ultra crepidam*." I say, instead of this, increase the number of Commissioners. If they are the shepherds, let them be equal to the wants of their flocks; if they are the supreme authority—the "star-chamber"—and proprietors, medical officers, &c., are to be their subordinates only (and I rejoice in this last fact as the only healthy and safe mode of proceeding), let them obtain the confidence of their lieutenants by being in a condition to prove their competency, by physical power as well as moral intention (which latter they have), and all will go well.

I agree with "E. B.," when he complains that the present board is inadequate really to know the habitudes and wants of the patients. Will the Commissioners themselves differ with him on this point? But I differ from him when he desires to

do away with the board, *as I look upon it as the great antidote to the evils to which the private system is constitutionally and of necessity prone.* I would say to him, increase the remedies in proportion to the exigencies: "*Tu ne cede malis, at contra audentior ito.*" Do not attempt to ignore the exigencies and remove the remedies. If you have had any experience of the conduct of asylums before and since this board has been in operation, do not attempt it; humanity, common sense, ordinary business-like habits, say No! And if these appeals did not speak thus to you, the convictions of an enlightened age would render your attempts abortive.

I differ from him again when he calls the board a star-chamber; for I know by long experience that its members are freely open to reason, kindly disposed to fairness of judgment to the best of their power, and a body whom I should wish to meet every three weeks rather than every three months, because they are the surest relief amid those difficulties which must continually oppress honourable minds. I differ from him again when he looks on their visits as promoting strife and engendering bitter feelings, for my own experience has made me look to their visits as appeasing difficulties; and I can say this, notwithstanding my conviction that their judgment is sometimes inaccurate, and notwithstanding my acquaintance with the fact that, owing to the paucity of their visits, superficial matters of comparatively small moment will often excite that interest and attention which greater matters, more hidden from view, fail to do. This, however, is only one of the evils which makes me say again, if they are the shepherds, let them be equal to the wants of their flock.

And what are these wants? What ought we to expect of the Commission? Is it to be a body of men who will listen to complaints only when they are expressed, or able to be expressed; or a body competent to seek out and detect the infirmities they are bound to remedy? Surely, in the guardians of the insane, who often will not, and more often cannot, speak

for themselves, the latter degree of care, and not the former, is requisite. Let all those who feel assured that medical proprietors cannot any longer occupy at the same time the place of judge, jury, advocate, and prisoner at the bar,—that they must not, in short, be their own judges,—let all who feel assured that the Commission of Lunacy has done good service, and that it could do much more, and meet the exigencies of the case if it were only equal in physical force to these exigencies, join in endeavouring to increase this board.

But I will argue this matter more in detail, in the hope that, by the statement of the experience of many years, I may influence those not conversant with the bearings of the question.

What sort of supervision ought we to expect of the Commission in Lunacy? There is, I presume, in the present day, no occasion to advocate the necessity of placing the supreme care of the insane in disinterested hands; and this especially in the case of private asylums. Intelligent philanthropy has stifled opposition on this head. But the question which may be, and no doubt is mooted, is, what sort and degree of inspection is rightly to be expected in private lunatic asylums? If we settle this, no doubt all will agree that the workman must be equal to his work,—the Commissioner to what he undertakes. What, then, is to be expected of the Commissioners by the public? Some (not much acquainted with the peculiar nature of a Commissioner's duties) may be content with this analogy viz. that he occupies the place of a general over his soldiers, or rather an inspector of schools or of prisons over their several departments (proprietors and medical men holding the place of subordinate officers); that all that can be expected of him is to look to general interests, and to entrust all matters of detail to those under him. This loose mode of argument might do pretty well, were the circumstances at all analogous. But are they so? In the army, common interests unite, and similarly actuate the superior and subaltern officer. In national schools and prisons,

private motives are comparatively inadmissible. *So far considered*, the inspection of *public* asylums might have some analogy to these instances, but surely not that of *private* asylums. True, common interests likewise unite the Commissioners with proprietors of sensitive and refined minds—namely, philanthropy and the good of the insane. But how is it in the case of those superintendents who are influenced as much (if not more) by private gain as general philanthropy? The interests of superior and inferior officer are now opposed, and consequently a very different sort of inspection is required. I would be far from saying that we cannot in very many cases trust to the full exercise of the high motives just alluded to. I am far from thinking that proprietors, &c. are not as capable of being actuated by high motives as any other body of officers similarly circumstanced; but the dissimilarity of their circumstances has compelled the public to come to the conclusion that a special guard must be raised against the operation of the less worthy motives, and that, for safety's sake, we must provide in distrust when self-interest is so unavoidably opposed to general philanthropy.

But, besides the difference of position between the various officers in the cases above named, the difference of condition of the body on whom they are to act makes a clear distinction: a soldier, a prisoner, or a scholar, notwithstanding their subordinate state, are capable of making an appeal to the higher officer in one way or other; the insane, on the other hand, often cannot, and often will not, speak for themselves.

Is there any one, however, who has thought on these matters, who would be content that the relation between a Commissioner and a patient should only be the same as that between a private soldier and a general officer, or a scholar and an inspector of schools? Has the enrolment of the one the same cause for anxious investigation as the confinement of the other? Does the continuance of a soldier in the army, or a scholar in a school, require the same heedful watching as the continuance of a patient in a lunatic asylum? Does not the most common obser-

vation tell us that the judicial office is constantly required in the one case, and seldom in the other, and *that a Commissioner must be something more than a general supervisor.*

But I do not arrive at this conclusion from general theories, but from constantly occurring experience. I will state, therefore, a few of the occasions where a general supervision does not answer, and where a much more frequent visitation than at present occurs is needed; and will not only ask the public whether they esteem it to be needed, but ask them which needs it most—the patient, the medical proprietor, or the Commissioner himself?

1. *Frequent visits are necessary to free the minds of patients of injurious anxiety.*—It frequently occurs that a patient, insane only on a few points, and who can argue very well on most subjects—who is clear-headed enough to know that a private gain is obtained by the proprietor out of his residence in the asylum—cannot be persuaded that justice will be done to him, and that he will be released as soon as his discharge can be permitted with any propriety. No amount of kindness or reasoning on the part of those connected with the asylum can remove his suspicions. And are we to wonder at this, when the patient knows not into whose hands he has fallen, but knows the circumstances of his residence; and more than this, when the patient cannot believe himself to be the least ailing in mind, and thinks (as most do who are not getting well) that conspiracies are raised against him, and that he is the victim of injustice from the first, distrusting friends and medical men alike? Under these circumstances, it is often very useful to be enabled to say—“The Commissioners will soon be here; you know they are a board who can be influenced by no motive but justice to all: believe confidently, therefore, that you cannot be ill-used with impunity.” Upon this, patients cling to the prospect of seeing them: they *do* feel in some degree assured, and, in consequence, trust their medical men and attendants more, and by degrees obtain that ease of mind so

necessary for a cure. I grant that nothing will satisfy some ; but many are capable of appreciating the merits of the case. Day, however, after day passes by, and no Commissioners come : then begins the question, when will these my judges be here ? The long delay occasions anxiety and doubts most injurious, not only to the patient's mind, but to the medical man's character for truthfulness. Three months may easily pass away ; and more than this, the interval of five months may not be brightened by their long-desired visit. The patient may come and go easily without seeing any Commissioner, and often does ! Is this satisfactory, when the Commissioners are esteemed the ultimate judges, and ought to be so ? Would the Commissioner himself feel more satisfied than the medical man, could he know the anxiety his delay had occasioned ? And yet it is not his fault : he is bound to visit only four times in the year, and it is very desirable that these visits should be made at very uncertain intervals : thus three months *must* occur between some of the year's visits, and often four, five, not to say six months, may occur. It may be said by some (and especially by those whose great object it is to keep up the tradition that mysterious codes of moral discipline are necessary for the guidance of those who treat the insane), that it is very imprudent, on the part of a medical officer, to argue in this way with his patient ; that quiet reserve is necessary ; that reasoning is well enough for the sane, but not for the insane ; that there is a broad and distinct line between them ; and that those on one side are incapable of appreciating that which those on the other side desire so much, and take so much consolation from. But I repudiate such doctrines in treatment, when they are expressed as a general rule, however much I may see their necessity occasionally. Great discretion, and the most clear distinction of the individual characteristics of each case, is required on such subjects as these ; and, for the most part, common sense is a far better guide than would-be learned dogmas. The more we advance really in the study of the insane, the more we shall

find out the absurdity of precise definitions, and the useful nature of common sense, humanity, and moral influence. The line between sanity and insanity—between those inside and outside of asylums—or rather between those who are, and those who ought to be confined—continually grows more faint as we advance in the investigation of mental phenomena; and I attribute the greatly increased ratio of recoveries in the present day in great measure, to the adoption of such comprehensive views, and the surrender of narrow-minded theories. Ask those who have gone through the ordeal, if they do not remember, as one of the bitterest circumstances of their lot, the being placed out of the pale of those rules which control their fellow-creatures; and ask them whether the fact of being treated with common sense and kindness, as if they were still moral agents, has not been one of the brightest and most curative points of their sad history. Unrestricted confidence between patient and physician may be often injurious, I grant; but the contrary extreme is far worse.

We are but still making strides out of that deep chaos of ignorance and gloom amid which our ancestors wandered when they sought to relieve insanity. True, we have escaped from those dark scenes,—when the absurd theory existed, that chains, darkness, and the scourge, were necessary for the relief of the *fully* distracted mind, though sympathy and every moral relief was still permitted and deemed essential for *half*-distracted minds,—and when, worse still, this line between these two classes was settled by some grave young physician whose mind was irremediably prejudiced by mysterious dogmas;—true, we can all of us thank God that we are free from those scenes of living burials, so deep, so far removed from the hope of any resurrection to happiness again;—true, we can hardly endure to contemplate such awful ideas now in this age of light—that even in tragedy we could not endure such hopeless misery—that our sympathetic eye turns sickening away, unable and unwilling to penetrate the gloom;—but it is also true that we cannot be esteemed really free from the paths of

ignorance till we recognise the effect of moral agents sufficiently, and, forgetting all rigid lines of demarcation, look on insane phenomena as full of varying degrees, and differing from the phenomena of the sane by a most imperceptible gradation. But I must apologise for this digression, and proceed with my argument.

2. *Frequent visits are necessary to free the mind of the proprietor in doubtful matters of discharge.*—To give a second case indicating the necessity of more frequent visits, it continually occurs that the medical adviser has a *bonâ fide* desire for the judgment of the Commissioners. Such a case of perplexity as the following arises, wherein only a perfectly unprejudiced judge can give a satisfactory opinion:—A patient gradually recovers from a very insane condition, and continues pretty well for some time: there are a few points in conduct and conversation which show that health of mind is not fully restored; but still his continuance in a lunatic asylum, amid the distressing scenes of acute insanity, is, to say the least, very questionable. The medical proprietor can hardly avoid feeling biassed one way or the other in this dilemma; for the points of the argument before him are these:—I doubt whether the patient should remain; I know that it is for my own advantage that he should remain (these two facts must almost of necessity arise before his mind—it is useless to pretend that the second is wholly forgotten); but the third point is very differently settled by different minds; for the sensitively refined mind says at this juncture, “He shall leave me;” while the less refined man says, “I will keep him.” Both verdicts are biassed: the one dreads self-interest too much—the other dreads it too little. It will be said, the good and upright man should neither give way to one or the other phase of feeling: he should leave out of consideration all matters except his patient’s good. This is no doubt the right course to pursue, and *what all good men aim at*; but it is utopian to believe that it generally exists with any degree of real meaning. Much more probable is one of the

two conditions just given ; and of course, in proportion as men's minds are not sensitively refined, the verdict of detention will arise. This may appear a strongly drawn and improbable dilemma, but I believe it to be a very common one ; though the habits of thought in many people have become so habitual, and so unconsciously arrived at, that many of their own motives and impulses escape their detection. In such a case, then, as this, the arrival of the Commissioners is a boon, and their prolonged absence a source of trouble, which is felt in proportion to the sensitiveness of the superintendent.

3. *Frequent visits are wanted to settle matters of unavoidable disagreement between patients and their ordinary superintendents and advisers.*—Besides the question of discharge, questions about kindness of treatment, the degree of liberty permissible, and other matters of daily conduct, may sometimes arise, and will arise, very probably in proportion as superintendents show an anxiety to be kind : for, paradoxical as it may seem, patients will continually, while they appreciate the kindness, take a malicious pleasure in not only trying to manifest indifference to kindness, but in making charges against a superintendent for his very kindness. They are singularly like capricious children in this respect, and cause much doubt and anxiety to the minds of those who have them in charge : and however desirous such persons may be to rule by good will, they are driven to the necessity of hiding a kind intention under the appearance of such firm resolution as may sometimes bear the aspect of sternness. In such cases, where effort on the part of the superintendent only increases discontent, and where nothing apparently will produce satisfaction, it is a relief to him to refer the matter to the Commissioners, while he continues the course which he judges to be best : and it is far better that he should do so ; for it is good for the patient that he should feel that the judgment of the superintendent is not easily subject to change, or his authority to be overturned.

Should any proprietor or superintendent feel that such questions

do not arise in their case, and lay any flattering unction to their soul on that account, I should feel sorry for them rather than the contrary; for I believe that such difficult circumstances as I speak of may be easily avoided by a system of selfish reserve with patients, by not allowing them such a favour as even to listen to their complaints, &c.; and I believe such circumstances are increased by an anxious desire to do all that can be done for a patient: but whilst I believe this, I cannot but hold that more danger to the patient arises from the too severe than the too indulgent system.

Such are a few of the evils which arise out of the present inadequate mode of visiting; and one of the peculiarities of the case is, that these evils are felt the more in proportion as the superintendent is anxious to fulfil his duty rightly. It is comparatively easy to avoid the reproof of the Commissioners, and escape animadversion from without. Nothing but direct misconduct would ensure the one or the other. Indeed, direct misconduct would not ensure the latter and more dreaded evil (public animadversion), unless accidental circumstances compelled it into notice. It is difficult, however, to escape free from the challenge of conscience; and, as matters are at present, I believe that many men of refined feelings would refuse to undertake the proprietorship of private asylums, unless the circumstances of family connection, &c., almost compelled them into this course. There is something so terrible to a sensitive mind in the possibility of his motives being misinterpreted, and his actions misjudged,—and that, especially, in a case where all the world are inclined to suspect him, and where his less conscientious colleagues often deserve suspicion,—that no wonder he withholds his steps before he enters upon ground which has so much the nature of a quick-sand; and thus the event is, that those who are really best suited to this anxious and responsible work are excluded. On the other hand, could he feel that he had a competent superior to rely upon, for freeing him from aspersion, and assisting him in difficulties, he would no doubt

feel the ground sufficiently secure to invite him. We read that rulers are not only to be a terror to the evil-doer, but also are for the praise of those who do well ; therefore, however much we may feel that the comfort of a good conscience is sufficient, we are authorised in saying that few things are more encouraging to a proprietor or superintendent, than to hear his work duly appreciated and justly praised by those placed over him : but this cannot be fully realized until he knows them to be competent judges. This is the case in all departments, but in the case of the insane it is peculiarly felt. For, owing to popular agitation, popular suspicions, and lack of confidence on the subject of private asylums, praise and blame must bear almost a morbid degree of importance. A person may so easily be grievously injured without pity, and so grievously injure others without detection, that until more healthy principles are instilled into the system, fruits of morbid growth must appear.

Remove the opprobrium from the associations of a mad-house, if you wish the care of the insane to progress ; make this branch of the profession a channel agreeable to men of the highest sense of honour. Do not adopt the short-sighted policy of saying that mad-houses must bear the opprobrium, if they produce the profits. Do not thus demand a secondary class of men, and refuse the highest class. Do not trust to the fact of there being honourable names enrolled in this branch of our profession : for surely it is beginning at the wrong end, that honour should be shed upon a work by individuals engaged in it, rather than that the work should be worthy to confer honour on the individuals.

4. *Frequent visitation is necessary to free the mind of the Commissioner of those inaccuracies of judgment which rare visitation engenders.*—But before I conclude the narrative of evils arising out of rare visitation, I will mention one, which these reflections on the importance of praise and blame naturally suggests, and which affects the relation between commissioner and superintendent, rather than the patient, although

the relation between patient and commissioner is by no means free from being injured by it. This evil is of a general nature : it concerns not the committal of, discharge of, or conduct towards, a patient directly ; it is not likely to arouse public feeling, as it has no heroic terrors enveloping it ; but it is a petty annoyance, which it will be well to have removed : I mean, the fact that rare visits cause a certain amount of inaccuracy and superficiality of judgment on the part of the Commissioner in matters of detail, which is always undesirable, sometimes annoying, and entails an appearance of caprice which is far from intended, and cannot be avoided. Take the following example of the results of a general and inaccurate visitation :—A large asylum is kept in good order—clean, comfortable, and suitable to the patients' condition. The Commissioners visit it, say in January ; they remark upon its cleanliness, &c., very satisfactorily. In February the superintendent thinks he will try to raise the whole status of the place ; it is very large, he can only begin with a part ; this part is completed in March : the Commissioners come again, are struck with the superiority of the renewed part, their eye falls upon the part not yet renewed, and the consequence is, a remark (kind and unimportant most probably) that such rooms want attention. The superintendent cannot of course do otherwise than take the kind remark in good part, but still he feels it arose rather out of the contrast of the old and new, than from any real imperfection ; he feels that the judgment in the two cases did not bear a just proportion ; that he had almost better have left the house as it was. However, his own inherent sense of what is right is his guide, and he goes on in his undertaking. Now, though no material harm is done, still it would have been very advisable that the Commissioner should have been in the position to sympathise with the superintendent more ; in other words, to really understand all the bearings of the case. The Commissioners are not in fault, the superintendent is much less in fault ; the mishap arises from the paucity of visits, and want

of accurate observation,—that accurate observation so desired by the well-disposed, so stirring to the indifferent, and so needed by the neglectful.

But this inaccuracy of judgment, or rather, insufficiency of acquaintance with the merits of a case, does not fail to injure the Commissioner in his relation to the patient. For when visits have had a long interval, those charges so frequently noted down against proprietors, those threats of legal vengeance, &c. which none can avoid, change their course, and are now directed against the Commissioners: indignant remonstrances about this long neglect (which is often morbidly thought to have a personal application) are heard, and contempt for their judgment, when the medical adviser or others refer to it, is not unfrequent.

I shall not on this occasion trouble my reader with any more cases of the evils of rare visitation, as I fear I have already occupied too much of his attention. But, before I conclude, I would have it observed, that, in this narration of the evils of rare visitation, I have not alluded to any of those *possible* evils which possess much more dramatic effect, and are far more alarming in their character, than those which I have mentioned—I mean the evils of direct misconduct, cruelty, &c., on the part of proprietors and superintendents. I have purposely abstained from them, as my wish is not to shew what *might* result in the case of evil-minded men, but what *must* result in the case of men with the best intentions. I abstain from such discussions, because I believe (as things are at present) that the public are excited more than enough with possible evils,—that such bodies as the alleged Lunatics' Friend Society do not allow me opportunity to speak on such subjects; because I believe that the increased enlightenment of the age,—the happy circumstance of neglect and misconduct being so unfashionable as they are,—the fear of public indignation,—and the degree of inspection which already exists, are arguments sufficient to render gross misconduct infrequent and impossible, even amongst

those who cannot appreciate any high motives of action. But even if this were not the case, and if gross misconduct did frequently occur, I would not dilate on such arguments for increased visitation, for they would be too apparent to make it necessary to expatiate upon them, and foreign to my purpose in writing these remarks; the great object which I have in writing them being, to ensure the best treatment for the patient, and to free honourable minds from unjust suspicions.

I will, in conclusion, observe, that when I demand that the Commissioners should be in a position to be conversant with the habitudes and wants of each individual patient, I do not require by any means so much as may at first sight appear. For it is well known, that the vast majority of those under their charge are fatuous and imbecile persons; that out of an asylum of 50 insane, there are not probably above 8 or 9 who would require much attention; and that to expend much on the remainder would be to throw it away altogether. And thus, though many thousands may be under the charge of our Commissioners, not above twice as many hundreds would be objects of much individual care and anxiety. Now this fact makes the case of complete supervision, and accurate acquaintance with the details of the work for which the commission is generally understood to be responsible, possible, if only an enlarged staff was organized.

I will conclude these observations with this remark,—that this increased visitation which I have proposed, this taking of the legal responsibility incurred by the detention of patients in private asylums off the shoulders of the inferior officers, and placing it on the shoulders of the superior, will do good service in that it will enable the medical officer to attend to his own business without interruption and diversion of attention. As things are at present, the mental physician is as much of a lawyer as a medical man,—he has to think of his position in a court of law, as much as of the cure of his patients. The continuance of this the physician ought not to desire; and

should his love of display, and interest in dabbling with other professions, cause him to desire its continuance, let him remember that, among other things, the public are tired of his presence in Law Courts, and wish him well back again at the bedside of his patient. His opinion must, of course, be taken as regards the consignment and discharge of patients, &c.; his evidence will, of course, be required in litigated cases. But it will be good for all parties, when his civil responsibilities weigh less upon him, and his professional and moral occupy as much as possible his sole attention. Surely, to be watching the use of remedial agents—to be raising the hopes of his despairing patient by kindly sympathy and firm control—to be exercising the duties of blessed charity in that course of life in which he is placed, is far more the duty of the physician than to be acquiring readiness and confidence under cross-examination, and mixing himself up with the difficulties of legal life.

PART II.

IN the first part of this paper I gave many reasons for increasing the visitation of private asylums. The question, however, is full of important matter, to which I have not alluded. I will therefore trouble my reader with a few more statements before I conclude my observations on this subject.

Frequent visitation will afford a reference to a disinterested tribunal a short time after a patient's first confinement.

Amongst other benefits of a visitation occurring every three weeks or every month, the fact that a patient would thus enjoy

access to a tribunal biassed rather in his favour than the contrary, a very short time after his consignment to an asylum, is perhaps the most important of all. For it must be generally acknowledged that, in a well-conducted house, a patient suffers more on account of his loss of liberty, the opposition to his will, and the friendlessness of his position, at the commencement than at any future period of his confinement. I could bring forward many instances of this; but these would be useless and tedious when the common-sense of the matter is so apparent.

For what is the state of affairs? When the patient first arrives he knows nothing, probably, of the character of the house, and of its superintendents; he comes a stranger among strangers, with every association and instinctive feeling prejudiced against them. In former times he has shared very probably in the national horror against a madhouse; it may be that insanity inherent in the family has increased this dread. He may have seen one, as it were, in the distance, all his life; and, when he has thought upon it, he has clung to his home the more tenderly, his hearth has appeared to glow the more brightly, and his family to be more beloved than ever; while the dim dread that by fell disease he might be deprived of all these, may have often cast an ominous cloud across his mind. But now what has suddenly happened? Where is that which was a dim vision—that which was wont to hang so lurid in the distant horizon of his life? It is a reality! it is upon him! sitting like an incubus, oppressing him in a most palpable form! And superadded to the already overwhelming thought that he is mad—that he is in a lunatic asylum—he finds that those he has the most loved and trusted have been the instruments, though the most unwilling instruments, of his consignment. It is of no avail now to argue that they did it for the best; for, though some few may appreciate and believe it, the senses of most patients convince them in a contrary direction; and, not knowing that their senses are erring, they do very naturally argue, “you cannot persuade me out of my senses.” All this

is bad enough ; but we must remember that all this is super-added to the burden which sent the patient mad. How terrible the strain must be ! Such considerations as these are the arguments which rightly counterbalance the advantages of lunatic asylums, and which make it so very important to try, in many cases, other measures before they are had recourse to. What *must* be the state of mind of many a patient so circumstanced, before continued kindness and sympathy on the part of those about him have disarmed his suspicions and anxieties ? He would probably laugh in bitterness of spirit if you told him of the humanity and philanthropy of proprietors ; for he is not only violently prejudiced against them, but he knows also that, when any matter becomes a regular business, hearts are prone to grow tough, and tenderness is wont to be esteemed poetry.

Now I would say most distinctly that, at this sad commencement especially, a visit from kind and intelligent Commissioners may prove invaluable. The assurance conveyed by the sense that they will watch over and constantly visit him may often be of incalculable comfort to a patient. And the morbid suspicions entertained against those concerned in his detention may be often thus cut short.

But it must be borne in mind that I by no means imagine that all this good will be gained for all, or even for the generality ; for I well know that the suspiciousness of the insane is too often beyond all reason and argument, even amongst those who are capable of appreciating many external truths, and who appear to be but partially insane ; while to imagine that any moral means can reach the complete maniac—that any abstract reasoning can apply to him whose attention is wholly fixed upon the creations of his phrensied imagination—would of course be simply absurd. But, be the number small who are capable of appreciating the advantages of having a disinterested referee, the intensity of their need makes up for their numerical deficiency.

I hope that in speaking thus of the comfort derivable from

the early presence of a visitor, I by this means—should not appear to make little of what on the part of the medical and other attendants on the insane, a kindly tone, a sympathising glance (that page of nature more full of meaning than volumes), a delicate expression of feeling, and cheerful expression of hope can do ; for these things will do much and act electrically on those who are keen to appreciate kindness, and can by instinct divide the real from the assumed.

But after a few weeks, the visit of the Commissioners, though still most important, cannot effect so much ; for by this time the superintendent, the medical advisers, and others, have had good opportunity to show their genuine good will, if they possess it ; and the patient may have learnt to trust in the just dealing of those about him. He may very probably still think them in error, but the state of mind which supposes misconception, and that which suspects cruelty and a wish to make gain out of his sufferings, are very different. Patients will often say, after some acquaintance, “ I believe you mean rightly ; I do not accuse you of want of good intention ; you are only all of you the victims of misconception.” Some even will say, when they tell you of their phantasms and other delusions, “ I know all this must appear madness to you, for you are not initiated as I am ;” but the state of mind accompanying such remarks is anything but hostile, or calculated to be so injurious to a patient as that which suspects common honesty of purpose.

An early visitation after the admission of a patient is moreover of peculiar advantage to all concerned in his detention. For at this time many such anxious matters as the following press, and peculiarly require a disinterested referee. Thus it may be desirable that a patient should not see his friends for two or three weeks at least. Objections raised on this account instantly excite the suspicions of the patient, and it is possible that the friends may not acquiesce in the propriety of this decision. At such time as this some disinterested third party—some fair and good judge who might support the opinion of

the medical proprietor—would be most useful. I do not mean to say that such an hypothesis is often verified, for the friends of patients are generally full of reliance on the opinion given to them; but still such a difficulty as this may and is more likely to occur during the first weeks, while the superintendent and friends are strangers, than when they become acquainted with one another.

Commissioners, moreover, thus frequently visiting, could take the responsibility of opening letters, &c., upon themselves; a task peculiarly disagreeable to any one of refined feelings (if he is not a perfectly disinterested party), and yet very often necessary for the safety and good of the patient, and that especially during the early stages of his residence.

All the questions which arise between a superintendent and a patient are peculiarly felt at first residence in a well-conducted house. Among others, that of the degree of liberty admissible, of the degree of restraint necessary, of the prospect of release, of the meaning of what appears to be a mysterious circumstance in the matter of the patient's confinement, &c. A question, for instance, will often arise at the commencement of the patient's confinement, as to the propriety of telling him who were parties to his admission into the asylum, what relative gave the order, what medical men certified to his insanity and fitness for confinement. Such a question as this, to a fair-judging medical man, is often full of anxiety. I freely grant that it is easy enough to say, "I cannot tell you, I should transgress the bounds of my position if I did," or to answer in some other trite, though not the less irritating form. I grant, moreover, that in many cases it would do more harm than good to explain the whole truth in this matter. I grant that it is one of the most trying points of a medical adviser's judgment, and a responsibility which he *must* take upon himself, to settle whether the explanation that a patient's immediate family were the instruments of his detention would assure and comfort, or annoy and exasperate him; but still it would be a great relief

to have the judgment arrived at strengthened by the opinion of a competent third party, and its truth attested by an unbiassed supporter.

An additional reason urging us to adopt every measure which is calculated to allay all reasonable ground for suspicion in our conduct towards the insane, is the fact that morbid suspiciousness forms one of the most distinctive characteristics of the insane.

In speaking of the necessity of an early visitation as a comfort to a patient after his admission to an asylum, I have often referred to the morbid suspiciousness of the insane. Now it is a circumstance worthy of remark, *that the insane who are the victims peculiarly of this mental imperfection should be thrown amongst circumstances which would excite suspicion, even in the mind of the sane.*

The extent to which this morbid suspiciousness exists, may not be fully known to those who have had little experience in the treatment of the insane. This consideration, and the fact that it so frequently lies at the root of insane phenomena, induce me to dwell upon this subject. Men generally imagine that definite delusions constitute the distinctive characteristics of an insane mind. These are no doubt the fully developed products of a morbid mind, and when they exist to an extravagant extent* we can no longer doubt as to the insanity of those who exhibit them. On this point all reasonable persons will agree. But in proportion as these delusions are definite and urgent, may the sufferer be said to be out of the reach of moral influence.

* I say extravagant extent, because it is little known how frequent delusions of less activity are. It is little known what unreasonable views on many subjects many who are considered sane hold. The delusions are comparatively harmless, they lead to no overt act, and bear probably, if they are exhibited, only the appearance of what are termed eccentricities. And to be fastidious, all in a certain sense who do not exercise a sound judgment, and who give undue importance to any matter, may be said to be deluded. This, however, is hypercritical.

There are, however, periods which we must believe to be stages of an unsound mind, which comparatively escape the notice of superficial observers. To these, I would draw especial attention. It may be observed that in many cases, long before definite delusions occur, and probably for some time after they have disappeared, there lurks a peculiar condition of mind, which is chiefly characterised by the morbid suspiciousness above alluded to, and the general results of this suspiciousness, namely, extravagant conduct. We are, I believe, justified in thinking that this condition acts frequently as a substratum to distinct delusions, and that it has, as it were, a wider basis over the mind than the delusions; in other words, that it is more persistent, beginning earlier and fading away later. Delusions, moreover, seem to grow out of this state. But this state also *appears to be more subject to moral influence* than the fully developed stage of delusions. To use the words of metaphor, it would seem that that convulsion which is shaking the soil which has hitherto borne the good fruit of a sound mind, has not at this stage completed its work, and that the new soil producing the evil fruits of delusions is not yet formed; that, therefore, means which may be available for good during the earlier stage, become useless at a later period. This state, so characterised by suspicion and consequent changes in conduct, may be esteemed to be one when a vague general delusion or uncertainty about everything is hovering over the mind, and when all the ordinary bounds and bulwarks of a vigorous mind are fading away, but are not wholly gone. How very important, then, it is, for this stage particularly, that measures should be adopted which would allay all reasonable grounds for suspicion. Instead, however, of being careful on this matter, we have been in the habit of fostering and giving reasonable cause for suspicion.

An increased inspection might be the means of giving satisfactory information as to the comparative value of asylums.

Before I conclude the enumeration of advantages likely to arise out of an increased inspection of asylums, I would briefly allude to one indirect though not less important benefit which might arise therefrom. It is this—namely, that the increase of the Board required for this increased inspection might enable the Commissioners to aid in stopping the degradation to which our profession may be exposed by any persons connected with private lunatic asylums who may have recourse to conduct unbecoming their profession and condition as gentlemen, as the best means of establishing their position. For, with an increased staff at their disposal, is it not possible for the Commissioners to publish reports as to the state of many matters of detail in the various asylums under their charge, from which the friends of patients in search of respectable and good asylums might obtain satisfactory information? As things are at present, there is a great desideratum on this head. Friends of patients have but little means of obtaining advice, and are too often likely to be influenced by the conduct just alluded to. In some cases, they may take the opinion of their ordinary medical adviser; and, if he be a respectable man, it is probably the best course at their disposal; but even *he* is little able to know the comparative merits of asylums, even if his mind is unbiassed. The only body who can know anything of their comparative worth are the Commissioners themselves: they only have access to all asylums, and they, in consequence, can be the only satisfactory informants to friends wishing for the best advice. There certainly are great difficulties in connection with this matter, and the Commissioners might well refuse to act as inspector and patron at the same time; for, no doubt, if they did so, unless great care was taken, much jealousy and ill-will might be engendered. But though anything like a

minute statement of opinion as to the merits of houses might be unadvisable and injurious ; upon certain facts—such as those connected with the extensiveness of the grounds, the good classification, the introduction of modern appliances into asylums, number of attendants in proportion to patients, &c.—the Commissioners might give information. On the present occasion I would only throw out a hint on this subject, as I own that it is a matter fraught with difficulty, and as I propose to comment on this matter hereafter. The question, however, of seeking to obtain position by means unworthy of our condition is one which peculiarly requires the attention of the profession, if they wish to maintain its character and rank unsullied. And I would add, that it daily becomes a more important one ; for, as we happily live in an age when monopoly and exclusiveness are dying out, so we live in an age which requires the more caution against all dishonourable practices. In former times, a class interest might watch over the concerns of their profession, from private motives, with a sedulity which we cannot expect to witness when little standing ground is left to monopoly. But in these days, when the education of all members in the profession is assuming a high position of equality, when few privileges will soon be left to any, and when intellect will represent power, it is more than ever necessary that all should strive to shield our increasing army from harm, by expelling those guilty of unworthy conduct from its ranks.

An increased Board of Commissioners better than any other remedy.—Before I conclude this subject, I would urge a few suggestions on the propriety of having an increased *Board of Commissioners*, rather than any other body, to supply the required inspection. It is almost needless to oppose the impropriety of esteeming mere ordinary neighbours, however respectable their class, equal to this work. I need but ask any one at all conversant with this disease, whether he believes that an ordinarily good and intelligent man, but one who has had no experience in the care of the insane, would be at all able to ap-

preciate their paradoxical symptoms and capricious wants. It is mere quixotism to suppose that they would be, or that the condition of superintendents, proprietors, &c., could be comfortable while acting under such tribunal. Among the qualities of mind necessary for an inspector of asylums to possess, the following four are conspicuous—humanity, common sense, freedom from all petty bias, and experience in the habitudes and wants of the insane. I place them here in the order of their importance; but, though I place experience last, it is by no means not essential. All that I would suggest by placing the other three before it is, that, if I had a friend or brother in this condition, I had rather entrust him to those who possess the first three pre-eminently, and the last only slightly, than the converse. I had rather run the hazard of the good and inexperienced, than encounter the hollow regard too often evinced by those who are termed men of experience. But this is as much as I can say; and, having said it, I must freely own that I believe the condition of all concerned in the matter would be very unfavourable if ample experience did not form a part of the mental endowments of our inspectors.

It may be suggested, why should not county magistrates, accompanied by medical advisers, fulfil this duty sufficiently? To this I would reply, that, in their own sphere (the provinces), an increase of this body might very probably suit the necessities of the case; that I believe them to be worthy of all honour and respect on account of their general position, as well as the activity and zeal they have already evinced in the provinces; but that I have had no personal experience of their efficiency; that I can hardly believe that they constitute *as efficient* a tribunal as those whose only work it would be to attend to this matter; and that, in consequence, I should be sorry to see the metropolitan asylums placed under any other authority than that which already controls them. And, on the other hand, I heartily believe that, if good additions were made to the Board of Commissioners, it must preeminently represent the qualities I have mentioned

above, both on account of the high position of their character as a body, and the experience in medical and legal matters which they individually possess. I need say no more on this subject, as I believe few would prefer the inspection of the provincial to that of the metropolitan districts.

*Upon the Additional Expense which this increase
would occasion.*

The chief difficulty which would be raised against an increase of the Board would no doubt be the additional expense thence entailed upon the country. Upon this head I would be sparing and cautious in my remarks ; for, while I feel that a medical practitioner has not only a perfect right, but a *direct call* to express himself boldly on all matters which fall under his immediate notice (and perhaps under his notice alone), he has little right to make suggestions as to the fiscal arrangements of the legislature. The question of salaries, and of the respectability and character which various amounts in salary can ensure, no doubt requires much and anxious consideration and experience. But if additional commissioners were enrolled, it is not, I presume, necessary that they should all hold equal rank, or rather, that they all should have equal pay. The present stipend of our Commissioners is well known to be on a very liberal scale. I do not say that it is a bad economy to have the highest officers in any department as highly paid as they are, but I see no reason why there should not be juniors as well as seniors, or why half the amount of the present stipend might not ensure the accession to the Board of some of the most respectable members of the legal and medical profession, and of gentlemen of birth and position in society.

The increase to the Commissioners' Board which would be necessary to ensure a visit every month or three weeks, would not be so great as might at first sight appear. For, first, it must be remembered that what I ask for is, not an increased inspection

of all asylums, but only of *private* asylums. Second, to make the visitation three or four times as frequent as it is at present, would not entail three or four times the amount of the work which the Board has at present on its hands ; for the Commissioners have much to do besides visitation, for which the present Board might still be equal ; while the additional members might give up their attention exclusively to visitation.

But I have already said enough on this head. I feel that many injurious reflections may be raised against me for making even this allusion to the public purse in favour of what may seem to be a class interest. And certainly, if the proprietors were alone interested in increased inspection, the suggestion would be simply absurd. But the public will and must think of the patients in this matter : they are a people touchingly dependent on their sane brethren for support ; they are wandering in a region where but few rays of comfort and hope enter, and are borne along on a course which has no bright horizon of hope, such as that which generally dawns on the elastic mind of the sane amid the greatest troubles. And yet they are brethren, borne along with us in the same vast river which is ever flowing towards the eternal ocean ; their bitter cries rise up, mingled with our careless voices, from that broad stream towards the heavens above them, and both the complaints of one and the insensibility of the other are registered there.

ARTICLE II.

ON IMPROVING THE CONDITION OF THE INSANE BY INCREASED
REPORTS ON PRIVATE ASYLUMS.*

Introduction.—The *special* object of these remarks is, as will appear, to provide sufficient information for the friends of patients inquiring after a good asylum for their insane relatives. But the *general intention* of this and other articles, to which this special object is but tributary, is, as I have stated in the introduction to these articles, *to make the Commissioners and other public inspectors as responsible as possible for the conduct of private lunatic asylums*, to remove all civil responsibilities from medical proprietors as much as may be, and to leave to them what is quite sufficient alone, the medical care and the charge of carrying out the details of the economy of the house.

It may be said, how does the plan you propose in this paper tend towards the removal of this responsibility? My answer is, that before the Commissioners' reports could become the important documents which I propose that they should become, it would be absolutely necessary that their acquaintance with the detailed arrangements of asylums should be much more perfect than it is at present, in order to ensure justice to all parties. The Commissioners themselves would see the necessity for greater accuracy when such a responsibility was imposed upon them; and thus that which I deem to be so desirable—namely, *a monthly visitation, or one even more frequent than this*, might be the result. As regards the merits of the proposal contained in this paper, I am free to own that many more prac-

* Reprinted from the Lancet of Jan. 3, 11, 17, 1852.

ticable modes for placing a greater responsibility on the Commissioners might be thought of. The scheme was pressed upon my attention by the fact that a great desideratum exists in the matter of the selection of an asylum, and by the natural reflection arising from this fact—viz., that the Commissioners themselves (being the only persons who could give any satisfactory or sufficient information on a matter so delicate and so subject to misinterpretation) ought to be instrumental in removing it. Should it appear, however, that the call for this sort of information is not so urgent as I represent it, I cannot but feel that such reports as I suggest would be most useful on many other accounts.

But some proprietors of asylums may still ask—What right have the public thus to interfere with our private concerns? The manifest answer is, that it is now generally acknowledged that in certain matters of private business the public have a right to interfere. For example, where a person has under his control and power a number of his fellow-creatures who are peculiarly helpless, this right is emphatically claimed and vigorously asserted. In this case the rights of man precede the rights of property. For while the cause of property may demand that business undertaken lawfully and by private compact, carried on by private energy and private resources, should be held inviolate, and not subjected to public interference, the cause of humanity demands that our fellow-creatures should not so constitute a part of this property, that their cause should be absorbed in the interest of those placed over them, and thus lost sight of. It is the influence of this principle which obliges the proprietor of a private factory to undergo a rigid inspection of his work, and a publication of its condition, even to minute particulars. No man, therefore, in a similar condition, can ask what right the public have to intrude into his private concerns. Much less, then, can the proprietor of a private asylum assert the right of exemption, who has under his charge and control persons who from infirmity are not even able to express their wants,

and who from necessity are not allowed to hold communication with the external world.

The theory, however, that the proprietor of a licensed house can claim exemption from public scrutiny, has been long ago annihilated by the fact of his work being inspected by Commissioners paid by the public. For this circumstance declares in a manner not to be mistaken, that the government, the parliament, and the people, have a right to be informed as to the condition of private asylums. Our taxes levied to maintain Commissioners in Lunacy give us this right, and in consequence a blue-book is published, and any man, if he chooses, may obtain Commissioners' reports.

There is nothing new, then, in the idea of a report on private lunatic asylums being laid before the public. What I demand, however, in this paper, may have a novel aspect; but in truth it is only an increased action of a power which already exists. As things at present are, if the officers of any private asylum have been guilty of a misdemeanour, the public may read and comment upon it by applying to their booksellers. But what I ask for now is, that misdemeanours should not be the only matters discussed, but that the general condition of all private houses should be specified, and that reports on these matters should be made accessible to those who are in need of such information. If, then, any one should find fault with my proposition, as an extreme measure, let him remember that he can only complain of it as regards its degree, not as regards its kind.

In conclusion, let me say, that if private asylums are to be considered as placed on the same shelf with public institutions, as regards all matters of inspection, there is an ample and sufficient precedent for the sort of reports which I advocate, in the case of the reports on prisons. Any one examining one of these reports of the Inspectors of Prisons may find details, good, bad, or indifferent, about the condition of each prison. I have before me the Fifteenth Report of the Inspectors of Prisons, in which

the moral and religious instruction, employment, amusements, discipline, and dietary, of each prison, are fully discussed. By this reference I by no means wish to class asylums with prisons; my only object is to show that there is nothing utopian in the idea of publishing reports on matters of detail, under certain circumstances.

SECTION I.

On Increasing the Means of Information as to the Condition of Private Lunatic Asylums.

THE questions which I would now ask are,—What means are at present available to the friends of patients for ascertaining the condition of a private lunatic asylum? Are they sufficient for the just wants of friends or patients? If they are not, how can a sufficient remedy for these just wants be obtained?

On the means existing at present.—I am willing to acknowledge, that many persons, particularly those in the upper classes, have comparatively easy access to good information on these matters. They may be acquainted with respectable proprietors, personally or indirectly; they have the best advice within their reach, especially those living in large towns; and they live so much in society as to know the world's opinion of different establishments, which is, after all, one of the best criterions of practical truth. But there are many not so happily circumstanced when a member of their family becomes insane; it is for these that I now specially speak, and as they are many in number, their wants have a claim to be heard. At the same time, I would not be understood to infer that even those who have all the advantages which society can offer, would not derive much benefit from the existence of more ample and accessible means of information on this head.

But let us suppose a case where this need is felt. A family is living in the country, with only their neighbouring medical

adviser to consult with. A child or parent is observed to show signs of incipient insanity, by altered manners, perverted affections, strange conduct, and that mysterious look which is substituted for the habitual happy expression of health. Keen anxiety is felt; perhaps a knowledge that insanity is hereditary in the family increases this anxiety, which, as days go by, ripens into the conviction that the mind is diseased. The matter is hardly mentioned at first, so great is the dread. Soon, however, it is talked about, though the kindly voice is silent when the poor subject of this discourse appears. The wrinkled brow, the startled look, the changed complexion, are watched with a desire to avoid the notice of the sufferer, and an anxiety which none can know but those dependent upon one thus afflicted. Friends now talk apart in retired rooms. Some overt act committed, or some increase of insane phenomena, compel the family into action. The patient knows now that he is suspected and watched, and difficulties increase immediately a hundred-fold; for the interests of the patient and his friends are divided;—the one believing that his mind is right, and that he is the victim of an extraordinary and unprovoked persecution; the others knowing that life, property, and respectability, call for their interference. Restraint is at last imposed. The kindly feelings of the family suggest home treatment at first: the expression is, “Everything before an asylum.” The medical man is in attendance, and probably begins a course of depletion and blistering, which soon increases all the symptoms of excitement, &c. The violence of the patient becomes insupportable in a small house, and it is observed that the presence of friends always increases this furor.

Those who know anything of insanity will now acknowledge that an asylum is necessary,—that the presence of friends increases excitement,—that patients cannot endure resistance to their will from those they are in the habit of seeing obedient to them, though they may sullenly submit to it from strangers,—that the accommodation of a private house is not sufficient, for

there are no airing grounds, no baths, no means of seclusion, &c.,—that the family of brothers and sisters are exposed to injury, bodily and mental, by the presence of this scene of distress in a case of a member of their own family,—that the patient can no longer appreciate the affections of home, for bitter has become sweet, and sweet bitter,—that change alone will do good—change of associations, change of attendants, change of air,—and that a great moral means of influencing the patient is lost, if the prospect of release from an asylum upon amendment of conduct and discipline of morbid propensities does not form a part of the treatment. These arguments at length prevail—the fondly-cherished resolution to keep the patient at home is most unwillingly given up at the command of stern necessity: and now comes that question, which a want of good system on the part of those in authority renders so difficult of solution—that is, *How is an asylum to be obtained where the best treatment can be insured?* That this question is not sufficiently studied, or answered satisfactorily, we may judge a little by the motives which actuate too many in their selection.

On the motives which too often actuate friends in the choice of an Asylum.—We have supposed the person asking this question to be out of the reach of those means of information which many possess; we may rightly esteem him, in addition, ignorant of the importance of this question, ignorant of the difference between various asylums, and of the practical importance of this difference. Whether to suppose all this is a great stretch of the imagination, I need only ask those who are in the habit of receiving patients. Will the answer be, that friends, especially of the less educated class, receive, or see the necessity for receiving, sufficient information as to these matters, before they commit their relatives into the hands of strangers? I think the answer will be No,—especially when we observe what motives and opportunities dictate or compel the selection. Locality will influence some. The asylum thought of is conveniently near, and can be easily visited; no harm has been

heard of it, and the more affectionate family selects this one. Again: the asylum thought of is conveniently at a distance, and removes the subject of their anxiety further away from the associations of home, and the more prudent select that one. General report of a most vague nature, the influence of a great name, &c., will guide many in their choice. Where affection is not sufficiently strong, or conscience keen enough, some less worthy motive may, in the absence of accessible means of information, guide a person in a manner which shame might hinder, were these means at hand. But if we suppose a more judicious selection than any of these, and say that the friends consult a respectable medical adviser on this point, and that he gives an unbiassed opinion, dictated by the best intention, I would ask what opportunities of knowledge have a large number of these gentlemen by which to form a good and sufficient judgment on the subject? Many of them do not know the interior of any one asylum, probably very few indeed of two or three, and thus hardly any can speak as to the comparative merits of an asylum. I grant that it is a great gain to have the opinion of a medical gentleman acquainted with the good conduct of any one house,—I grant that even if the best reports were published on this matter, the opinion of such a person would be invaluable,—but I again ask, whether, in any one case of those I have here mentioned, there does not exist a great desideratum on this point? and whether published reports on many matters of detail as to the conduct of asylums, would not be a great advantage to all? For what is generally known of the internal arrangement of houses on matters of such vital importance as the following?—the degree of liberty allowed, the degree of restraint permitted, the proportion of attendants to patients, the character of attendants, the daily ease of access to the grounds, the matters of conduct, rather than external show, &c. These are things which none can speak of at all, but those who constantly visit houses.

Who, then, can afford sufficient information on these

matters? Who really know much about the question?— The proprietors themselves know well the condition of their own houses, but they know very little indeed of one another. But even if there existed that reciprocity of ideas, and that intercourse between them, which science demands and the liberal feelings of the age require, it would of course be utopian to expect information on these points from a board composed of officers of asylums. Attempts have been made to attain this desired end by means of private agency offices, where the prospectuses of asylums, and other self-written accounts of such officers of institutions as may condescend to these modes of carrying on business, may be obtained; but I need not ask my readers whether or no this is likely to be a good or sufficient scheme. The private agents may be most respectable men of business, they may hazard the assertion (as they do) that they will insure justice and humanity to all who may become their clients; but what means have they of seeing that this boast is carried out? They do not even know anything of a house except what they gain from the professions of those who employ them, or the general fame of the house. The very presence of these agencies argues, indeed, that the need of some such board has been strongly felt by the public, but argues little as to these gentlemen possessing the power to fulfil the requirements of the public. They are not even capable of forming an opinion as to the needs and requirements of the insane, even if they possessed a free *entrée* into asylums; but if they have as little facility for visitation as they have of experience in lunatic matters, how can they be esteemed a sufficient channel for this work? Indeed, I do not imagine that agents can pretend to possess the power to supply the need which is felt. I would give them every allowance for the best intentions and the most energetic endeavours to do what they can; I would even say that in the absence of sufficient reports, they may afford strangers who do not mix with society that degree of information which society possesses; and they may thus be

the means of saving trouble to many, (if they are sufficiently unbiassed, and if they possess the confidence of a large number of proprietors :) but having supposed this, (and it is supposing much,) I could never esteem such a tribunal to be of much account.

The only persons, then, who can give sufficient information, are the authorized Inspectors of Asylums, the Commissioners and Visiting Magistrates.—It will be immediately said that it would be utterly impossible, highly indecorous, and a sure source of animosity and jealousy, to allow the Commissioners to act as judges and patrons of asylums at the same time. The question, I grant, is full of difficulty. But knowing that they are the only body which could speak with accuracy as to the internal economy of asylums, the merits of this question surely may be discussed and listened to. We must suppose it to be impossible that the friends of patients should have *access* to the Commissioners, to ask their opinion as to the worth of an asylum. Many reasons, which are but too apparent, make it so. The Commissioners (however much increased their board might be) could not afford the time, and probably would consider such work beneath their dignity, if they could. (But here let me observe, that if it would be unjust for the Commissioners to act in this way, how much more unfair must be the judgment of any inferior board which did not possess the character and position of the Commissioners, if such a board really became an authority in these matters.) I am willing, therefore, to acknowledge the impossibility of the Commissioners acting thus in a private manner. But surely the same arguments do not hold good against another mode by which this board (the only available one) might be made instrumental in this work. For could they not add to their annual report a statement of the general condition of all the various licensed houses under their charge, which should be easily accessible to those needing such information, and which would much assist them in forming an opinion? Such a report would be above all reasonable

suspicion, and would do justice to all parties. In the present reports the bad conduct of a house is commented upon at length on some occasions: why should not the good conduct be treated of with equal freedom? There need be no invidious comparison of houses; each person would be left to form his own opinion. In some points one asylum may excel another, and in other points the converse may be the case. One may have extensive grounds, but bad internal arrangement of rooms; another, a full supply of occupations and amusements, but not a sufficient number of attendants. One asylum may be excellent in every particular; another in a few; and a third in no one. But who could raise a voice which would be worthy of attention, against a scheme which has such a manifestly good object in view? I would not here specify the exact nature of such a report,—that would require much consideration and experience from those who would have to carry it into execution; all that I now ask is, that the general question might be well considered. Would not such a means of information, simple in construction and easy of access, be a great help to the affectionate friend, and a means of removing all cloak for the inactivity of the careless? would it not encourage the active officers of asylums, and discourage the negligent? And when the highest motives are not as active as they should be, can any harm arise from that which will compel proprietors, by every possible motive, to maintain their establishments in the best manner?

In making public such a report, there would be no occasion to be minute or fastidious. The heads of particulars should be as *general as possible*, and wherever a balance of opinion might occur, the evident good intention of the proprietor should be allowed great weight in his favour. But surely no proprietor who is thoroughly content with his own work, or who believes he is doing what he can for his patients, need fear such a statement, emanating from a board so highly respectable as that of the Commissioners.

If the Commissioners could be made instrumental in giving

these records, it is of course most desirable that they should produce information which would indicate as nearly as might be the character of those concerned in the superintendence of each house. I grant it would be impossible to imagine that the character of the officers could be discussed in such records. But many points of detail immediately indicate the spirit of the proprietor, &c. much more than others, and any which would enable an intelligent person to guess at the more hidden, but more important, matters, while delicacy was not offended, should be especially sought out. Such a point, for example, as the number of attendants employed in proportion to the inmates, is a very significant fact, and one which proclaims the degree of humanity of the superintendent much more than the position of the asylum as regards town or country. For this, while it demands public attention, may be so wholly dependent on the unavoidable position of family circumstances, that it should not be allowed to intimate much against the good will of the proprietor himself. Again, the description of diet, the mode in which a patient's meals are placed before him, tell a truer story than many more showy points of detail. In short, as much as the condition of some back court, seldom seen, indicates the real state of the house better than the condition of reception rooms, &c., so do many of the less obtrusive points of economy speak with a more unerring voice than the more popular and ostentatious. One thing which has always appeared to me to be more important than many others, is, that an asylum should wear as much as possible the appearance of home. Stately rooms, cold order, and rigid decorum, will not effect this; while little luxuries, such as pictures on the walls, books lying about, a constant supply of fresh flowers in summer time, a tidy litter, indicate what the refined mind desires and craves after far more than all that can be included under regular rule.

A Visiting-room.—And let me here observe, that the question of the propriety of having a distinct visiting-room requires much consideration; for if the friends of patients

in private asylums could always visit their relatives in their own rooms, it would add much to the sense of home, and be an additional incentive to maintain the appearance of ordinary domestic life. There are difficulties, certainly, on this head, but they are such as may easily be overcome by good discipline and good-will. The friends of patients are themselves often the most to blame as regards the formality of their visits, and their non-admission to the patients' rooms. For owing to their morbid desire to get rid of the charge of an insane relative, they too often cease to be anxious to promote the little comforts of the patient, and therefore do not sufficiently urge admission to his rooms. And in the second place, some are so afraid of witnessing the insanity of other patients, that they would even refuse to go into the interior of an asylum, if urged to do so by the officers. The old delusion, that madness is a possession, and the non-admission of its physical nature, add much to these fears. But as sounder views are happily setting in, so do we find this obstacle fading away. A superintendent must, of course, have private rooms, and in these patients could, on emergencies, be seen; but the rule should be, *no visiting-room*,—at least for cases which have private sitting-rooms of their own.

SECTION II.

Objections as to the Necessity for Increased Reports answered.

I HAVE already said that increased reports on private asylums are required for other objects, besides being the means of giving friends of patients information. With this observation, I would dismiss this subject for the present.

But I would now answer three or four objections which may very probably be raised against what I have said on the subject of the need for such reports. They consist of the following:—
It may be said—

First. That the anxiety of friends in this matter is overstated and does not often exist; therefore such reports are not necessary.

Secondly. That in the present day asylums are not so different the one from the other as to require such a rigid system.

Thirdly. That the present means of information are sufficient, if rightly used, and that therefore there is no occasion for such radical change.

First objection answered.—I have already confessed that there is often too little interest manifested by patients' friends in the selection of an asylum, that some trifling circumstance would settle their choice in a matter of vital importance; but surely the standard of support and encouragement which that large number who *are* desirous to do their duty require, is not to be measured by the demands of those who refuse to do it, however numerous they may be; and because some will not take advantage even of insufficient means, sufficient means are not to be refused to those who want them.

If evils really are entailed on the patient by the want of a good selection of an asylum, does it not embitter his position that this evil is as much the consequence of carelessness on the part of his friends as of the absence of a public remedy in the matter? In the name, then, of the patient, I say, that if friends are what they ought to be, good means of information as to the condition of an asylum, and easy of access too, are necessary as well as deserved; and that if friends are indifferent, these means are still more necessary, though they may be less deserved. For shame may easily compel the indifferent to take precautions when they are easy of access, though it might not urge them to go much out of the way in seeking satisfactory information.

Second objection answered.—In the second place, it may be objected that asylums are not so different from one another, in the present day of supervision and control, as to make a selection of much importance. I would ask such an objector, whether he is himself conversant with the interior of many houses, or whether he speaks and judges only from hearsay and supposition?

Will one of the Commissioners—one of those in the habit of seeing various houses—say that it does not matter much where the patient is sent? My confident belief is, that he would say *it matters much*. I believe that a great difference does exist between asylums; and that while much of this difference is beyond legislation, much is still capable of improvement from improved legislation. I know that the law can and has done much, and believe it to be capable of doing much more. And although with its utmost exertion it can hardly make one asylum like another, still it can expose the interior of asylums, and this will do much towards the desired end. The reasons why the state of each house is so different, and why legislation can only compel a certain degree of equality, are plain enough. For, as those who go from house to house know very well, it is not only the absence of chains and bars, the presence of amusements and of occupation, that are required; these and other things may exist in an equal proportion, and yet the status of houses be very different.

This difference is caused by the style of mind of the superintendents, &c.—a thing not to be influenced directly by legislation. If the good-will of the superintendent has not *been led* by amended laws, but *is ever forward to take the lead*; if conscience dictates before the law compels; if the look of kindness accompanies that increase of labour which is necessary to maintain character before the world; if the patient knows that this kindness is increased, not lessened, in the absence of others,—a point is obtained which can be gained by no other means. Ask all those placed under authority if this is not so; ask the child if he does not know the weight of the difference between the ruffled look of him who is compelled into kindness, and the placid look of him who loves it for its own sake. The conscientious inspector will doubtless guess rightly at the importance of this difference; but even *he* cannot impress you with the urgency of the need of it, as he can who has suffered.

Another cause which makes one asylum to differ from another

which present legislation finds it difficult to reach, but which an increased report on asylums might indirectly affect, is locality. No amount of good-will can make confined yards appear like verdant lawns. Any one who knows the difference between an asylum in the city and one in the country, must feel how important this matter is in a disease which so peculiarly requires air, exercise, and pleasant associations. The fact of space makes a prison lose its prison aspect, and makes an asylum appear like a country-house. It is not, however, my wish to dilate on these matters here, as it is sufficient to say that those who see asylums most would be most impressed with the importance of such distinctions.

Third objection answered.—The third objection is the most important one by far—viz., could not the present opportunities for inquiring into the worthiness of asylums be made sufficient without any direction emanating from the Commissioners in this matter? Upon this head I would be distinctly understood to say, that inquiry at asylums themselves, and the request to see over an asylum, are matters not to be dispensed with, as much may be learnt by this means; and even if public reports could be made useful, this mode ought not to be superseded. I would have this *public* means of information *added to* this *private* mode of inquiry. But one of the most remarkable features of the present circumstance of the case is, that this sort of inquiry is very seldom made. This arises partly from a lack of sufficient interest in the matter, and partly from various objections to this mode of inquiry. I will therefore state a few of these objections to this mode; and while I grant that friends ought to adopt it, and superintendents submit to it, I will endeavour to show that it is very unadvisable to allow it to be the only mode of obtaining acquaintance with an asylum.

First.—This mode is *insufficient alone*. A visit to an asylum will do much—it will inform an experienced eye upon many things; the extent of the grounds; the order maintained; the size of the apartments, &c. But the most experienced

eye would learn, by one visit, very little of those more hidden, but more important matters which a frequent visitor would detect.

Secondly.—There already exist many difficulties in the way of this mode of gaining information, which would be very much increased if it became more frequent than it is. For, first, it would be disliked by the friends of patients already resident. Patients in private asylums are esteemed to be in seclusion; it is much wished that they should not be recognised by strangers or friends. If this intrusion were frequent, the institution would lose one of the chief advantages of a private asylum. But suppose we allow that only certain parts of the asylum are to be inspected, such as the grounds, the public rooms, the empty rooms, even to this there would be great and manifest objections, if it became a frequent mode; for the resident patients would be continually hurried out of these departments to their private rooms, if they are to escape being seen; and this, as all acquainted with asylums know, is injurious to patients.

Again: a frequent visitation of the friends would prove very disagreeable to some of the patients themselves, for many are very sensitive on the matter of being seen while in asylums, and would esteem this to be an insult added to the injury of their confinement. They would be very indignant if told to quit a room or garden, to which they esteem themselves to have unlimited right of access, while others came to view the place. None know how sensitive patients are in these matters but those conversant with them.

Again: it would be a disagreeable intrusion to many right-minded superintendents, and I believe that such a system would disgust many whom it is very desirable to propitiate. For what would be the consequence of such visitation? We will pass by the necessary interruption to all the ordinary duties of the household which this system would occasion, for we will suppose it to be a part of the duty of a superintendent to assist friends of patients in forming a judgment about the merits of a house.

But setting this difficulty aside, I maintain that few things are more disagreeable to a superintendent, whether lady or gentleman, if they have a sensitive nature, than to have to show off their establishment in this way. For what is the probable result? They have the alternative to pursue one of two courses, either the candid or the reserved—either that which tells everything and trusts to honesty of purpose, or that which distrusts the world, and judges by experience that reserve is necessary. Now, each of these modes of receiving the friends of patients is full of what is disagreeable to an honourable mind. I will trace them both a short way.

One person is anxious to remove all doubt by an ingenuous desire to explain all the merits of the case. He speaks of the faults as well as the good parts; and he does not succeed in being appreciated. For it requires a candid mind to understand candour, and few people really possess this quality, and even those who have an instinctive appreciation of it, will lose this power considerably when they are in positions of great anxiety and doubt. Again: unreserved candour urges the superintendent to give unlimited access to the asylum; he hopes to inspire confidence by the exhibition of confidence on his own part. But what will succeed with our dealings among the sane is subject to peculiar difficulties with the insane. For, first, the insane are remarkably cunning and remarkably spiteful, and many will perceive what the superintendent's object is at a glance, and will most assuredly, when he has spied it, say something untrue and injurious, something which will give instant cause for unjust suspicion on the part of anxious friends. Kindness on the part of the superintendent would not prevent this with many cases,—indeed, it encourages it. For some of the victims of this disease are peculiarly like savages, in that they always attribute kindness to a sense of weakness, and feel inspired to mischief when they feel they can exercise it with impunity. This I know so well, that I should esteem this sort of abuse in many cases to be a sign of the exercise of kindness

and leniency. Secondly, the friends of patients are often so fickle and foolish, that if they see a mad person in a lunatic asylum exhibiting the ordinary phenomena of insanity, they will be struck with a child-like horror, and suddenly change their resolution to send their friend to the asylum; never arguing the matter justly with themselves, or remembering that they ought to have fully recognised this objection before they resolved to have recourse to the advantages of an asylum.

The experience of all this will urge many honourable minds to adopt the opposite course; that is, the system of reserve—a system which is, in my opinion, more intolerable than the other alternative, and not to be endured in the present day. This was a corner-stone of treatment and conduct with mental physicians in former times, and this is a part of the old fabric which most of all requires to be removed; except, indeed, as an occasional resort in dealing with certain patients. Should not our motto be, that there is no occasion for an honest mind to be reserved if he can escape misinterpretation?

Reserve is anything but a positive good; its best characteristic is, that it hides greater evils. Candour, on the other hand, is a positive good, and its worse characteristic is, that it is sometimes unguarded with those who have not the capacity to understand its voice. And yet sad, rather than strange, is it to say, that reserve is looked upon as a sign of power of mind, as a mark of experience and worth, as a thing above all others necessary for the conduct of affairs; so much so, that he who insists upon a contrary line of conduct runs the chance of being esteemed inexperienced and untrustworthy. I say that this is sad rather than strange, for it is only an additional proof of the imperfection and disorder of our present state of being. But, at the same time, for few things have we more reason to be thankful than to find that at the present day a dawn of better things is beginning to appear. Men seem inclined to do away with that system which suits children, weak-minded persons, and only certain classes of the insane, and to adopt that reality

and frankness which persons of sound mind should be deemed capable of appreciating, and which many partially insane appreciate keenly. As education advances, and minds become more comprehensive, men seem inclined to judge rather by observing minute indices of truth than by plausible appearances and artificial airs of superiority; so much so, that we now-a-days can hardly conceive how our fathers could have been on the one hand so easily deceived, or, on the other, so presumptuously imposing. In nothing was this state of things more apparent than in the treatment of the insane.

Thus, to the superintendent, to the resident patients, and to the friends of resident patients, a frequent inquiry at, and personal inspection of, private asylums would be disagreeable and injurious, even if it were a sufficient and satisfactory mode to the persons wishing to obtain information (which it cannot be;) therefore it is most desirable not to rely on this too much, however important it may be.

The Conclusion.—Those who feel that such an amount of inspection and publication of internal arrangements as I have advocated in this and a preceding article would be insupportable, might say, why not insist on public asylums for the upper classes at once, and do away with private asylums altogether? My answer to such an observation is, that no doubt, if the evils of the private system were deemed irremediable, or if their evils exceeded their advantages, this alternative would be had recourse to. But there are many reasons, sufficiently manifest, why this alternative need not be thought of. Among them are the following:—In the first place, the private system, if sufficiently guarded, has its own peculiar advantages, even for the public. The upper classes dislike sending their relations to public institutions of any sort, and there would be some difficulty in making public asylums as private as many might desire. Moreover, a superintendent of a private house would in many cases take a greater interest in rendering his own house like a private home, and

would have a greater facility for doing so than in the case of a public asylum. Secondly, a vast amount of capital is vested already in private establishments, which it would be equally unjust and difficult to interfere with carelessly, especially when progressive improvement is being made. Thirdly, why not give the private asylums a fair trial, under a system of sufficient inspection and publicity? The difficulties just alluded to do not obstruct the path of any amount of reform in the private system.

But there is one party which requires to be aroused into action, perhaps more than any other, in the cause of improving asylums; and this consists of the friends of patients. We should have thought that such as these would take the lead in all such matters; but personal considerations keep them back. The public are in earnest in the matter; quondam patients are some of them over-zealous; medical men connected with asylums are stirring in the cause. But this class is led by all rather than takes the lead, and yet the evidence they can afford, and the interest they must feel in the subject, are most important for its advancement. Their sincere earnestness would be worth much more than the artificial zeal of many demagogues, or the anarchical aspirations of many who have been patients; and their knowledge of the necessities of the case would be a good guide for the sympathising ardour of the public. The cause requires peculiarly single-minded earnestness to back it, for it is beset by various foes—the stand-still and the hobby-rider, the indifferent and the furious reformer, the conceited man of action, who gains far more applause than he deserves, and the man of good intentions who is not energetic enough: there is a Scylla and Charybdis on either hand, and only the man of experience, sound sense, and humanity, can guide the vessel through the opposing difficulties.

ARTICLE III.

THE NECESSITY FOR THE REMOVAL OF THE CIVIL RESPONSIBILITY OF DETAINING A PATIENT FROM THE PROPRIETOR TO THE COMMISSIONER, URGED ON THE GROUND OF THE INVIDIOUSNESS OF THE POSITION AT PRESENT OCCUPIED BY PROPRIETORS.

I HAVE already stated, that the motive which pressed most cogently upon me in urging the removal of the civil responsibility incurred by detaining a patient, from the officials of an asylum to the Commissioners; is, that this responsibility is, *on certain occasions*, intolerable to the former, if they have not become inured to it by a process of habits and associations which it would be well for all to avoid, but the continuance of which a capricious fashion sometimes allows, even in the pursuit of an honourable profession. I will now urge some of the particulars of this disagreeable responsibility; and, first, let me say that there would be no difficulty or anxiety as to the admission and discharge of patients, were all cases plain and easy of discernment, and if they could be clearly recognised as coming under certain classified heads. If glaring delusions always existed, accompanied by extravagant conduct, involving manifest danger to themselves or others, few persons would question the propriety of a lunatic's confinement, and no juries would listen to the demands for reparation which such patients might make when deemed convalescent and at large again. But physicians, and others conversant with insanity and the miseries it entails when unrestrained, well know that there are a multitude of cases which fall very far short of this mark, for

whom interference is not only justifiable, but absolutely necessary. They know that besides the chances of immediate danger, disgraceful scenes and exposures—alike injurious to the patient, his family and society—are the sure result of non-interference; and they know that the best hopes of recovery are lost, if treatment and seclusion are postponed. But, on the other hand, those versed in the *litigation* of these cases well know how difficult of resolution many questions which arise out of them are to even a perfectly impartial tribunal.

Let us follow this matter a little in detail. In a private asylum no doubt or anxiety exists about the great majority of cases: they are composed either of manifest lunatics or imbecile persons. The system pursued in a *good asylum* is as evidently the proper course for these, as a good school for educational purposes, or a good hospital for healing disease. And the advantages of a *private asylum* are so peculiarly congenial to English tastes and feelings, that I believe no public system could occupy its place, or meet all the necessities of the case equally well.

Now, though the advantages of an asylum for the more subtle cases may be as great in reality as for those just mentioned, yet, to know this, and to render it evident, or prove it, are two very different things, as I will immediately show. These subtle cases may form but a small minority in an asylum, but they are sufficiently numerous to render the life of a medical proprietor most anxious, and his responsibilities intolerable. The public have lately had their attention drawn to one of this number: I will therefore advert to it at once. What more can we want to exemplify the difficulties of the subject, than Mrs. Cumming's case affords us? where a large number of medical witnesses were engaged on either side, the one to prove her insanity, the other to prove her sanity,—where names of eminence, and persons of experience, were engaged in opposition the one to the other. Such histories as these involve the most delicate questions, and questions which cannot

be answered satisfactorily by any tribunal; and yet, as things at present are, medical proprietors are daily required to determine questions of this nature unaided, and to stand the responsibilities of their judgment in regard to those placed under their charge.

If science *could* solve these difficulties;—if learned men could bring the evidence of morbid anatomy, or demonstrate the presence of insanity by an appeal to the senses;—if medical men could see its baneful working as they can see the presence of inflammation in the eye, or hear what insanity effects as they can hear the various results of pulmonary disease;—if even a generally recognised train of morbid symptoms were palpable to our senses in all cases of insanity, little or no difficulty need be felt. But pathology, even during life, can afford us no certain assistance; and, unfortunately, as science at present stands, morbid anatomy can do almost as little when death enables us to explore the seat of disease. The question, therefore, becomes not a physical, but a metaphysical one—one on which most people believe they can form a pretty accurate opinion, and upon which the medical man has no other peculiar vantage ground than that experience in lunatic paradoxes which, however unjustly, is already suspected and thought lightly of by many.

In dwelling upon these difficulties, be it remembered I am not querulously regretting their existence, or imagining that they can be satisfactorily or easily set at rest, for I believe that though much improvement may take place in the investigation of these questions, they are so surrounded with mystery, and are so ambiguous, that we must be satisfied to bear with much uncertainty. But I am deprecating a system which *can easily* be remedied, namely, the placing such a delicate responsibility as the practical resolution of these questions require on the shoulders of persons whose standing-ground is deemed infirm by the public, and who, consequently, cannot support it in a manner satisfactory to

themselves or others, instead of placing it on those who are esteemed best able to meet the necessities of the case.

We know by experience that many of these questions *cannot* receive a satisfactory answer; but when we find *impartial* persons unequal to the matter, we only smile at their dilemma—we do not suspect their motives. When, in 1843, the Judges were called upon to settle the liability of the insane to punishment, we find them enunciating statements somewhat contradictory, and bearing powerful testimony to the weakness of the law in this respect. But the effect of this does not make us doubt their character and general fitness for their office. When the Lord Chief Baron, in the case of Miss Nottidge, declared an opinion which most medical men believe to be untenable—viz., that no mad persons should be confined unless proved to be dangerous to themselves or others—we deem the opinion unsatisfactory, and believe, more strongly than ever, that these questions are full of difficulty: but nothing more. The private character of the person uttering such an opinion is in no way subject to inquiry. But the motives and character of a medical proprietor are liable to suspicion and inquiry if he cannot satisfactorily prove matters of a most abstruse and mysterious nature. He may thoroughly believe a person to be insane, and keep him in confinement in consequence, but he cannot prove it, and is immediately exposed to slander.

Let us follow for a moment a medical proprietor as he enters the witness-box to prove the rectitude of his conduct in the detention of one of those subtle and delicate cases. The first question he is asked has an appearance of great ingenuousness about it: the lawyer who puts it does so with a mixed expression of innocent expectation and subdued irony.

He is asked to define insanity, and he cannot succeed in this first step. He makes, probably, a better answer than any lawyer could give at this short notice, but he cannot succeed in doing that which has proved a stumbling-block to all who have gone before him. Because he cannot answer this simple ques-

tion he is looked upon by many with an evil eye,—he is deemed an incompetent judge of insanity, and an untrustworthy depository of the responsibility he has held. I grant that many of the audience who have seen these trials before, judge otherwise—that many now-a-days laugh out when they hear this sophistical question put—that it requires only experience to know how impossible it is to meet certain apparently easy positions; but many who are present are inexperienced, and possess sufficient ill-will towards proprietors to take full advantage of the infirmity of their position. Let us sketch some of the usual and better class of answers to this question, and we shall see in a moment how easily they are turned.

One person will say that insanity is represented by a loss of the reasoning faculty and an excess of the imaginative; but then it is found that some insane persons reason most acutely; and (what may excite the astonishment of many) a few have been known to evince even a greater activity and subtlety of their intellectual powers during their insane than during their sane periods. Again, the old adage that insane persons reason correctly, but on wrong premises, is no answer in the case of those who are the subjects of moral and instinctive insanity, who exhibit no intellectual lesion whatever, but only such an excessive propensity, or such an unaccountable perversion of mind, as compels practical men into the belief that derangement exists. Again, insanity is said by some to be identical with delusions; and yet we know that not only does insanity exist without delusions, but delusions exist without insanity: for while many maniacs exhibit only extravagance of conduct, and a violent rapidity in the succession of their ideas, with no fixed delusion of any sort, many sane persons are the victims of delusions, not only on matters of theoretic belief, but of physical fact. Perhaps one of the best and most comprehensive answers which could be given to this question would be, that insanity consists of the loss of moral liberty, the inability to place control over the succession and order of the thoughts, and the being the victim,

not the master of mental imagery;—such a condition as exists in dreams, where ideas succeed one another in accordance with sensations and associations, and other impressions independent of the will. But even this answer would require such modifications and explanation as would reduce it to a mere quibble; for it must be acknowledged that such a state as this is only to be found in certain extreme cases. It may represent *the peculiarity* of the insane mind, but it is a state which exists in infinite degrees. If this answer was given absolutely, it might be justly said, of what avail, then, are moral remedies in insanity? Why argue with a patient, if he be incapable of guiding his thoughts? The medical man is then driven to say that it is a question of degree; but the most plausible answer, and the one apparently the most comprehensive in theory, is of little avail as a practical definition when the question of degrees is involved. For each man must settle for himself the point at which the boundaries of sanity are overstepped, and he must do this when his faculties for seeing accurately into the workings of another's mind are so imperfect as they are.

No! the boundaries of insanity cannot be demonstrated in this clear and nice manner: it must ever be a question of degrees—it must ever consist of nearly as many phases as there are lunatics. It is a thing to be judged of by that sense which long experience alone confers, and to detect which ordinary common sense is often not sufficient when unaided. It is at one time a morbid perversion of intellectual power, at another of moral, at a third a simple excess of propensities. At one time it is demonstrated by acts rather than thoughts, and by manners more than utterance. It is such a departure from health of mind as often requires the greatest experience in the habits of the life of the insane to detect. And why should we wonder at this, when the whole cycle of health and disease is a thing of degrees, when the boundaries of a sound mind are so uncertain, and when even the dogmata as to what con-

stitutes soundness may be so erroneous, and have been so differently laid down in different ages of the world?

The examination, then, of the medical proprietor continues under intolerable disadvantages; and though a jury may, by that good practical common sense which they usually exhibit, free him from censure and confirm his position, yet the public and the press, so greedy of scandal, reflect injuriously upon him.

But leaving hypothetical positions, I will sketch from a few cases lately under my charge, on whose account I feel this responsibility peculiarly, taking only such precautions as are necessary to prevent exposure of their personality.

1. One patient believes himself to be connected with the Godhead: he is in all other respects a very sensible and clever person, capable of long conversations on politics, history, and all matters of general interest, to a somewhat remarkable degree. But the shame and exposure which this person's conduct entailed on himself and his family at length rendered confinement necessary, and he was placed in an asylum. At his first residence the patient was communicative with his attendants on the subject of his delusions. Finding, however, that he had no chance of impressing them with the truth of his fancies, he became obstinately silent. Months passed away without any intimation on the subject of his insane idea, and any attempt to elicit his opinions was received in such a manner as to make the interrogator wish that he had not made the attempt. Meanwhile his conduct and conversation appeared nearly perfect, and utterly incongruous with residence in a lunatic asylum. When the Commissioners came, they met with similar fortune—viz., communicativeness at the first visit, silence in succeeding visits when they were found unimpressible. Positive evidence of existing insanity was thus very much prevented: indeed, one of the best proofs of its continuance at all was derived from the somewhat negative evidence that a patient, if sane, would declare his freedom from delusions when pressed so to do, and when assured that liberation would ensue.

on this explanation. Such a patient as this might, I imagine, hide his insanity altogether from a jury. It has been said that a monomaniac could not hide his delusions under a searching examination. Upon this head I believe that in certain rare cases (such as this just given), a positive proof of fixed delusions might be impossible of attainment; and thus the proprietor who had detained him might be in a most unpleasant position.

2. In another case the patient is haunted chiefly with unreasonable suspicions against his relatives: he imagines that they are always plotting against him; and the extreme misery and danger which all this entails urges resort to an asylum. The patient, however, while there, conducts himself in a most orderly manner; his position also in an asylum seems incongruous; and what adds to the dilemma is, that all his suspicions of plotting, &c., are grounded on truth, for his friends have been compelled into a course of surveillance on account of his eccentricities. In this case insanity is chiefly indicated by the extent of the suspicion and its absurd nature. If this patient were left at large, it would be at hazard to himself and others. The medical attendants know well how tainted his mind is with disease; but he has such a plausible appearance, and accounts so well for some of the ideas which have been suggested to his mind, that a medical proprietor might easily receive an injurious verdict at the hands of a jury. Those conversant with the insane know well how common such a case as I have given is.

3. Another patient is insane at intervals, and nearly quite well at the lucid periods. He is kept continuously at an asylum, because the attacks are of such a nature as to render a constant change of residence most undesirable; and yet, if a jury judged of the case as it is during many months of the year,—if they did not give sufficient weight to the consideration of what occurs during the insane periods,—in fact, if their prejudices were at all raised against the proprietor,—they might easily pass a verdict which would occasion the proprietor much

undeserved injury. The authority of an impartial inspector of asylums is peculiarly required in such a case as this.

4. Convalescents, again, often have long periods subsequent to active delusions during which a certain eccentricity of conduct and extravagance of manner are the chief indications of a mind not fully restored. Such a patient resists continued confinement extremely : he does not till he is quite well see the propriety of his residence in the asylum at any time : he is full of vows of legal redress, and complaints about being the companion of confirmed lunatics. This patient has much unavoidable cause for annoyance, and this period of his illness is most trying ; but what is to be done ? The proprietor feels convinced that a premature discharge may be most injurious to the patient's good and his own reputation. A third party, a fair judge, is loudly demanded, and the absence of such a tribunal cannot be remedied by other means.

5. Again, a gentleman is natural in his conduct in almost all respects : he is allowed to go where he likes ; and, when in the asylum, he may go to church, and conducts himself with propriety there ; but he believes there are certain persons trying to kill him, and he carries arms about his person to defend himself. At one time his alarm about persecution was so great as to induce him to attempt suicide. This episode, however, has long ago passed away. His conduct in the asylum is so natural and gentlemanly, he is so entirely trustworthy and true to his word, that it seems impossible to detain him. The responsibility is so great that the proprietor lets him go, though with the belief that some catastrophe may easily happen. The Commissioners should have to settle this person's place of abode. These cases I could easily multiply, but that it would be tedious and trite to do so.

It may be said, and very truly, that the visitation of the Commissioners, as it exists at present, is a great safeguard ; for the proprietor can so refer these cases to the Commissioners as to leave the responsibility of their further detention on their

shoulders. I am free to grant that this is a mode I should always be careful to have recourse to; but what I complain of is, that the length of interval between their visits is so great that many cases come and go, and never see a Commissioner. And thus this length of interval renders the absolute removal of the civil responsibility to them impossible.

Those conversant with cases such as I have described, but who may be opposed to my views on reform, may say—have you not observed that hardly one out of a hundred of those who threaten really have recourse to legal proceedings when they have the power? This I acknowledge to be most true; and it may be a consolation to those who are not used to these anxieties to be assured that this is the case. Indeed, if lawsuits were as frequent as the threats of lawsuits are, a medical gentleman who has a large practice would have little time for his patients. But this is no answer to my regret: what I desire to see removed is the exposure to the possibility of such a course of proceeding against the proprietor, for he is not able to meet this position satisfactorily. I freely grant that, when liberty is once attainable by a patient, he is frequently far from expressing that pleasure which his former complaints would lead us to expect; that it is even in some cases nearly as difficult to get rid of the patient as it was before to keep him in charge. I know that sympathy for his position is often wasted, and that a kind and judicious restraint is not such a matter of real distress as many have expressed it to be. But though I know by experience that the caprice and vexatiousness which a mind diseased manifests is unbounded, this consideration in no degree mitigates my desire to see the civil responsibility of detainings such a patient placed on the shoulders of an unbiassed third party.

ARTICLE IV.

ON THE NECESSITY FOR REFORM IN THE EDUCATION AND
CHARACTER OF ATTENDANTS.

I WILL now proceed to make a few remarks upon one of those matters in the domestic economy of private asylums which appears to me to require especially the consideration of the Commissioners, and for the correction of which a more frequent visitation, and more accurate reports on the condition of each house, might be instrumental for much good.

That which I will touch upon is the condition and character of the *attendants*, for there is much room for improvement on this head.

The important position of attendants considered.—The character, education, and capabilities of these servants of the public, are matters which cannot be estimated at too high a rate; for they are, and must be, the ordinary companions of patients in asylums. Be the officers of an asylum ever so excellent, be their intentions ever so good, and their acts ever so energetic, they cannot succeed in making patients as happy as they might be, if the attendants are not to be depended upon. The visitation of a superintendent must be occasional through the day; his duties incapacitate him from being the companion of any one patient: the long and tedious hours of illness must be lightened or rendered miserable by the attendants. Common sense tells us this; the experience of all who know anything of large asylums must confess to it; but the patient himself best of all knows the truth of it. Ask one who has been a patient what he be-

lieves to be the most important question in the economy of an asylum ; ask him what he looks back upon as the most detested, or the most grateful, part of his days of confinement ; and the answer will generally refer to the character and conduct of the attendants about him : some trait of character, some peculiarity of disposition, which might escape the observation of persons in health, will have assumed an importance wholly irreconcilable with the degree of regard such a person might be able to excite in the minds of the healthy.

A man living in a free country, enjoying health and vigour of mind and body, can hardly appreciate the degree of oppression which may be exercised over his mind, when ill, by the ill-will and bad temper of one in authority. In health, the brilliant hours of the day are diversified by a thousand interests and enjoyments—they hurry by, and we arrive at the hours of darkness unconsciously ; each moment is a scene of recreation to the last, and sleep when it comes is almost grudged. The rising sun awakens us to a fresh dawn of happy life, and everything is brightened with renewed hope. In this maze of interest and energy, bad tempers of companions affect us but little ; we have internal vigour enough to think lightly of them ; they excite our kindly pity, and do not even raise our antipathy, much less occasion us any dread. We do not think of depending upon what is obnoxious to us, for we are free, and can depend upon what we choose. We choose to depend upon the better things, and to pass lightly by the worse. The instinctive desire to maintain this freedom renders liberty so precious to those who have known it, and makes slavery to a tyrant's will so dreadful. But in sickness a change comes over the spirit of our dream. The hours pass wearily. In the night we say, would God it were morning ; and in the day-time, would God it were evening. Memory comes with her undying light, revealing to us the pleasant hours of the past, calling up before our notice the scenes of buried affections. We hear now, as it were, the sounding cadence of the ocean whither we are hastening ; voices

from the world beyond the grave seem to speak to us, and to tell us that life is but a dream that soon passes away. To him who is seeking with a steady aim a more abiding home, this is a most beneficial time; to him who is led to seek it by this means, this period is often most blessed;—but we are still subject to impressions of weakness and want; and now we feel, in a way quite unmistakeable, how dependent we are for our earthly comforts on the will of others. Happy are those who have learnt the influence of that comfort with which strangers cannot interfere!

How often have we had occasion to wonder, in the case of old and infirm persons, that they can allow a servant or attendant to exercise such tyranny over them as they do, when one bold effort would sweep them from their path! We little know how impossible this effort is,—how magnified to the paralysed view of age, little difficulties become. If this is the case in ordinary disease, how significant must be the bad will of an attendant to those who cannot regard him as a companion who can be dismissed at will, but as one under whose absolute and recognised authority they are irremediably placed.

I said just now, that no grown man, living in a free country, could imagine the oppression of such bondage: he may, however, have some dim impression of it, if he recollects the state of tyranny which existed in his school days, and the awe in which he held some boy bigger than himself, who never met him but to ill-use him. Without these reminiscences of that period, which it is the fashion to call the brightest season of life, and which a man, enjoying all that a civilised state of society can give, pretends to regret, we could have little notion of the weight of the burthen of being subject to the hard-judging and even unrefined will of another. In insanity, moreover, as I have already stated, many of these evils are seen with a morbidly magnified view: a rough voice, the exhibition of some sign of great strength, a peculiar cast of countenance

even, are things thought to have some terrible meaning in them : all is undefined—all is full of anxiety,—a dim unsettled state of vision, uncontrollable by the will, unguided by reason, where emotions are terribly keen, and the power to get free from them is paralysed and gone.

On the ordinary faults of attendants.—Having thus drawn attention to the importance of the position which an attendant on the insane holds, I would say a few words as to the peculiar faults to which they are prone under the present system. And I may state in the commencement, that I believe their source to be, in a great degree, want of cultivation of mind, and habits of idleness. Other causes are of course to be discerned in this as in all other histories of bad conduct ; but these are the defects to which I would now draw special attention. The incentives to bad conduct when a large number of either sex are collected together, who are only half-educated, who in consequence have no appreciation for the higher interests of life, and who have much leisure time on their hands, are sufficiently numerous at all times : if so, how much more stimulating are they likely to be under the circumstances we are commenting upon ! For in this service persons are required to be in the prime of their life and vigour,—this is made the sad apology for those faults which are the consequence of undisciplined health and spirits ; they are required to have a superior appearance on going out on calls,—this is an ample excuse for dressiness and vanity ; they are received into gentlemen's households as members of the family frequently, rather than servants,—and this is enough to render the return to the condition of a servant very distasteful. But for these faults of license, vanity, and insubordination, as they usually exist, the authorities in asylums have cause to take much of the blame to themselves. I do not for one moment mean to extenuate the criminality of giving way to such dispositions,—I would not lose sight of the fact, that nothing can excuse the attendants themselves while power over the will remains ; but while dwelling on the needs of the insane, it is advisable to

distinguish between such faults as are pressed upon persons infirm of purpose, and without a sufficient sense of conscience to restrain them, and faults which arise from an absence of all amiable qualities, and a want of power to sympathise with the woes of others; for by better discipline the former may be remedied, while nothing earthly can affect the latter.

Those who are intimate with large asylums will find that there are two prominent and distinctive phases of character among the infinite variety of dispositions in attendants. The one is exhibited by a person who seldom or ever commits a fault which can be laid hold of,—who is active in all showy qualities, smart in appearance, and taking at first sight; but on whose good intentions you can have no real reliance. The other, by persons who have many faults, but of whose good intentions you can have no doubt. For the latter we could have a hope which we could not feel for the former. It may be said that such a distinction as I have drawn exists everywhere, and that to notice it is almost unmeaning. The reason, however, why I call special attention to it is, that friends of patients and authorities in asylums are prone to appreciate too highly the former and to disparage the latter character. Between them, the real comfort of the patient is too much forgotten. Unfortunately, good looks and good deeds are frequently at painful variance in this class, and the ready and good-looking man cuts the ground from under the more homely and more honest. In saying this I by no means wish to make light of physiognomy, for though it is often a fallacious guide, it is after all one of our best indices of truth; but a wide difference should be made between that appearance which is dependent on expression, and that which is dependent on form and deportment. Nothing should be thought paramount to the power to sympathise with another's suffering, in the choice of an attendant. This is the quality which at all times raises man towards that divine standard in whose image he has been made; this is the one great and important mark of distinction between man and the lower creation; but in no case is

the weight and importance of this quality felt more than in attendance on the weary and painful hours of the insane.

And here let me make a few remarks upon that most pernicious habit of generalising faults, to which persons of large experience are so naturally prone,—a mode of false reasoning which seldom does greater harm, in my opinion, than in the case of committing a patient to an attendant. The physician versed in the faults of this class is prone to say to himself of an attendant “if he has not one fault he has another,” and “it is useless to be over-particular.” With this placebo on his lips he becomes careless of the description of faults that are evinced when he deals with patients as a matter of business. Whenever a man of good feeling is prone to adopt this course of argument, let him ask himself whether he would use it in the case of his own child, who looked to him for relief amid the dreadful visions of raving madness, or the gloomy anticipations and sad recollections of melancholia. If he would act differently for the child who lays his burning head upon his breast; if he would make much of the peculiar characteristics of an attendant in this case, and would not do so in the other,—surely we must conclude that duty is not acted up to when we begin to generalise faults. It is a pernicious habit, however, into which the most philanthropic minds are wont to fall, and from which, when once engulfed, there is in this instance a peculiar difficulty of extrication. *Who is there* to call such an one’s attention to his fault? The attendant himself takes care to be civil and obliging to his employer. The patient is thought mad, and his accusations are no more attended to than his ordinary raving. The friends of the patient keep out of the way, too glad to commit all the responsibilities to a stranger; the burthen of care and solicitude lies upon the physician and the superintendent of an asylum, and must be borne by them, and them alone. Again, *what motive is there* to induce him to be active in this matter, if the pressure of conscience does not make him so? All ordinary motives of a lower nature are of no use here. The desire for

the praise of man can add little stimulus in a disease which is kept secret, and when there is no one by to witness good or evil. The desire for the gratitude of the patient can do little in a disease where the power to appreciate kindness and distinguish it from the converse often does not exist (on account of a universal suspicion while the disease lasts, and a shame to recognise the author of this kindness when the patient is well). The dread of censure can do little in a disease where relations had rather bear the burthen of a sense of injury than the burthen of the exposure of seeking redress. In no case can a person in authority be called upon to do his duty towards God and man by more pure motives than in this,—in no case is a stern sense of duty more required, or would a mere poetic sympathy for woe be of less avail. The broad glare of the sun as it shines down upon a courtyard full of the insane, reveals little of the poetry of suffering, and stimulates little of that passion the exercise of which is more gratifying to some minds than even scenes of pleasure. Disease and death are here in those clear characters which a country home, and the summer evening light that shines on illness relieved by everything that art or nature can supply, know nothing of; and yet, while the latter scene excites a sympathy in many minds which the former would stifle, the former is peculiarly the one where an energetic and religious mind is called to play its part.

Reflections on such realities as these bring to my remembrance, that, while dwelling on the faults of attendants, I should do them the justice to observe that they are a sorely tried class. For they not only are the victims of incentives to vice of a peculiarly urgent nature, but they are exposed to harass and distress, in the discharge of their duties, to a degree which none but those who witness what they have to endure can conceive: and on this account I would urge that they deserve our sympathy and every kindly feeling. The scenes of personal violence to which they are subject, the long watchings night after night which they endure, the disgusting offence to which their senses

are exposed, in sight, hearing, and smell, and all for a slight remuneration, are such trials as many persons would not be induced to go through for rewards of a very different nature. I have often had occasion to feel that no return could make some men go through what attendants have to endure in the most ordinary course of their service. Much may be advanced, in extenuation of their hardships, on the ground that they are not so sensitive to offence as persons of more refined feelings may be ; but nothing can dissuade me from the conviction that many who deem their trials worthy of the honours of martyrdom, do not suffer anything like the outrage to comfort and ease that these persons do, who excite so little of our sympathy. The zeal with which I have seen attendants devote themselves to the poor victims of a most contagious disease (the cholera) has elicited my admiration, and has read to me a lesson which I have looked for in vain among the higher classes of society. Their trials are stern realities, and they bear them with stern resolution, and in consequence they deserve some of that sympathy which the present age is too prone to devote to ostentatious popularity-hunters. And if their numerous trials drive them occasionally to forgetfulness of their duty, let us not be too heavy in our judgment upon them, while we sympathise so with the self-imposed afflictions of many who cannot be happy till they are deemed miserable. Our object should be to raise before the minds of such persons great and worthy motives of action, and while we should never cease to impress them with the sense that the reward of real merit is only to be fully gained in another world, we should not fail to give them every reasonable hope of appreciation and regard in this. Nothing is more hardening than the absence of hope and the pressure of intolerable trials. The Christian remains tender because he has an enduring hope which renders all trials light. The philanthropist by instinct is tender because he is endowed with a wonderful power of realising himself in others. The successful

man of the world is sensitive because he has not been trodden down and driven to the hardening processes of self-defence. But if a man has neither a Christian hope, a philanthropist's power, or the exhilarating influence of success, what can keep him sensitive when he is harassed on all sides, and finds no chance of being helped out of his difficulties? I repeat, therefore, that much of the present faults of attendants are to be traced to those placed over them, who do not open their minds to the lights of revelation and intellectual enjoyment, and who allow them to drag through days and weeks of their existence in sluggish lethargy. And though this participation in fault does not extenuate one iota those of attendants, which are committed against the light which they possess, it makes us keenly alive to the responsibilities and shortenings of all in authority.

The remedies for these defects in attendants.—But these remarks bring me to the chief object of these observations, which is neither to insist on the importance of the position of an attendant, nor to dwell upon their deficiencies, but to urge the remedies for these defects. There are two classes of remedies—either a radical change of the present system, or an improvement of it: upon the latter of these I would now briefly speak. In order to explain what I mean, I must here give a sketch of the present mode of hiring and educating attendants.

The usual plan is, that the proprietors of many licensed houses maintain a larger number of attendants than is required for the care of the inmates, in order that these superfluous persons may go out "on calls." The attendants are generally hired when young in life; they go through a sort of apprenticeship in the house as servants for four or five years before they are supposed to be equal to the charge of a patient out of doors. The proprietor of the house is deemed answerable for the ability and conduct of attendants; and from this circumstance, as well as the fact that he has trained them in his service, and has them ready to go out when they are re-

quired, he expects to enjoy the larger share of the profits when they are on calls. Much objection has been raised to this claim. It has been suggested that the profits should go only to the servant, and not to his master ; but it can hardly be expected with reason that the proprietor should maintain a body of persons in the way described, should make them efficient nurses, &c., without a sufficient remuneration. If this system is to be deemed irremediably bad it must be radically changed, and some public and more liberal scheme must be forthcoming ; but if first-rate attendants can be ensured by these means, and at a reasonable expense, I do not see any cause why it should not continue, at least until something better is ready for use. In some points of view this mode of attendance on the insane has less matter for injurious suspicion about it than other points of the private system ; for the length of residence of these attendants is determined by those who demand their services, whether the friends of the patient or their medical advisers, and is not subject to the influence of the proprietor, except when he himself is visiting the patient in his medical capacity. The *amount* of profits of the proprietor may require supervision ; but it is certain that some one must stand the expense of making them equal to their work, and that few would do so without an adequate return.

This is all that I would advance in favour of the proprietor ; beyond this the public have a right to demand that these attendants are rendered as suitable as they can become. This they are not at present ; and the reason why they are not so is, that the public have not as yet a sufficient hold on this body of persons. Let the Commissioners gain a firmer hold on this class, —let disgrace to those who have the responsibility attend the misconduct of the servant,—and affairs would soon be righted.

In order to improve the condition of attendants, I would urge the following suggestions :—

First. Much may be done at the first hiring of an attendant. It should then be distinctly understood that idleness will not be permitted, but that, when their regular business is not forthcoming, they should be willing to put their hand to any work that may be required of them. In a large asylum, work of a manual character is as easily obtained for the men as the women; and thus one of the great difficulties which is generally found to attend the casual employment of men (who have not sufficient regular work) is got rid of. For women, everyone knows that in any large household there is always a sufficient supply of household or needle-work. For men, in ordinary households this remedy does not generally exist; but in asylums large airing or pleasure grounds, large offices, adjuncts of the premises, &c., afford ample employment. If any man has a mechanical turn, any amount of carpentering, &c. can always be found where many insane persons are confined,—so much requires mending, so many little improvements suggest themselves. I know by experience that many men can be employed as casual hands, over and above the ordinary staff, with great utility. I know, also, that the generality of men, if they distinctly understand that this is expected of them, and are treated kindly, can and will do the work. If a distinct understanding does not exist on this point at first, numerous difficulties arise, more especially because attendants are generally spoiled and self-elated when on calls. It is well known that good and industrious men can become amateur paper-hangers, painters, carpenters, and bricklayers, at a moment's notice with great success, and great gain to all parties concerned. An asylum should be like a little colony living on its own resources; it cannot be cut and dried as other houses are. And this is a very happy circumstance for the patients; for it assures that continual bustle and life which is a means so important for attracting the attention, exciting the interest of the inmates, and producing the

happy conjoint effect of moral and physical remedies at the same time. I would build walls and pull them down again, rather than do nothing of a mechanical nature in asylums. In saying this, I am well aware that I am but reiterating the advice of many commentators on insanity; but my will and intention is but to add my evidence as to the importance of this matter. The advantages that pauper patients have over their richer brethren in asylums are well known to consist in the circumstance that the former can be easily made to assist in these interesting pursuits, while the latter generally cannot. Sometimes members of the upper classes will interest themselves in such work, and this is a most happy circumstance; but even when this is impossible of attainment, the sight of such occupation alone is a great advantage.

Secondly. To insure the right conduct of the attendants, especially the men, it is most important to have a good foreman, to act the part of sergeant to the company. The officers in recognised authority are generally too far removed by their circumstances to give that encouragement which example alone can give: they do not live in the patients' rooms, and therefore cannot keep an eye at all times on the conduct of the attendants and the happiness of the patients. In short, the necessity for this sort of official, wherever bodies of men are collected, is as well known as the acquisition of an excellent man in this position is deemed invaluable. Here, again, the attendants of either sex differ in some degree, for women much more readily acquiesce in what is required; their employment is a more generally recognised necessity; and if there is a lady residing as matron in the house, she can command their obedience to her orders, even though she may be occupied with the duties of superintendent at the same time.

Thirdly. But apart from these very obvious and well-known matters of detail, there is one desideratum of great importance, which is, in my opinion, not sufficiently recognised at present,

although it has occupied the attention of our Commissioners : it is, that the Commissioners should keep accurate lists of the names and characters of all attendants employed by proprietors. I would have a yearly statement on this subject sent in to them formed by the superintendent. This must prove to be a great hold on all parties concerned, and must tell well for him who should be the common object of interest—namely, the patient.

Such a scheme, if insisted upon, rather than only suggested (as has already been done in some degree), would, without radically altering the present system, make the attendant somewhat like a public servant. It would increase his reputation and position, and be a means of assisting in many ways all those who are rightly disposed : it would keep the attention of the authorities up to the standard which is so much required in a matter wherein, without periodical inspection, they are peculiarly liable to deal too leniently : and it would give the Commissioners a hold on all those cases of insanity throughout the country which are living in lodgings with attendants—a class which, as I have already shown, peculiarly require attention.

No doubt many other suggestions of a most valuable nature might be added to these ; I only advance them as being those which in practice have struck me as being most required.

Before I conclude, however, this sketch, I would advert to the idea of gradually effecting a radical change in this matter by the establishment of institutions for attendants on the insane, after a similar scheme to the existing training schools for teachers, nurses, &c. The spirit of the age, which stimulates into being working tailors' associations, &c., might bring such a scheme into a practically useful form. Such an association might be the result either of combination among attendants themselves, or a work commenced by philanthropic individuals, nursed by charity, and enabled at length, in its mature life, to exist as a

self-supporting establishment. Probably a combination of these efforts would be the better course. All that I would now say on this matter is, that I feel convinced it would receive general support if there were individuals possessed of energy and ability sufficient to force it into existence.

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ARTICLE I.

ON

IMPROVING THE CONDITION

OF THE

I N S A N E.

BY

HENRY MONRO, M.B. OXON.

FELLOW OF THE ROYAL COLLEGE OF PHYSICIANS;

AUTHOR OF "REMARKS ON INSANITY, ITS NATURE AND TREATMENT," ETC.

PUBLIC ASYLUMS FOR THE MIDDLE CLASSES.

FROM THE PSYCHOLOGICAL JOURNAL OF OCT. 1851.

It is but too well known that the present means available for the treatment of the insane are insufficient, and that those which exist offer much room for improvement. But if one class of lunatics, more than another, seems to call peremptorily for relief at the present day, it consists of those who are sprung *from respectable but poor families.*

For the wealthy all conveniencies are open,—whether private asylums, lodgings with medical men, or their own houses; and it is the fault of their friends more than their circumstances if all is not done for them which can be done.

For the poor, or labouring classes, the County Lunatic Asylums, the Hospitals of Bethlem and St. Luke's, &c. afford great and suitable accommodation. The economy and diet of these houses is perhaps superior to anything which they have hitherto enjoyed; the degree of respect with which they are treated equals what they have always received from and given to their companions; and the social habits of the patients are (setting their maladies aside, in which they are common) not inferior to those which they have always known.

But what is there for persons of habits as refined as their richer neighbours, and education often superior? They cannot afford the former alternative, and are too often compelled to accept the latter, and this at a cost which none but those who witness their sufferings can at all appreciate.

What can the father of a family, the possessor of an income averaging £150 or £200 per annum, do, when one son out of five becomes insane? or what can the children do for that father? What can the clergyman, the medical man, the man of small business—I may say the great majority of the middle classes—do? Can those who have always known what it is to have a home of refinement, though not of affluence,—who have been accustomed to the quiet and affection of that home (often, perhaps, all the more tenderly regarded because poor),—be thrown among the illiterate and coarse-minded, and escape with impunity not only injury to their present feelings, but, what is worse, a great obstacle to their chances of recovery? Would it not be dreadful to a person in health, living the life of a gentleman, if he were thrown suddenly into a workhouse, and treated like a pauper,—if he were not only separated from all the ties of affection (which in the case of the insane may be necessary), but surrounded suddenly by that which he has ever looked upon as a resource which, under no circumstances, he could accept? And if this is the case with a person in health, who sees and knows the boundaries of what is and what is not,—

who can exercise his intellect in contriving plans for himself, and knows that all human evils have their limits,—how dreadful would it be to minds which are oppressed with that anguish and restlessness which only those experience, who have lost the power of their judgment, and know not whither they are drifting! But more of this by and by.

Before I continue the discussion of the necessities of the case, I would state briefly the sort of remedy which appears to me to be needed. The plan which I would suggest is similar in its general object to those which philanthropic men have suggested before,—viz. *the establishment of Asylums for the Middle Classes*. Its only claim to originality is, that it differs in the details of commencing this system. But this difference is the more insisted on, from the belief that the former schemes failed, not from the want of sufficient object to attract interest, or of benevolence of intention to excite sympathy, but from attempting too much at first, and attempting this on a plan which hardly seemed to meet the exigencies of the case.

Plans, I believe, have been suggested to build a large hospital for the class which I allude to, and to charge some such sum as £100 per annum as the minimum of reception into such a hospital.

The reasons why I object to the details of such a design, while I approve of the intentions of its organizers, are—*First*: That to attempt to raise a large sum of money for the establishment of an object which is only in embryo, has the character of incapability too much stamped upon it. How difficult it is to raise a large sum when the object and scheme are well known and appreciated,—for an ordinary hospital for instance (a mode of charity more trusted by Englishmen than any others); how much more difficult, then, must it be when the advantages of the scheme are only imagined by a few, and known as facts to none.—*Secondly*: To charge a sum approaching £100 per annum as the minimum of reception into the house, in point of

fact excludes the class of persons for whom I am interested,—for how can persons of small incomes afford so large an amount?

Let us begin at the other end. Let the work grow according as it proves its worthiness; let us trust to the devotion of the few who are willing to organize it, before we appeal to the sympathy of the public, who are at present uninterested. If those deeply interested in the matter would begin in a sure though humble manner,—would set a precedent and show an example,—much might be rightly expected and certainly achieved.

Let us suppose we could open a house for 40 inmates (20 of each sex), and place the expense of opening the house on the charity of a few individuals, and the current expenses of each inmate upon his own friends. Let us consider that each inmate would require the expenditure of £50 per annum,—namely, £40 for his keep and share of attendance, and £10 for his share of house-rent, coals and candles, &c.; that the £40 per annum were defrayed by his relatives, and the £10 per annum represented the gift,—the medical attendance being the voluntary work of such gentlemen as were interested in the working of the house.

I put this forward as a sketch of a scheme which might be commenced as an experiment. I by no means imagine it to be the best that could be devised, or free from objections: I know that many will think that I reckon the expenses at too low an average; but if they consult the averages of hospitals generally, I believe I shall be found not to be too sanguine.

Families in the receipt of from £150 to £200 per annum could and would give what is not much more than sufficient for the support of their sick brother or sister under any circumstances, though they are not able to afford him such luxuries (or rather I would say necessities) as *privacy, comfort, and skill.*

Now if it were possible to open a house for 40 inmates at the rate above mentioned, those who organize the charity need only feel themselves responsible for £400 per annum,—a sum which five or six gentlemen interested and concerned in the matter would not, I imagine, have much difficulty in raising. For this sum the house could be opened, the scheme started, and, I trust, a precedent set of a most important and useful nature.

The size of this establishment would not, of course, be equal to the wants of London, even if we exclude all those above and below the class which interests us at the present moment. But it would occupy no inconsiderable position. For, if we reckon the length of residence of each inmate at 14 weeks (not an unfair average for acute cases, and acute cases are the only ones contemplated), by having forty inmates continually succeeding one another, we open our doors to about 150 cases in the course of the year. Care, of course, must be taken that no inmate should continue to reside when his case has become chronic; and therefore some period between six months and one year should be fixed upon as the extreme limit of residence under any circumstance.

To enter further into the details would be inappropriate on this occasion: each person can judge for himself of his capabilities, if conducted with untiring energy and kindness of heart.

It will be said there are many private asylums willing to receive patients at £40 per annum; but the melancholy and ready answer is, that out of this sum a livelihood is obtained or a fortune made by the proprietor. This fact speaks volumes. I will only add, that one main characteristic of what I would propose should be, that no private inducement should be held forth to any one to take a share in the scheme beyond the pleasure of being at work in a just and generous cause.

I will now enter more in detail upon some of the chief arguments which induce me to advocate the scheme.

And, 1st, I would urge some of the arguments for the general scheme; 2dly, those for the peculiar mode of carrying it out, which I have mentioned above.

SECTION I.

ON THE GENERAL NECESSITIES FOR SOME SUCH SCHEME AS THAT SUGGESTED.

My arguments for this description of charity divide themselves into two heads :—

- I. The necessities of the class contemplated.
- II. The general advantage likely to arise from adopting *public* measures for the treatment of the insane of the upper classes.

I. *On the matter of the necessities of the class I would urge—*

1. That we frequently witness the grievous distress arising from the want of such means, and that the reason of this distress is manifest enough.
2. That the class for which I plead have, independently of the urgency of their distress, peculiar claims on the attention of those who feel for the sufferings of their fellow-creatures, inasmuch as they have received hitherto peculiar neglect.

1. As an example of the wants of this class, take such cases as the following, which I select, not on account of any remarkable circumstances about them, but because they have occurred lately, and are fresh in my memory.

A gentleman, an inmate of a private asylum, where he

received and appreciated kindness, was, the other day, suddenly removed to St. Luke's, from the want of means to continue his residence elsewhere. I saw him continually while at the first-mentioned asylum: he seemed contented with his lot, conscious that he was wrong in mind, and sensible that the treatment he received was kindly meant, and equal to what he had any right to expect in his then existing condition. The head attendant, who took the gentleman to St. Luke's, told me, that it was a most distressing sight to witness his misery when he found himself suddenly herded with a class necessarily very inferior to his own; he told me that the patient wept like a child, and "that it was one of the bitterest sights he had ever witnessed."

A gentleman who had been in confinement for many years understood that he was to be removed from the private asylum in which he was, to a pauper establishment, on account of the lack of means of his friends. This person lay awake for nights in great distress of mind; he would prostrate himself at my feet, imploring me to interfere: his anguish appeared to be truly pitiable. This gentleman was not removed: indeed, the whole circumstance had arisen out of a mistake.

Another gentleman, whom I saw a few days ago, is now wandering about, and living a most wretched life of anxiety and fear, as well as danger to himself and others, because his friends cannot afford a private asylum, and cannot make up their minds to commit him to a pauper lunatic asylum. And I must say, that however much I saw the necessity for restraint, I could not but sympathise heartily in their hesitation as to adopting this the only mode at their disposal.

There has been, recently, a surgeon at Bethlem, who was for a long time under my care at a private asylum; he is now, or has been lately, classed among the worst patients there, being very offensive in his habits, &c. This gentleman is among society utterly incongruous with his former habits, and it is

very painful to witness it, though in his case there was not that degree of sensibility which exists in many.

I trust it will not be thought that I imagine that the excellent institutions of Bethlem and St. Luke do not fulfil their work liberally and honourably, because I deplore the social condition of some of their inmates. These charities would go out of their proper sphere of action did they make distinctions of social ranks : all persons admitted within their walls come in the light of destitute persons who have no other available means of support or aid through their illness. That persons of higher rank in the social scale are frequently received is certainly the case : *but this is the very point I deplore.*

I will not add any more cases of distress arising from the want of asylums for the middle classes : it is wearisome to myself to write them, when I know how common they are : how much more wearisome must it be to read their common-place record ! I only bring these few forward as instances of ordinary life.

But there are two arguments likely to be raised against the importance of this mode of charity, which I would rebut in this place : it will be said by many, that *the wants of this class are of too refined and unreal a nature to elicit a charitable work* ; and, *secondly, that the insane are incapable of appreciating even these refined desiderata.* I will say a few words on these two points separately. And

First, I assert that the ordinary history of life shows us that the absence of the refined courtesies and habits of life are no trifles.—Those persons who argue, that the forms of society are trifles,—that to feel bitterly the necessity of communing only with those with whom we not only have no sympathy but who wound our feelings, however unconsciously, at every turn, is a refinement of sensibility which charity cannot be expected to provide for,—would, I confidently believe, argue very differently if they themselves had experienced the like

disruption of what they had esteemed most precious. Does not ordinary life teach us this lesson?—the poor gentleman willingly starves before he can make up his mind to enter employment where all his associations must be grievously injured; the poor labourer allows himself to go through every suffering with cheerfulness before he will be degraded to pauperism, and what is not much better than prison discipline. Even when life is departing, and when our dying brother or sister has long ago taken their leave of its hopes and fears, we still find the power and cogency of the instinct which drives a person to cling to the very last to the little refinements of life deemed to be so essential to self-respect.

These refined sentiments are, to the man of cultivated mind, more essential than food to the hungry or clothing to the naked; and, however much the utilitarian may say, that “if a man prefers starving to degradation I cannot help him, he must starve,”—however much those in authority may hope, with all kindness of intention, to intimidate such an one into accepting relief which obliges the relinquishing the refined emotions of life, nature will not change,—he will go through dreadful sufferings before he will yield.

And it is good that this should be so, if refinement and cultivation have any real worth,—if the grosser element is not always to master the more ethereal, and if our delight in the objects of our senses is not always to overcome our delight in those more abstract operations of the mind by which man’s position is so pre eminently discernible from that of the lower animals of creation. Sad, indeed, would it be for us, should the day ever come when the voice that pleads for refined sensibility is not heard to speak with thrilling and convincing accents,—when associations are esteemed dreams, and only the grosser desires realities.

But, secondly, it may be argued that the insane do not feel the influence of these refined associations, and do, in conse-

quence, not regret their absence. This is true of certain classes of the insane, but the exact reverse of this is the case with certain other classes,—the classes I am interested in, namely, those of incipient and active insanity. The imbecile may not feel them; those who have suffered shipwreck and lie stranded unconscious on the barren shore of this most fell disease, may be and are dead to such considerations; but he whose vessel is hurrying to that shore, who sees his fate, struggles with it, and yet is spell-bound, feels all these things to a most morbid and exaggerated degree. In the stage of insanity before the imbecile stage, things are often exaggerated into importance which appear to have no importance to the healthy; an unguarded expression of an attendant is thought to mean something very terrible! a word of disrespect an insupportable insult! On the other hand, kindness of manner and gentleness of tone seem (according to the revelations of those who recover), to shed a brightness more brilliant, and more significant with meaning and intensity, than the sane can even imagine. It is a great mistake to *think that confusion of thought confers obtuseness of sensibility: just the reverse is the case. It is a great error not to distinguish clearly between active madness and imbecility.* For be it ever remembered, as a great and important truth, that confusion of mind increases mystery, and mystery even increases emotion: may I not almost add, that clearness of head dissipates keenness of feeling? For the truth of these observations let us again look into the page of ordinary life: all men suffer from delirium at times: for what is dreaming but delirium, and what is madness but such a state of our nervous organism going on in the waking state as ordinary persons only suffer from in that state of vital depression which we call sleep? Now do we not know by experience that the revelations, the images stamped in the mind in dreaming, are more lively felt than *the same* would be in the waking state. Thus, a little bodily ailment in sleep leaves the impression of a

terrible disease, conveying such a sense of woe as we hardly ever realise when awake: painful images produce in sleep horror which, if revealed to us when awake, might cause fear and anxiety, but no such sense as that of nightmare. Indeed, the emotion which we call horror, and which is so very terrible, hardly seems to belong to the economy of a cultivated mind when awake and in health: *is it not peculiar to the imperfect states of childhood, dreaming, and disease?*

Now, the reason why confusion and mystery should so increase emotion, and why clearness of head should dissipate it, is sufficiently manifest if we analyse our mental condition in this life: for we are in sight of good as of a vision ever fleeting, and yet have a constant struggle to preserve ourselves from evils, both physical and moral, which are ever forcing themselves upon us; and our chances of maintaining our ground in this struggle depend on our intimate acquaintance with the vicissitudes that surround us. We know this *instinctively*, and in consequence proportionably desire accurate knowledge. When a person is in health of mind and body, he is clearly conscious of the position that different objects bear to one another; he knows what to expect next; to what an extent things are likely to go; he knows their boundaries; and, much more than this, he knows that there are boundaries: whereas in disease all this is lost. Thus, in the sane state, we can clearly distinguish between objects of sense, objects of abstract thought, our own identity, and the relation that these several distinct matters have to one another. But how is it in delirium? We lose sight of all these divisions; we think an object of sense is a horror of mind, a dyspeptic twinge, a sense of mental woe. We do not perceive clearly our own existence and individuality: thus, as in disease, we may imagine that some little pain of our own intimates that some one else whom we love is going through great distress, and that we are only tortured by sympathy and the inability to help them. Abstract thoughts, again, are es-

cerned ; but to this the feelings of honest pride, and self-respect on the part of his relatives, generally demur."

How pitiable soever the scenes of the lowest grades of distress are, they are not more heart-rending than those of the class which is struggling to maintain a respectable footing, and sees by unavoidable illness what they have ever enjoyed fast fleeing away. This strange contrast damps all the energies of life far more than a biting poverty, which has become habitual. The workhouse-boy has hope, because he starts from the lowest ground and can only ascend ; you see his spirit elastic, his countenance cheerful. But the beggared child of respectable parents looks differently : dreams of the past are stamped indelibly upon his mind ; habits have been formed which cannot be forgotten. The winter wind, which urges the little beggar to more vigorous gymnastics, creeps into the very soul of him who has known it only as it sounded in former days in his once comfortable home. I say not this because I wish to palliate the terrible sufferings of poverty, or because I agree with those who blandly say that paupers are used to it, and so it does not signify ; I have seen too much of poverty to argue thus ; but I say it to show that there are sufferings far worse than those of simple physical want, and that the sufferings of this class are as worthy of our regard as those of the classes beneath them.

But supposing the distress of the two classes to be equal ; this class in a certain sense *deserves more at our hands than the poorer class*. For though pauperism is by no means always the result of sin, it very often is so ; and on the other hand, to have maintained a family with difficulty in an educated and respectable condition, is itself very often a sign of good intentions and good living. Wealth and realised property may argue little as to moral position,—not so with hard-earned respectability ; and yet we have assisted, and are continually assisting, the poor, while we have done little or nothing for the

class just above them. Education is a talent which each person is bound to accept when offered to him ; and yet, when it is attained, it doubtless very much increases sensibility to all the evils to which we are subject.

Such are some of the arguments by which I would plead for the class of poor but respectable persons. Did space permit, I could doubtless add many more.

II. This mode of charity will be very useful in another way than the direct good that it will do to the parties immediately concerned : I mean, that it will assist in rendering the treatment of the insane a public instead of a private matter.

There is a dilemma connected with the treatment of the insane which renders progress difficult and dangerous : it is, that all immediately connected with the insane desire (and very properly so) to keep the disease private, while the helplessness of the patient, and the peculiar nature and consequences of his affection, often stand in need of public guardianship. The history of the treatment of insanity, as it stands contrasted in old and later times, reveals this truth unmistakeably.

Thus two interests are raised. The one, the necessity of secrecy for the good of the family, as well as for the patient's own good (when he comes out into the world again) ; the other, the good of the patient under his immediate sufferings, should he happen to fall into untrustworthy hands.

Private motives (whether of the friends, or of the patient after recovery, or of the medical gentlemen and others who are paid for the reception of such patients) are amply sufficient to guard and supply the first of these interests. Private asylums, in consequence, flourish, and will flourish, unless the evils to which they are prone should prove irremediable, which is not likely to be the case, for all connected with private establishments know (if their own consciences are not a sufficient

guardian of their interests and actions) that the public keenly examines all their acts, and that in our country reform will come sooner or later, when change does not do more harm than good.

But the public are peculiarly the guardians of the other interest; and I am bound to substantiate (what is already well known), namely, that the sort of asylum contemplated in these remarks will assist in doing away with some of those abuses which the private system has encouraged.

One evil which has been inseparable from the private system is, that it has engendered rivalry rather than community of interest among medical men connected with the insane. Thus the profession has too often been degraded to a trade, rather than exalted to a science. This fact has been much felt of late,—it has given rise to many unwarrantable aspersions, and also well-founded suspicions. Now the establishment of asylums for the middle classes will be an additional source whence more liberal principles may flow. Should we succeed in London, it may well form the precedent for similar exertions in the provinces; and if, as I shall hereafter propose, the care of such institutions is not given up to individuals, the interest and advantage of fellowship in doing good will be extended. This is, however, a trite matter by this time, and has been well discussed.

But there is another point which appears to me to deserve much consideration, and which may have escaped equal observation: it is, that that neglect which the friends of patients used to evince towards their suffering relatives appears to decrease yearly, and to become obsolete in proportion as the treatment of the insane becomes a matter of public interest and care. If we compare the interest felt now-a-days by friends and relations with that which used to exist, it will be striking enough.

Now this improvement on the part of friends in recent cases may be accounted for in various ways. Amongst them it

must be remembered that education has made such wonderful progress in the present day, that persons generally begin to take a more enlightened view of the disease; they cease to look upon it as a demoniacal possession,—a fault of mind rather than body,—and view it rather in its pathological aspects, as an infirmity to excite pity rather than a fault to cause disgust. Thus the light and love of an intelligent philanthropy takes the place of the terrors of ignorance. But beyond this, I cannot but think that public opinion on the subject has its influence as it has in all other things; and that the increase of public feeling on the subject, and the decrease of the possibility of privacy, have each of them some share in the result. It may seem strange that any other motive should be required but love and innate shame to make friends attentive.

In all other diseases, as well as in most of the evils to which we are subject, we can trust to sympathy and pity,—at least in families where there is any regard for what is right; and to intrude other motives would be as injurious as unneeded. But in the terrible instance of insanity, sympathy and shame seem sometimes to have reached their boundary, and self-defence occupies their place. Let us compare insanity with some other ailment,—say consumption. In the latter case we know, by happy experience, that dying hours are soothed, and dying brethren loved more than ever. In the former, we find that the hours of delirious pain and anguish do not receive even that attention from relatives which medical treatment permits. Why is this? I have already answered it by saying, that sympathy and shame have found their boundary: human love, in these cases, is not sufficient for the crisis, and the public philanthropy is needed. In consumption, sympathy so far from being blighted grows day by day. The pain of waiting and watching is more than compensated by thoughts which have a most personal application. We, too, must die, and our body slowly decay: we want to learn how to die even in the midst of life, and here

our lesson is given; we want to have aid ourselves when objects grow dim before our fast-fleeting sense, and by this means we acquire a right to expect it. We keenly desire to watch one who has always been dear to us, growing more precious as the hour of departure approaches. The feelings are refined and sanctified, but still pleasure is attained rather than unalloyed pain. How changed is the case in insanity! We dread to look at one we have loved so horribly changed; it causes a revulsion to all our aspirations,—a shock we cannot stand: we do not expect to lose our own mind before our body dies, and therefore we do not think of acquiring a right for kindly treatment for ourselves; we do not want to learn how to suffer madness,—the need does not ordinarily exist. Thus our sympathy is as much excited in the one case as it is terribly checked in the other. And, placing sympathy aside, we find that even the baser motive of shame in some cases is not sufficient for the crisis: then the sense of public indignation is useful. In consumption, we know that all which is done and said is noted down by the sufferer and those who watch with us; but in insanity, the pleadings for more of care and attention are too often looked upon as the mere utterance of delusions; and the selfish escape under a thick cloak, which is not removed, perhaps, while life lasts. Shame, moreover, takes another form of action, and the friends are, with some degree of plausible excuse, more ashamed of owning than of neglecting their relations,—more ashamed of the stain of the disease being in the family, than the stigma of not visiting them as much as they ought.

I have a happy experience of more noble conduct, and therefore far would I be from laying a charge on the relations of the insane generally. I would make it the exception now rather than the rule; and I am free to confess, that instances of a directly opposite nature are common,—namely, where old affection survives and flourishes through scenes of a most

revolting nature, and that even in cases where moral depravity has more concern in the matter than physical defect.

SECTION II.

On the advantages of the particular scheme suggested.

I must now say a few words, however, upon my second head. Among other arguments which might be raised against the specific form here proposed for working the Asylum for the Middle Classes, it will no doubt occur to many, that in proposing a new institution it is unadvised to make it partly self-supporting and partly a work of charity, as we appeal to no one passion sufficiently;—that it is not sufficiently a charity to excite the lover of good works, nor, on the other hand, sufficiently business-like to attract those who are chiefly interested in a self-supporting or paying institution.

My answer is,—1st, that if it were wholly a charity, it would not suit the class I am advocating; 2d, that if it was wholly a marketable business, the effort would not be likely to succeed, from the fact of its novelty and untried difficulties. I would therefore appeal to the genius of charity to open the house, and to the genius of business to come to her share of the work in due course of time.

1st. If it were wholly a charity, it would not suit this class. *They would be either too proud to accept it, or obtain more aid than they deserve.* The high-minded of this class,—the poor clergyman, medical man, man of business, &c.—would not endure the idea of their friends living on alms, and eating the bread of others. But this scheme allows their actual maintenance to continue at their own expense as usual, and their medical treatment to be the gift of those who receive back again by the opportunity offered for the study of the affection: so that all which remains as a gift is the expense of lodging,

the obligation for which might be mitigated by subscription to the funds of the institution, or advocating its cause with their friends,—and these conditions are surely such as any open-hearted and generous man might easily receive without indignity. Again: if it were wholly a charity, this class would receive more than they actually are in need of. Heads of families possessing £150 or £200 per annum might and should afford £40 per annum for a sick member: they must support him any how at a greater expense than the healthy members of that family, and at a cost something like this; though £100 or £200 per annum (sums which are properly enough expected in private asylums) are wholly inadmissible here. No doubt there are many good beggars, with incomes such as I have described, who would receive willingly *all* in charity if they could, and cast their suffering relative into the hands of others; but it is not our object to encourage this mode of proceeding.

2d. To attempt a self-supporting institution at once would, I fear, fail of success: it would not, at present, ensure public support,—the public would feel that their armour had not been proved, and that they had to cope with great difficulties. We must have a more than ordinary spirit at work to start what ordinary strength may well continue.

I by no means desire that the scheme should not gradually become an entirely self-supporting one; indeed, this would be its most healthy end, and I trust, in consequence, that such would be the case; but it is one thing to prepare and bring the stone to the verge of the hill, and another to keep it rolling when once set in motion. Men of business well know that schemes continually succeed after a time, though the organisers of them are unequal to the task; and that a spur is wanted at the beginning which is not needed afterwards.

In fixing the sum of the whole expenses of each individual at £50 per annum, I am aware that I shall be charged by many with making it too small, considering that washing and

attendance are included in this charge : but I do not speak without consideration and experience. I am intimately connected with a charity where respectable poor persons are received who have been thrown out of employment owing to no fault of their own, and who are received within the walls of this refuge in order that full employment may be found for them by the gentlemen who visit the institution, and that their strength may be restored by good and ample diet. The inmates of this charity have meat every day as much as they want (except on one day, when they have fish and soup) ; their diet in other respects is liberally conducted, and on the principle of restoring their strength, which has been previously exhausted by privations, and the average expense of this institution (which contains between 40 and 50 inmates,) is only 5s. a week per head in food ; about £15 a year per head. This has been the case for some years now, and *is a good example of the union of economy with liberal allowance*. I grant that in the first year or two the diet was more expensive, though not better ; but this was simply the fault of want of experience and good superintendence. I could add many more arguments in favour of the scheme which I have proposed, but refrain, from the belief that I may easily become tedious, and the desire not to appear, by hedging it round with defences, to view this scheme as by any means perfect. All that I wish is, that something of the sort should be attempted ; and I wish that my suggestions may be added to those which have been urged on the same subject before, and with greater ability.

Before I conclude, however, I would make one or two general observations.

I esteem it to be very necessary that four or five medical gentlemen, of experience and reputation, should be connected with the control of such a charity ; not only that by this means gratuitous medical aid may be given with ease, by the division

of labour, but more especially, that this would be the only safe mode of removing the charge of deriving personal advantage from it. If one or even two conducted it, it might be said that such a charity had become but the feeder of their individual private practice (a common and not unnatural charge urged against medical charities). Moreover, it would lose the great advantage of being a means of uniting those connected with the care of the insane. Any honourable mind engaged in this branch of the profession would feel the weight of these charges peculiarly : they would very rightly deter a man from entering the arena. We may stand with impunity many aspersions, but *this sort* of charge is one which all should desire to escape from, both for his own well-being, as well as that of the work in which he is engaged.

Another point is, that very rigid rules must be drawn up as to the choice of inmates. No doubt many would desire to avail themselves of the advantages of such an institution, who can well afford more expensive modes. These should be excluded. Those also whose position of life is at all suited to county lunatic asylums would of course be out of place here.

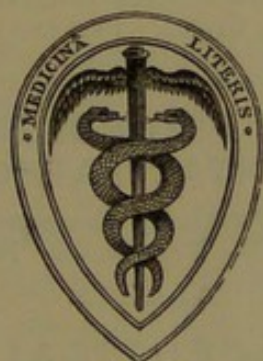
I am free to confess that the interest which has lately been excited in my own mind on this most important subject is so great, that I can well believe I view it as a hobby, and as a panacea, too much ; still I must own that the more I reflect on the subject the more it grows upon me, and the more am I inclined to wonder that this idea which has been contemplated so long by great and good men, has not been embodied into a reality. Should it ever exist, and should good results spring from it, it will only be another instance of how continually we are on the verge of finding a treasure and pass it by unconsciously. I say this the more urgently from the great dislike which I as an individual have to an undue dread of novelty. Our countrymen seem instinctively to be adverse to what is new, and though another quality of their nature makes

ample amends for this, causing them to go far ahead of their more volatile neighbours in the long run, *namely, resolutely adhering to a change which they have once proved to be good*, I must own they often deal unjustly with a matter, simply because they have not tried it, and will not do so.

But I have said enough: I will only add my conviction that should such an institution be contemplated, those concerned in it must unite with a more than ordinary zeal and good-will in carrying into execution.

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