

Defects in the moral treatment of insanity in the public lunatic asylums of Ireland, with suggestions for their remedy, and some observations on the English asylums / by John A. Blake.

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DEFECTS

IN THE

MORAL TREATMENT OF INSANITY

IN THE

PUBLIC LUNATIC ASYLUMS

OF

IRELAND,

With Suggestions for their Remedy,

AND SOME OBSERVATIONS ON THE ENGLISH ASYLUMS.

BY JOHN A. BLAKE, M.P.,

Author of "State of the Poor Labouring under Diseases of the Eye and Total Blindness in Ireland."

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OBJECTS

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CONTENTS.

	Page
Subject brought under notice of House of Commons	1
Sir Robert Peel	1, 2, 11, 63
Sir Walter Crofton's Prison System	3, 36
Sir Thomas More's specific for Insanity	4
Treatment of Insanity during the Middle Ages	4
The Monks in care of Lunatics	5
Martin Luther... ..	5
St. Vincent de Paul	6
The Horrors of the York Asylum	7
William Tuke	8
The Society of Friends' efforts for the Insane	8, 9, 10.
Condition of the Insane in Ireland down to 1817	10
Establishment of District Asylums	10
Opinion of eminent authorities on Moral Curative Treatment	11 to 20
Royal Commission to inquire into state of Irish Asylums	20
Evidence of Medical Officers regarding the want of sufficient means of recreation	} 20 to 29
Asylum for Criminal Lunatics	29
Want of sufficient means for amusing and occupying Patients in Irish Asylums	} 30 to 46
Richmond, Belfast, Cork, and Sligo Asylums	31
The Turkish Bath	32
Inspection by Grand Juries	44
Bethlehem Royal Hospital	46 to 52
Dr. Hood	46
Injurious system in England regarding Patients in Workhouses	53
Do. Single Patients	54
Statistics of English and Irish Asylums	58 to 65
Mode of calculating Recoveries	65
Leicester and Derby Asylums	66 to 74
Qualifications of future Candidates for office of Resident Physicians... ..	83
Additional Inspectors	83
Dietary... ..	86
Disposal of incurable cases	87
Paying Patients	88
Chaplains and Religious Instruction	88, 89
Patients in Irish Asylums not largely inferior in class to the Eng- lish patients	} 91
Inadequacy of means of occupation and recreation	92
Lunatic Colony of Gheel	95
Power of Inspectors to effect improvement	95
Supineness of successive Administrations	95
Universal character of the disease	96
Conclusion, and expression of cheerful hope that extensive ame- lioration is close at hand... ..	} 99

History

The history of the United States is a long and varied one, beginning with the first settlers in the early 17th century. The country was founded by a group of English Puritans who sought religious freedom and a better life. Over the years, the nation has grown and changed, facing many challenges and triumphs. The American Revolution was a pivotal moment, leading to the birth of a new nation. The Civil War was another major event, shaping the country's future. The 20th century brought significant changes, including the rise of the industrial revolution and the civil rights movement. Today, the United States is a powerful and influential nation, with a rich and diverse culture.

DEFECTS
IN THE
MORAL TREATMENT OF INSANITY
IN
PUBLIC LUNATIC ASYLUMS.

A few days before the termination of the last Session, pursuant to a notice given, I called the attention of Sir Robert Peel to the want which existed in the Irish District Lunatic Asylums, of sufficient necessary appliances for promoting the happiness and recovery of the insane.

Circumstances over which I had no control, prevented the subject being brought forward at an earlier period, Mr. Cardwell having been closely occupied with Irish affairs, particularly in the laborious duties (which he so ably discharged) as Chairman of the Committee on Irish Poor Laws; and when at length a day was arranged, which suited his convenience, I anticipated that the duty would have devolved on him of dealing with the question on the part of Government. Two or three days, however, before the time arrived when the question would have been brought forward, he vacated the office of Chief Secretary for Ireland, and I therefore contemplated withdrawing my notice until the next Session. Sir Robert Peel, however, intimated to me that he would be glad if I would bring it forward immediately, as he was desirous of hearing anything I had to urge concerning the Irish Asylums. This will explain why I introduced so important a matter at a late period of the Session, and on the accession to office of a gentleman who could not be so well acquainted with the condition and management of the Asylums as his predecessor. From what I have stated, it will be seen that the delay arose in order to suit the convenience of Mr. Cardwell. I did not contemplate his quitting the office he then held, and would have postponed the affair until Sir Robert Peel should have acquired more practical knowledge on the subject, only for his desire to the contrary. He was, of course, obliged to rely on the information furnished to him respecting the Asylums.

To some important portions of his defence of them, in reply to my statements, I should have taken exception, were it not that, owing to the shape in which I put my motion, the forms of the House precluded me from replying. My chief object, however,

was gained: I directed public attention to what I considered to be the defects in the Asylums. And, from the recent changes that have taken place in these institutions, it is evident the Chief Secretary has redeemed the promise he made on the occasion in question, by making himself personally acquainted with their requirements. When next I bring the matter forward (and which I hope to be able to do during the present Session), I expect the personal knowledge which Sir Robert Peel has acquired on the subject will induce him to think that my representations regarding the Asylums are fully justified by what he has since seen.

As there has been much misrepresentation and misconception respecting what I really did say concerning the Irish Asylums as contrasted with the English, I wish, before proceeding further, to set this part of the matter right. I did not state that I considered the English Asylums, taken as a whole, were better than those in Ireland. The following quotation from Hansard proves that in the House of Commons I said the very reverse:—

“In describing the Asylums, (Bethlehem, Derby, and Leicester,) he (Mr. Blake) by no means meant to convey that they represented England generally—by no means—as he believed the Irish Asylums, taken as a whole, were beyond the English ones; but there were in England a few far beyond the others, and better than anything in Ireland, and his object was to bring the latter up to the right standard.”

Those who have combated my views in the House of Commons, as well as in some of the Irish journals and medical publications, appear to find their assertions, as to there being no just grounds of complaint against the system pursued in the Irish Asylums, on account of the alleged greater number of recoveries in the latter over those of England and Scotland.

Granting the number of recoveries to be more (though I much doubt whether some of those Asylums in which the return of recoveries appears the highest, are not in *reality* about the lowest as regards *bona fide* recovery, which I will explain further on), still it cannot be contended that on that account we are to assume that the system pursued is consequently the best that could be adopted, and that we are to decry all efforts for its improvement. True, it may be better than that pursued in some other places—(certainly far beyond that of Scotland a few years ago, where in many instances the barbarous cruelty practised towards lunatics would have disgraced the fourteenth century)—but where the science of the treatment of insanity is, in the opinion of the best authorities, still one that is very far from having arrived at perfection, and when it is manifest to anyone acquainted with the subject, that the Irish Asylums fall short, in many important particulars, of what they ought to be as regards curative treatment, surely it is as unreasonable, as it is certainly impolitic and inhuman, to adopt towards them the “*laissez faire*” policy, to which some are disposed, because they may appear better in some respects than others. Being better than

something else manifestly bad, is not sufficient to justify the cessation of all attempts at improvement. If this principle were adopted the noblest efforts that have been made to benefit mankind would have been paralyzed, and suffering humanity would have paid the penalty.

At the time when Howard and other philanthropists were labouring for Prison Reformation in England, and supporting their appeals to the justice, humanity, and policy of the nation, by reciting the horrors of the Prison system, in operation even in the superior Gaols, and showing how it had tended more to brutalise the prisoner and perpetuate crime than to reform, I believe the Prisons of England were in most respects superior to those in any other country in Europe. There was nothing, probably, tended to impede the efforts of these good men more than this fact. It took many years of patient labour on the part of the pioneers of the enlightened and opposite system that has since been adopted, to induce even a partial relinquishment of the horrors perpetrated on those who came within the grasp of the law, with a view, as it was then thought, of repressing crime; and for a very long time, many well-disposed persons regarded with apprehension the attempted innovation on a system which relied for its success on the huddling together of the convicted and untried, and often innocent prisoners, in a common dungeon, supplied with bad and insufficient food, and subjected to the most brutal treatment.

Those who, fifty years ago, upheld the then severe and sanguinary code as the best, both for the repression of crime and the reformation of those subjected only to secondary punishment, would now, if they could but witness the altered state of things, hear with incredulity that a system which, according to the ideas of the age in which they lived, would have appeared to offer an absolute premium to vice—not only checked it, but sent the criminal back to society, instead of being, as formerly, an object of terror—not only, as a general rule, thoroughly reformed, but, as Capt. Crofton, the able head of the Convict Department, has proved (my remarks, of course, having reference only to his admirable system), often eagerly sought for by those anxious to secure trustworthy servants.

In the treatment of Insanity it has been very much as with the treatment of Crime. Though the multitude in each age were ready to pronounce the systems in existence, if not perfection, at least difficult to be improved on, succeeding generations have looked back with horror and astonishment on the absurdities, and too often hideous cruelties (particularly as regarded Lunacy) perpetrated, generally with the very best intentions, and only serving to confirm and perpetuate the evils sought to be remedied.

So late as the sixteenth century, the prevailing opinion as to the cause of insanity attributed it altogether to demoniacal influence;

and, beyond physical restraint, no remedial treatment was resorted to, except the exorcisms employed to relieve the patient of the evil spirit with which he was supposed to be possessed.

Somewhat later, severe beating, starvation, chains, darkness, and close confinement, were regarded as the only specific for the malady. During the administration of Sir Thomas More, one of the most enlightened, and perhaps humane men of his time, these means were considered, says an able author, "the best intellectual restorative."

We talk figuratively, after Shakspeare, of cudgelling an idea out of our brains; but our ancestors, it would seem, practically reversed the meaning of the phrase, in attempting to force the "extravagant and erring" senses, when caught out of bounds, to "hie back to their confine," by a prompt and merciless infliction of stripes.

The great Chancellor appears to have paid a good deal of attention to the subject of Insanity, and did not think it beneath his dignity to superintend in person the administering of what was then considered the best curative process; as he states himself, on one occasion, he superintended in person the infliction of a severe beating on a maniac, opposite his own residence, in the public thoroughfare in Chelsea; and defends himself from the accusation of torturing heretics, by asserting that the torments he inflicted were on Lunatics for the purpose of promoting their restoration to reason. (1)

On the Continent the condition of the Lunatic, down to a late period, was quite as bad as in England, as in Esquirol's "*Maisons des Alienes*" we find that in Ghent the intractible were enclosed in wooden boxes or cages. At Mareville the cages containing the patients were placed in cellars. At Lille they were confined in subterranean holes. At Saumur they inhabited cells without windows, and were provided with wooden troughs, filled with oak bark as beds.

The religious orders abroad, in many instances, undertook the care of the Insane, and attempted a more humane and enlightened treatment, though in some cases they, too, were not free from the popular prejudice, as to the necessity of a severe discipline; but, as a writer remarks, "to ascetics, however, who themselves shrunk from neither lash nor torture, this regimen might appear both beneficial and reasonable."

(1) "Another was one who, after he had fallen into these frantic heresies, soon fell into plain frenzy, albeit he had been in Bedlam, and afterwards by beating and correction gathered his remembrance. Being, therefore, set at liberty, his old frenzies fell again into his head. Being informed of his relapse, I caused him to be taken by the constables, and bounden to a tree in the street, before the whole town, and there striped him till he waxed weary. Verily, God be thanked, I hear no harm of him now, &c. 'We must, therefore,' continues Lord Campbell, 'come to the conclusion that persons accused of heresy were confined in his house, though not treated with cruelty, and that the supposed tortures consisted in flogging one naughty boy, and administering stripes to one maniac, according to the received notions of the times, as a cure for his malady.'"

In France Convents were, until the time of the Revolution, the only places where the Insane were treated anything like human beings, and in other Continental countries the Monks discharged the same trust for nearly two centuries, until the period of the Reformation; and impartial writers have given them the credit of having been the first to devise a system which, in our day, has proved so eminently successful in the treatment of Insanity. And, if these religious communities had not been dispersed by the destruction of their establishments, I have no doubt a more judicious and benevolent course in the treatment of Lunacy, now generally practised, would have been in operation at a much earlier period.

Martin Luther appears to have been as much opposed to the views of the Monks regarding the treatment of the Insane, (2) as he was on religious questions. Time has proved him wrong, at least on the former point, though it must be admitted that his proposed mode of dealing with a mind diseased had the merit of simplicity. (3)

When the man—most renowned man in his day for wisdom and learning—“More the mild, the gentle, and the good”—considered the best mode of making a Lunatic “gather his remembrance” was to beat him until he “waxed weary,” and Luther contemplated a more summary proceeding, it may be readily conceived how dreadful must have been the condition of those afflicted beings, and how little hope must have existed of their recovery. And, although the two centuries that followed produced but little in the way of general amelioration, yet, towards the close of the sixteenth century, appeared one of those men who, prompted by a God-

(2) It was the duty of those functionaries not only to pray for the restoration to reason of their brethren who were possessed (the *energumes*, as they were called) and look after their daily meals, but also to take heed that they were busily employed in wholesome exercises, such as sweeping the Church pavement, &c., by which idleness might be prevented, and the temper thereby deprived of a favourable opportunity of assault. This latter injunction contains the germ of one grand modern improvement in the treatment of madness—namely, the systematic employment, where practicable, in some industrial pursuit, of those who are labouring under its attacks; another proof, if any were wanting, of the very little there is of real novelty under the sun.

(3) Martin Luther's proposed mode of dealing with cases of demoniacal possession was a very summary proceeding, and contrasts unfavourably with the temperate and rational measures just adverted to. “Idiots,” he says, “are men in whom devils have established themselves, and all the physicians who heal these infirmities, as though they proceeded from natural causes, are ignorant blockheads, who know nothing about the power of the demon. Eight years ago, I myself saw a boy of this sort, who had no human parents, but had proceeded from the devil. He was twelve years old, and in outward form exactly resembled ordinary children. He did nothing but eat, consuming as much every day as four hearty labourers or threshers could. In most external respects, he was, as I have mentioned, just like other children; but if any one touched him, he yelled out like a mad creature, and with a peculiar sort of scream. I said to the Princes of Anhalt, with whom I was at the time—‘If I had the ordering of things here, I would have that child thrown into the Moldau, at the risk of being held its murderer.’” But the Elector of Saxony and the Princes were not of my opinion in the matter.—*Lunacy and Lunatic Life.*

given instinct of humanity, and sustained by that strength which faith in the consciousness of being engaged in a good work alone could give, made heroic and well-directed efforts to induce a more rational and less cruel treatment of the insane. To him pre-eminently belongs all the glory of having inaugurated the work which Esquirol and Pinel subsequently followed up abroad and Tuke at home, and which is now being developed by many who like Doctor Hood, of Bethlehem, deserve a foremost place amongst those who have, under God's providence, restored Reason to her seat in many a darkened mind, by carrying out to as full perfection as circumstances admit of that system, to induce the more extensive adoption of which I have been induced to write these pages. An eminent Protestant writer on Insanity has left a noble record of his sense of St. Vincent's exertions on behalf of the Lunatic. (4)

Though St. Vincent's efforts induced others to follow up the good work he had begun, still ignorance and prejudice frustrated for nearly two centuries the results that should have followed from his labours.

Down to our own day the treatment of the Deranged was only a convertible term for cruelty and oppression—close confinement in dark dungeons, chains, and lashes, being the usual methods employed—those who most merited compassion being looked upon in the light of criminals, and were generally sent to herd with felons and murderers; and, even when separate places of detention were provided, the change, until very recently, was not one for the better, as it was shown in the evidence before the House of Commons, in 1815, that even in Bethlehem, regarded as it was as the model Institution of the kind in the Kingdom, that constant incarceration in unwholesome cells, manacles, and stripes, were the order of the day. The author of "Asylums as they Ought to Be," says (1837):—"The reign of humanity in Bedlam commenced only about

(4) Until the noble efforts of St. Vincent de Paul were crowned with success, the madman was, on the Continent of Europe, either expelled from society as an outcast unworthy of care or compassion, or burnt as a sorcerer unworthy even of those wild forms of justice which then prevailed. This pious man was a divine, and is now a saint of the Catholic Church. If canonization ever was justifiable or excusable, it was in this instance. St. Vincent sacrificed everything for these outcasts; he journeyed from land to land to preach and propagate the cause of charity; his mission was to bring the sympathies of our nature to their proper channels, to proclaim that the darkened mind was as much the visitation of God as the darkened vision, and that Christianity demanded of the humane and virtuous and powerful to protect, and the skilful to relieve, the one as well as the other. The hearts of nations responded to his call. He became the emancipator of the diseased, the reviled, and persecuted, during all succeeding ages. Of the same type and mould as La Rochefoucauld and Howard, he worthily obtained the glorious epitaph, "The father of the poor, the steward of Providence." May the spirit and enthusiasm which actuated him be ever present to those who are now entrusted with the good work which he commenced. He was at the time of his labours a monk, and from this circumstance perhaps, or because these recluses were then the principal depositaries of all knowledge, scientific as well as religious, in the countries to which his exertions were confined, to monks was the care of the insane confided.

twenty years ago. Before that period the Lunatic might be truly said to live under a reign of terror. Immured in a wretched and comfortless prison-house, and left to linger out a lifetime of misery, without any rational attempt at treatment, without employment, without a glimpse of happiness or a hope of liberation, he was terrified or starved into submission, lashed, laughed at, despised, forgotten. The great objects were—confine, conceal; protect society from his ferocity; protect his sensitive friends from the humiliating spectacle of such a connection. Regarded as wild beasts, all maniacs, indiscriminately, were treated as such; nay, the imprisoned tiger enjoys a milder fate, for his keepers have an interest in his health and preservation. That this is a mitigated, rather than an exaggerated summary of horrors, will presently appear." (5) Instances, too, are recorded of the most dreadful barbarity practised towards those who, if fortunate enough to have been placed under the present *regime* of that noble Hospital, would probably have been restored to society, and during their detention would, so far from being objects of terror and subjects of brutality, would have enjoyed kindly intercourse with those entrusted with their care, and no effort spared to diminish the gloominess of the dark hours, inseparable even with kindest treatment, from alienation of reason.

The horrors of the York Asylum (brought to light about the same period) are too well known to need recapitulation, and afford

(5) William Norris, formerly an officer in the Navy, had been confined fourteen years in consequence of attempting to defend himself from what he conceived to be the improper treatment of his keeper who was a habitual drunkard and at the time intoxicated. He was fastened by a long chain, which, passing through a partition, enabled the keeper, by going into the next cell, to draw him close to the wall at pleasure. To prevent this, Norris muffled the chain with straw so as to hinder its passing through the wall. He was afterwards confined by a stout ring made to slide upwards or downwards on an upright massive iron bar, more than six feet high, inserted in the wall. Round his body a strong iron bar about two inches wide was rivetted. On each side the bar was a circular projection, which, being fashioned to, and enclosing each of his arms, pinioned them close to his sides. This waist bar was secured by two similar bars, which, passing over his shoulders, were rivetted to the bars on his shoulders by a double link. From each of these bars another short chain passed to the ring on the upright iron bar. He could raise himself so as to stand against the wall, or in the pillow of his bed in the trough in which he lay; but it was impossible for him to advance from the wall on which the iron bar was soldered, on account of the shortness of his chains, which were only twelve inches long. He could not repose in any other condition than on his back. His right leg was chained to the trough, on which he had remained thus encaged and chained for twelve years. The unfortunate being thus impaled was of great muscular power; his wrist was formed in so peculiar a manner as to render all manacles useless, and his disposition is described as bloodthirsty. I presume he was affected with homicidal monomania. Notwithstanding these very formidable qualities, when we learn that one time he was so docile as to be useful to the servants, that during his encasement in irons he spoke rationally, seemed to understand all that was addressed to him, and to recollect all that he had suffered; that he occupied his time in reading, and that when partially liberated he conducted himself with propriety; the amount and nature of the precautions adopted appear to have been unnecessary and oppressive.—*Evidence of Mr. Wakefield and Mr. Simmonds, 1815.*

one of the many instances of good springing out of evil; for if the administration recorded of that den of cruelty had not been brought to light, the efforts of Mr. William Tuke might never have taken place, and in England, at least, the hideous cruelties perpetrated on the Insane might have gone on much longer. 144 human beings are, with good reason, supposed to have been made away with by foul means, besides the four who perished in the conflagration, which there is too much reason to suppose was caused by those connected with the Establishment, when an investigation was about to take place, for the purpose of destroying that part of the building which was most obnoxious to inquiry and remark.

Foremost in every great work for the benefit of the human race, humanity owes, amongst its many obligations, to the estimable Society of Friends the important one of their having been the means of exposing a most iniquitous and cruel system, and also been the first to found in England the only establishment deserving to be called an Institution for the Insane; and whenever those pioneers who have zealously and successfully laboured in the cause of the poor Lunatic are mentioned, the name of the Quaker, William Tuke, deserves an honoured place beside St. Vincent de Paul, Esquirol, and Pinel. I feel it is but just to him, and the Society to which he belonged, to give in *extenso* what the talented author of "Lunatic Life" has said regarding his efforts and those of the Friends at York:—

"But the coincidence, to which we referred a page or two back, is rendered much more complete by the fact, that in the very same year (1792) the 'revolution' of ideas, regarding the management of the Insane broke out in another quarter of the world, where the proceedings of Pinel had not yet been heard of, and thus may be seen to have had an independent origin in two distinct countries at nearly the same identical period of time.

"The movement in question originated among the members of the 'Society of Friends,' or, as they are more commonly called, 'Quakers;' a set of people of whom John Bull, in his more pompous mood, is as much given to sneer at and quiz, as he is prone, when conning the Nelsonian Catechism, to bestow the full measure of his hatred and contempt upon Frenchmen.

"The wisdom and liberality displayed in fostering such feelings by an Englishman, who is in full enjoyment of his senses, it is not our business here to discuss; all we contend for is, that as soon as those senses become at all impaired, he will be bound in gratitude to employ the sound remainder in blessing the name of Quaker and Frenchman, so long as his tongue is permitted to articulate.

"At a meeting of the 'Friends,' at York, the late Mr. William Tuke, one of their number, brought forward some proposals for the formation of an establishment for the use, principally, of the Insane members of his own community. These proposals were embodied in sundry prospectuses, issued in the same and the ensuing year, from which it appears that the motives which chiefly influenced the original promoters of the scheme were as follows:—'It was conceived that peculiar advantages would be derived to the Society of Friends by an institution of this kind, under their own

care, in which a milder and more appropriate system of treatment than that usually practised might be adopted; and where, during lucid intervals, or the state of convalescence, the patient might enjoy the society of those who were of similar habits and opinions. It was thought that the indiscriminate mixture, in large public establishments, of persons of opposite religious sentiments and practices—of the profane and serious, the profligate and virtuous—was calculated to check the progress of returning reason, and to fix still deeper the melancholy and misanthropic train of ideas, which, in some descriptions of Insanity, impresses the mind.'

"In conformity with the views thus set forth, subscriptions were collected, and a building, calculated for the accommodation of thirty patients, raised on an elevated spot of ground, half a mile from the walls of the city of York. It stood encircled by a little demesne, consisting of about eleven acres of land, and was opened in 1796, under the name of 'The Retreat,' which it has borne ever since. Here the Quakers proceeded to apply to the management of the deranged members of their community those principles of quiet and enduring self-command, which had enabled their ancestors, in by-gone times, to withstand, without having recourse to arms, the fierceness of religious persecutors in the Old World, the untutored savages in the New. They were the first to discard to a far greater extent than had hitherto been sanctioned in England all methods of forcible coercion, which had long prevailed, and to substitute systematic measures of toleration and forbearance. They introduced among their patients many light recreations and amusements, such as were judged suitable for attracting or diverting the attention, without making any call upon the higher faculties of the intellect. The most easy and ordinary operations of the flower-garden, the tending of rabbits and poultry, games of skill, reading, exercise in the surrounding grounds, and so forth, were the means which these practical, longheaded, and benevolent people very rationally considered were more likely to soothe irritability, or even to calm decided violence, than the time-honoured practice of severity and physical control. The success met with in this laudable undertaking was so great that the founder of 'The Retreat,' Mr. Tuke, thought it right to make public the plans which had been found so eminently serviceable, and to recommend their adoption in all similar institutions. This was considered, as in effect it was, an attack upon the management of the Lunatic Hospital in the adjoining city of York, and Mr. Tuke's volume called forth the animadversions of one of the principal directors of that establishment.—The dispute was continued; but the man in office soon discovered, to his dismay, that in contending with an antagonist belonging to a sect 'whose coolness is a proverb,' he was burning his own fingers pretty severely.—The city of York was involved in a paper war, which terminated eventually in the thorough reform of the institution, the state of which was the subject of controversy, but not until, as we had occasion to relate a few pages back, one entire wing of the building had been wilfully committed to the flames. The Quakers followed up their victory in their own quiet manner, saying but little, while doing much. They increased their buildings, bought more land, and the reputation of their method of managing 'The Retreat' having become noised about, the people of other persuasions were glad to avail themselves of the opportunity which these extended accommodations afforded of placing their afflicted relatives under such care, and paying liberally for the good treatment they received. Thus they were enabled to enlarge the resources of their charity, and to assist many of the poorer orders, by admitting them to its benefits at an expenditure suitable to the means of their families and connexions. B

“Such is the history of the introduction into this country of a Christian, benevolent, and rational system of treating a disease which appeared to have affected the understanding of the nurse and the doctor in an almost equal degree with that of the patient himself, whose degradation into the condition of a savage wild beast gave a title of little better than that of a ‘keeper,’ whose duty it was to take charge of his person and to be the guardians of his health.

“The merit of originating these great improvements on this side of the Channel is the undoubted property of the Quaker community, who, however they may have failed hitherto in inculcating their love of peacefulness and forbearance on those who have reason to guide them in the pursuit of happiness, can always point to ‘The Retreat’ as the first harbour constructed in England, where the madman could with safety seek refuge from the scorn, derision, and buffetings of a merciless world, and in which he found, in reality, what in his case was at one time, among other Christian sects, little better than a mockery and a semblance—videlicet:

“ ‘A house to rest, a shelter to defend,
Peace, and repose, a Briton, and a Friend.’ ”

In Ireland the state of things with regard to the Insane, down to a late period, was quite as bad as in England, but there do not appear to have been the same instances of cruelty.

Down to 1808, there was only one Asylum in the Country, and some years later, after others were established, the condition of the inmates must have been deplorable. Mr. James Rice stated, before a Committee of the House of Commons, in 1817, in reference to the Limerick Asylum, that it was such as we would not appropriate to our dog kennels. This account conveyed, I believe, an accurate idea.

The District Lunatic Asylums, similar in most respects to the English County Asylums, about the same time were established, and both were, as regarded construction, management, and the care and treatment of the patients, immeasurably beyond what had previously existed. Indeed, it is but just to say that they quite came up to the best conceived ideas of the time, as to what Asylums ought to be, as then really commenced something deserving to be called a curative system.

To this may be added, considerate treatment better food, and provision for frequent inspection by trustworthy officials; so that there was everything in the arrangements made for the care and treatment of the Lunatic, which proved the liberal and enlightened spirit which had succeeded to the ignorant, inhuman, impolitic system which had preceded. I regret, however, to have to express my belief that the anticipation which might be fairly indulged in, that those Asylums would have fully kept pace with the progress of the times in every respect, as regarded the treatment of Insanity, was not in one important particular realised to as great an extent as might be wished. I allude to the very great deficiency in the way of sufficient and suitable provision for

the recreation and employment of the patients, so far as the same would be calculated to promote their happiness and recovery.

In this paper I mean to confine myself altogether to dealing with this defect in those highly valuable Institutions, as it is one which admits of being very easily amended; and I fear if I were now to touch on other topics connected with Asylums, that the digression would not only lead to these pages being extended to a length which might risk their not being as fully read by those whom I am desirous should peruse them, but also weaken the chance of my being able to direct as much attention to the particular deficiency in the treatment of the Insane in Public Asylums in this Kingdom, which, beyond everything else, calls for speedy amendment, and which, when remedied, will render those institutions, particularly in Ireland, almost everything that can be desired. It is not my province to touch on the medical treatment, as it is a part of the subject on which I am not competent to pronounce, but am willing to assume that on this point there is nothing to complain of; but, with its important auxiliary in the cure of the mental malady the case is very different; and, existing as there does, so intimate a connexion between the mind and body, which are, as Sterne says, "Like a cloak and its lining, if you rumple the one you ruffle the other"—that when the medical and moral treatment do not go thoroughly hand in hand, we cannot expect satisfactory results.

It may appear presumptuous for a non-professional person to pronounce as to Asylums being deficient in moral treatment; but the right has been conceded them, inasmuch as, according to the statement of Sir Robert Peel in the House of Commons, (acting, as I suppose he then did, on the suggestion of the higher officers of Asylums, not being then personally acquainted with the subject,) that the remedy for such defects, as I point out, rests chiefly with the local Boards.

In dealing with the part of the question I am now entering on, with respect to what I consider should be the moral treatment of insanity, I shall confine myself as much as possible to giving the opinion of the very highest authorities on the subject, and will contrast the results between what I deem to be the very best systems in operation and inferior ones. I regret want of space precludes me from detailing the opinions of the earlier reformers, like the courageous and enlightened Pinel, as I must confine myself to the most distinguished of those who, in our own day, have most successfully laboured in the good cause.

Dr. CONNOLLY, of Hanwell, says :

"It is difficult for the Physician to an Asylum to make others comprehend how important many influences, in themselves apparently trifling, become, when the aggregate of their operation

is continually applied to disordered minds. Vulgar approbation is easily obtained by occasional display, although the general character of an Asylum may be that of a mere Workhouse, or place of safety, in which nothing is habitually done, beyond employing the patients and keeping them quiet, for their recovery. The faults of commission may be few, and of omission many. The wards may be generally quiet. There may be a solitude, falsely called peace. Contrivance may secure this at all ordinary hours of public inspection, and especially on committee days, and yet the hours of rising, and of going to bed, and of meals, may be often signalized by irregularities and violence, and the patients may pass a very large part of their time unoccupied, unamused—their hourly comforts little cared for—their recreations quite disregarded; so that many of them become more and more listless, and even at length incurable from neglect. No reflecting and experienced physician can walk through the wards of any large Asylum without seeing proofs of this; and for the effectual counteraction of such an evil, and the calling forth of daily and hourly resources yet unemployed, there seems to be required an energy and ingenuity on the part of superintendents, seconded by proper authority over a sufficient number of officers and assistants, such as cannot yet be freely exercised in any Asylum. Much, therefore, remains to be done, which cannot be done at present.

“I must again observe that all the arrangements which I have recommended, and all other arrangements for the health and comfort of the Insane, can only be effectual as a part of one great and uniform system, of which humanity and anxiety to cure or to relieve the patients constitute the vital principle. In devising out-of-door recreation, it is necessary to avoid such as would endanger heedless patients, or be capable of being turned to mischievous purposes. Within doors similar care should be extended to providing recreation for the patients during the winter days and evenings. Each ward in which the patients are generally tranquil, should be provided with books, journals, magazines, illustrated papers, picture-albums, bagatelle, and draught-boards, dominoes, cards, puzzles, soft balls, and even some descriptions of playthings; and the supply of these means of amusements should be carefully kept up. If music is encouraged among the patients, kind people will be found to furnish instruments, which could not properly be bought for a County Asylum. There are three pianos at Hanwell, two of which were presented by friends of the institution known to myself. Flutes, clarionets, and violins, have occasionally been bought for patients who could play. Some of the attendants are tolerable musicians, and a small band has been formed, which contributes much to the enjoyment of the winter-evening parties. It is by no means uncommon, on approaching the wards appropriated to the more troublesome patients, on the male side of the Asylum, to hear a lively performance on the fiddle, and to find patients dancing to it.

“ Large musical boxes, or small hand organs, might occasionally be taken into particular wards with benefit. In ordering these entertainments, the object should always be to produce gratification to the patients, without hurtful excitement.

“ To make the airing-courts agreeable to those patients who are not employed, and who are less active, is not always easy. The court should be so disposed, in relation to the building, that the classification attempted within doors should be maintained out of doors also. Each ward should communicate with an airing-court containing no other patients; and patients of tranquil wards should not overlook the patients of refractory wards, or be overlooked by them, or even be within hearing of them. To effect this in an Asylum of moderate extent, and only two stories in height, is difficult; but in a larger Asylum, with more stories, it is impossible. The walks should be wide and made of fine well-rolled gravel; and there should be shrubs, and flower-beds, and mounds, and sheltered seats. It is part of the plan of the Derby Asylum to have in each airing-court a paved arcade for exercise, and a pavilion, with seats, at the end. The airing-courts are also to be surrounded by a sunk wall, affording to the patients a view of the surrounding country. The airing-grounds of Lincoln have this great advantage. Where higher walls are necessary, they may be covered with plants.

“ In the airing-courts for the more mischievous of the patients, shrubs and trees are not so useful, and are sometimes inconvenient. Nothing is so agreeable in all weathers as smooth gravel, care being taken to remove all the larger stones, and to roll the gravel diligently after rain. But, in an Asylum possessing proper means of sub-division, the number of patients requiring to be in airing-courts of mere gravel would be extremely small, as, indeed, the number of really refractory patients becomes under good regulations. Our four wards for refractory patients on each side of the house, and which contain altogether about two hundred patients, seldom exhibit more than ten or twelve on each side, who, either from their restlessness or want of intelligence, are really turbulent at the same time; indeed, on the male side, out of four hundred patients, it is rare to find five turbulent at the same time. And, at Lincoln, where the number of patients is much smaller, and the treatment consequently more individualized, I have been informed by Dr. Charlesworth that the wards for the refractory are either occupied by very few patients, or are entirely empty.

“ The wards called refractory in the Hanwell Asylum are on many days the most orderly wards in the house. They are generally the best attended to by the attendants. It is impossible to be too careful in directing that all the service of the table should be in accordance with the habits of the patients. The sense of banishment from home, and of confinement, and the consciousness of mental infirmity, and dependance, are mitigated in the mind of many a silent, uncomplaining patient by these means.

“ All the comforts added of late years, and with so much advantage, to the wards of County Asylums—such as moveable tables and chairs, window blinds, plants, musical instruments, bagatelle boards, books and pictures, with free access to agreeable gardens—show that the majority of the Insane of any class are inclined to respect the decent arrangements made for them; and it will generally be found that the more comfortable the furniture of the rooms, the tables, &c., of the higher class of the Insane is to their habits and rank, the less they will be disposed to destroy or derange it.”

Dr. JACOBI, a distinguished German authority on Insanity, thus describes the public Lunatic Asylum at Leigburg, where the system which he so much approves, with regard to judiciously occupying and amusing the patients, is so well carried out:—

“ The saloon, or general day-room, which occupies the central point of this department, on the women’s side of the establishment, as well as in the men’s, is of considerable magnitude in both cases. That on the men’s side in particular is necessarily of great size, as, besides, being furnished with several larger and smaller tables of walnut-tree wood, like those before noticed, a dozen and a half of chairs, uniform with those just spoken of, a piano-forte, and cases for collection of books, music, and various wind and stringed instruments, collections of shells, minerals, butterflies, and other natural historical specimens, it contains a billiard table of sufficient magnitude; and after all, ample space must be left for a large company of persons to move freely about. The walls are painted some cheerful colour, with an agreeable border, and are ornamented with a number of good maps, varnished and framed, as well as with a selection of copper-plate engravings, representing landscapes or suitable historical subjects. The wall between the two central windows is furnished with a large mirror. The window curtains are like those in the other day-rooms. On the tables are placed draught and chess boards, and other means of amusement. The gallery also of this department is enlivened by an assortment of pictures of fruits, flowers, animals, landscapes, &c., and with cages, containing canary and other singing birds, suspended from different parts of the ceiling; whilst here and there over the doors a little squirrel revolves his wiry house, or a parroquet amuses the passers-by with his prattling jargon; all which are procured with the intention of relieving the impression of dreariness and dead uniformity, to which the mind but too easily falls a prey in these habitations of misery, and of supplying the imagination, in moments of leisure, with subjects of occupation at once innocent and interesting, without being too exciting. The court and garden of the fifth division thus far described are arranged on both the men and women’s side in a style exactly corresponding to that of the other parts. The courts lie in the centre of the quadrangles, and from the moderate height and extensive range of the buildings by which they are surrounded, they are well

lighted and of considerable size. They have a small round grass-plat in the centre, surrounded by a circle of poplar trees, with wooden benches between them; and at the sides, where the high windows of the gallery of the fourth division open into them, they are enlivened by coops for various kinds of birds, and cages for rabbits, &c.

“The court-yards, arranged on the plan of Esquirol, in the establishments of recent date in France, have been before noticed. These are encircled on three sides by a piazza or colonnade, and are only enclosed on the fourth side by a handsome iron trellis work, which does not intercept the view of the neighbouring scenery; whilst the roof of the colonnade forms a delightful and ever present walk, on which the inhabitants of a second floor may enjoy the fresh air, together with a prospect of the surrounding fields and gardens. This is an arrangement which at once confers an uncommonly beautiful appearance upon the buildings, and forms a constant source of great enjoyment for the patients.”

In the subjoined passage, which is extracted from an official communication to the Commissioners in Lunacy, and published in one of their parliamentary reports, Dr. FORBES WINSLOW explains the principles which should guide the physician in the moral treatment of the Insane when placed under legal control and supervision:—

“In the management of the Insane, and in the conduct of Asylums, both public and private, the principle of treatment should consist in a full and liberal recognition of the importance of extending to the Insane the maximum amount of liberty and indulgence, compatible with their safety, security, and recovery; at the same time, subjecting them to the minimum degree of mechanical and moral restraint, isolation, seclusion, and surveillance, consistent with their actual morbid state of mind at the time. It is also necessary to bear in mind as an essential principle of curative treatment, the importance of bringing the Insane confined in Asylums, as much as possible within the sphere of social, kindly, and domestic influences. In many cases isolation, seclusion, and an absolute immunity from all kinds of stimuli, physical and mental, are, during the acute and recent stages of Insanity, indispensably necessary to recovery; but in certain forms of melancholia, monomania, and in some chronic morbid states of mind, no mode of moral treatment is productive of such great curative results as that now referred to. I need not observe that this system of treatment cannot be adopted except in those establishments where there is an active, experienced, and intelligent resident medical officer, who fully appreciates the great value of such homely family influences upon the minds of the Insane. In our moral treatment, do we not occasionally exhibit an excess of caution and exercise, with the best and kindest intention, an undue amount of moral restraint and vigilance? I think we may sometimes err in being a little too distrustful of the Insane.—

Whilst urging the necessity, in certain forms of morbid mind, of great and constant watchfulness, particularly in cases of suicidal monomania, and recent and acute attacks, I would suggest, to those having the management of Asylums, the necessity, with the view to the adoption of a curative process of treatment, of placing more confidence to those entrusted to their care, and of allowing the patients a greater amount of freedom, indulgence, and liberty than they at present enjoy in many of our public and private Asylums. In many phases of Insanity, in which confinement is indispensable, the patient's word may fully be relied upon; and under certain well-defined restrictions, he should be permitted to feel that confidence is reposed in him, and that he is trusted, and not altogether (although in confinement) deprived of his free and independent agency. I feel quite assured that a judicious liberality of this kind will be generally followed by the happiest curative results, and greatly conduce to the comfort and happiness of the patient. Patients should be permitted occasionally to attend divine worship out of the Asylum, when circumstances do not contra-indicate this practice; they should be allowed also to walk out of the confines of the Asylum, to attend places of amusement, visit scientific exhibitions; and the resident medical officer should make himself their friend and companion; thus inspiring them with confidence in his skill and kindly intentions, and reconciling them to the degree of moral restraint to which they may be unavoidably subjected."

The following important testimony, as to the necessity of suitable occupation, is taken from Dr. HOOD's reports on Bethlehem Hospital, and coming from one who stands in the foremost rank of those who have accomplished the greatest results in the cure of the Insane, deserves particular attention:—

"There can be no doubt that every description of occupation has a curative tendency, and it is desirable that such patients should receive every possible encouragement. Even recreation, whatever be the kind of amusement, is only another term for mental employment, and judiciously promoted, cheers the mind, and excites a healthy tone of feeling. Hence some of the patients during the year were permitted to walk out, under the care of nurses and proper attendants, which was esteemed a great indulgence, and had perceptibly a good effect. Four of the male patients, who were, however, not fit to be discharged, were allowed to spend a day at Kew, another day they went by steam-boat to the Nore; and conducting themselves well, under the charge of careful attendants, during the year visited many different public exhibitions, the National Gallery, the Crystal Palace, Marlborough House, the Zoological Gardens, Smithfield Cattle Show, &c., &c. This privilege was awarded to them gradually, and was suggested by their enjoyment and quiet demeanor when first taken for a walk round the garden: and I have no hesitation in stating, that this indulgence having been highly appreciated by them, has had a beneficial effect upon their minds. If

we can succeed in giving a patient the impression that we repose confidence in him, if we can make him sensible of the importance of keeping his *parole d'honneur*, we are greatly improving his mental state : for the recovery of self-respect is often the first indication of impending cure. Hence we find the reports of many Lunatic Asylums attesting the advantages which patients derive from such excursions.

“As regards active occupation, a most important element in the curative treatment of the Insane, as much attention has been given to it as the means at our disposal admitted of. A considerable number of the Criminal Lunatics have been steadily employed during the greater part of the year in the various works in progress in the interior of the building—painting, cleaning, and whitewashing. And on the female side a large portion of the patients are daily employed in washing, ironing, and mangling ; and it is gratifying to see how readily the employment is entered upon by the patients, and how completely they regard it as an advantage rather than a task. The marked effect produced by constantly recurring occupation on the bodily health of the inmates of this Hospital, is only equalled by the improvement in their mental condition. Their minds, led away from the contemplation of sad and often painful subjects by that which is placed before them, are schooled by insensible degrees in the better and more wholesome control of their thoughts ; and thus it invariably happens, that those patients are the most cheerful, and make most certain and rapid progress towards a cure, who are most constantly and actively engaged in such pursuits and recreations as we are able to place within their reach.”

Dr. BROWNE, the able and successful Medical Superintendent of the Montrose Asylum, says :—

“Let us pass to the exterior ; we must not rest content with airing-grounds. However extensive the area of these may be, and in certain establishments they are as ample as can be expected, they are, in reality, nothing more than narrow strips of sward or gravel, surrounded by high walls. They present all the characteristics of imprisonment, without one of its alleviations.

“Within them a patient may walk his weary round for half a century, without obtaining a glimpse of the world he has left—with no other objects to gaze upon save his miserable companions in misfortune below, and the interminable blue sky above. The expedients to relieve the monotony of such a scene are interesting.

“A patient under my own charge walked fifteen miles per day for a considerable length of time, in making the circuit of one of these courts ; another counts the stones in the wall ; a third watches the appearance of faces at the windows by which the court is overlooked.

“These places should be planted ; have a fountain ; a portion of ground prepared as a bowling-green. They should be stocked with

sheep, hares, a monkey, or some other domestic or social animals. In the spirit of a by-gone period, it may be objected that the trees will be uprooted or used for a gallows; that the bowling-green will be destroyed, the pets killed.

“But, in any institution where such arrangements exist, the principles of classification would likewise be recognised, and no Lunatics, whose dispositions or delusions prompt them to commit such acts, would be admitted to this part of the establishment, or, if admitted, would be under the eye and guidance of the attendant: one of the most useful duties of a keeper being to render many enjoyments accessible and innocent by his presence and superintendence, which in his absence might be dangerous. The courts and promenades in Saltpetriere, containing a thousand lunatics, have been planted for twenty years, and no suicide by suspension has taken place. The grounds at Charenton, Rouen, Sonnenstein, &c., are laid out in the same style, and have neither been destroyed, nor have they proved inconsistent with the safety of the patients. But, besides, or in default of these minor attempts to enliven the aspect of these prison-yards, the centre should be raised as a mound or terrace, so high only as will give a wide and animated horizon, but so low as will prevent any intercourse taking place with the inhabitants in the immediate neighbourhood.

“The patients are thus, in a certain sense, restored to the world, while reaping all the benefits of seclusion. They have an immense number of new and pleasing, and yet unexciting, impressions conveyed to their minds, all calculated to suggest healthy trains of thought, all foreign to their morbid feelings, and furnishing some materials for reflection more allied to sanity than the ravings of their fellow-prisoners, or the glare of a dead wall. All these changes might be wrought without expense, and with great moral benefit by the lunatics themselves.”

The Author of “Lunatic Life” remarks:—

“The business which the devil is so proverbially anxious to provide for those who have nothing to do, is nowhere so actively carried on as within the walls of a mad house. It is curious to observe among lunatics, who are left to saunter about without occupation, what a disposition they have to keep their hands in a state of mischievous activity; and, where they are prohibited from fighting, and have nothing but a paved court or a boarded floor whereon to exercise their thoughts, they generally resort to their clothing for the means of amusement which is otherwise denied them.”

In advocating judicious occupation for patients, the authorities whom I have just quoted, as well as many officers of Asylums whom I have spoken to on the subject, strongly impressed the necessity of extreme caution in the selection of employments consistently with the end in view—the recovery and well-being of the patients. I am particularly anxious to record my concurrence with the views I

am about to quote, owing to some officers of Asylums (fortunately very few) having endeavoured to ridicule the efforts which I have made for the promotion of increased recreation, on the ground of the unsuitability and risk, both to the patients and the public. A little better acquaintance, however, with the subject would have informed those gentlemen that I have not advocated anything that was not in successful operation elsewhere; and I have always said that I would be slow to recommend any changes, no matter how sustained I might be by competent authority, unless I felt assured that those in charge of the Insane were possessed of sufficient discrimination to employ *judiciously* the remedial measures I pointed out.

Dr. CONOLLY (Hanwell) says:—

“Among the means of relieving patients from the monotony of an Asylum, and of preserving the bodily health, and, at the same time, of improving the condition of the mind, and promoting recovery, employment of some kind or other ranks the highest. Its regulation is proportionably important. The spirit in which it is conducted should be conformable to the general spirit of the Asylum, and its abuse should be carefully guarded against. As regards County Asylums, there is now a great disposition in the officers to set every patient to work as soon as admitted—sometimes very improperly, and when, perhaps, work has made the poor creature mad. A man just admitted is perhaps sent off to the shoemaker’s before his case can have been considered by the physician; and a poor melancholy woman, or a frightened, agitated girl is set to work immediately with a needle and thread, to pursue, as, if in a mere work-house, the same sedentary occupation which has already destroyed her health. A wish, laudable in itself, to make the labour of the patients profitable, leads, no doubt, to the general employment of patients in their own trades; but this, for a tailor, or for a shoemaker, or a weaver, or a dressmaker, is often the worst thing that can be done, and takes away the chance of recovery. In general there is no want of a disposition to be occupied in those capable of exertion, and many patients are wretched if not allowed to work.—To stigmatize as indolence what is the mere result of a malady which immediately reduces the nervous energy, and is often the beginning of paralysis, is an error into which no medical man would fall, and from which his opinion ought to protect any of his patients. There are some who are really indolent, but few of them who may not be in some way or other encouraged to some kind of occupation.”

Dr. JACOBI:—

“It has been repeatedly recommended as an excellent attribute of some recently founded establishments for the Insane, that regulations are therein made that every patient of the working classes may continue to be employed at that trade which he pursued in his healthy state; and it has been especially celebrated as an excellence, that in these establishments the shoemaker furnishes the whole supply

of shoes, the tailor of all the work pertaining to his trade, the spinner the whole of the yarn, the weaver all the cloth and stockings, &c.; so that in fact, the establishment beholds the whole of its inhabitants clothed and bedded with the products of their own industry; whilst those patients who have devoted their lives to the arts and sciences, to commerce, and public business, find here also a means of activity corresponding to their former habits. I cannot deny, however, that I consider this arrangement extremely censurable, and directly opposed to the objects of such institutions. In the treatment of the shoemaker, the tailor, the spinner, the weaver, the dyer, and so also of the scholar, the man of business, the artist, and so forth, there cannot, in my opinion, be anything more contrary to reason than, instead of withdrawing them from, again to chain them to those trades and occupations, the very pursuit of which has, in so many instances, alone laid the foundation of those disorders which have led them into the establishment. Similar arrangements, as they are made subservient to purposes of economy and correction in jails, and houses of compulsory labour, cannot be introduced from the same motives into Lunatic Asylums; as in these, everything, and therefore employment also, must be regulated with a view to the restoration of the patients."

BROWNE:—

"No superintendent or keeper would be so grossly ignorant as to force a man to dig who was disposed to weave; and none ought to be so ignorant as to overtax the weakened or already burdened mind by long sustained attention to either."

SPURZHEIM:—

"But care should be taken in the selection of the kind of occupation, for an egregious and irremediable error may be committed in allowing madmen to engage in an employment about which their mind is deranged."

In 1856, (Mr. Horsman being then Chief Secretary for Ireland,) Government, impressed with the necessity which existed for effecting some changes in the management of Irish Asylums, moved for and obtained a Royal Commission, which was therefore appointed, to inquire into and report on the state of the Lunatic Asylums and other institutions for the care of the Insane, as well as into the state of the law respecting Lunatics.

From the very voluminous evidence given before the Commissioners, I have extracted the following bearing on the point with which I am dealing:—

RICHMOND ASYLUM.

RICHARD TUOHILL, Esq., M.D.

1887.—Are any arrangements made for providing amusements for the patients?—Very little; not sufficient. I have given a report suggesting the propriety, in the system of moral treatment, of having intellectual and pleasurable amusements. That has not been carried out.

- 1888.—Were these suggestions given in writing to the Governor?
—Yes; I have a copy of the report. I recommended that there should be billiards, backgammon, an evening school, and means of light recreation. In order to make these complete, there should be a superintendence by a head-keeper or schoolmaster—some person between the manager and medical man and those who merely carry out the more laborious part of the duties.
- 1889.—Do you think that the hospital, as at present conducted, affords the means of carrying out proper curative treatment as regards the patients under your charge?—I certainly think it could be better arranged and better managed.
- 1890.—With the means at present at your disposal in the hospital, do you consider you can carry out the curative treatment, as regards the Insane cases?—Though I have done so, I think there might be a great deal of improvement. I think great improvements are necessary. Of course, we have pursued successful treatment.

JOHN THOMAS BANKS, ESQ., M.D.

- 1987.—Are there any books in charge of the attendants in the various wards, which could be used by the patients?—The chaplains give books, and the resident apothecary lends books to the patients; but there is not what there ought to be, I conceive—a library. Some of the patients would like amusing books, and there is no supply of them.
- 1988.—Are any other articles supplied which could afford amusement to the patients?—I have sometimes given them a pack of cards, so dirty that they could scarcely see them; and I have on more than one occasion bought them a pack.
- 1989.—Are there sufficient means of amusement for the curative treatment of the Insane?—By no means.

P. BEATTY, ESQ.

- 2148.—What arrangements are made for the amusement of the patients?—There are no particular arrangements. I bought them a fiddle at my own expense. I gave them a chess-board of my own, and I gave them cards. As to other amusements, there is nothing but ball playing.
- 2149.—Is there a chess-board in use in the establishment?—Not a chess-board, but a draught-board.
- 2150.—Are any books provided for their use?—The clergymen provide books.
- 2151.—Are there any amusing books provided by the Board?—There are; but they are selected by the clergymen.
- 2152.—Are those books all of a religious character?—They all have a tendency that way. When the Institution first opened, I supplied a good many books. I lent them very extensively among the patients; and a complaint was made

- of me to the Inspectors that I lent books of a controversial nature, but it was no such thing. I lent the "Red Rover," the "Last of the Mohicans," and a variety of like works, without any other consideration than to amuse the patients. Unfortunately, I lent a volume of the "Irish Penny Journal," which contains a vast number of amusing short stories, and in the book there some chapters from the "Wandering Jew," and I was reported to the Inspector; I suspect by whom. Since that I lent no books. I had no view but the amusement of the patients. I say that on my oath; and, for my own protection, I ceased to lend books.
- 2153.—Are the attendants capable of reading to the patients?—
They are.
- 2154.—Are they in the habit of doing so?—No; I do not think they do.
- 2155.—Practically speaking, do you find the attendants in the Institution to be attentive nurses over the patients, or to be rather keepers over them?—I would say more keepers than nurses. They are obliged to preserve a sort of authority over them, but not by harsh means.
- 2156.—Are there any prints, or subjects of interest, hanging up in the galleries to enliven them?—None. If there were prints put up there, they should be carefully selected.
- 2157.—I believe there is a recreation hall for them to dance in?—
On Fridays they get shaved and a bath, and they come to this dance in the evening.
- 2158.—Do the patients seem to enjoy it?—Very much; even patients who are violent enough, conduct themselves well there. My family—Mrs. Beatty, and my daughters, and myself—go to give the patients apples and oranges; latterly I could not, as they got too dear. It took a hundred of apples to go round the nurses and patients.

M. STAUNTON, Esq.

- 5295.—With reference to the employment and amusement of the patients, I believe there was a ball-alley in the grounds of the New Asylum?—Yes.
- 5296.—Are you aware a portion of that ball-alley has been for some time, and is now, fitted up as a pig-sty for the pigs of the Apothecary?—I was not aware what particular part of the premises was used for the pig-sty; I was aware he kept pigs; the number of them was a matter brought under the consideration of the Board, and I must say I was one of those of opinion that the animals should not be allowed to remain at all. The Manager and the Apothecary had some pigs; and the Manager stated that he had been twenty-four or twenty-five years connected with the Institution—that the original Governors gave him permission to have pigs, and that he never exceeded the power he had received

from them. But I believe the Board on this occasion came to the resolution that not more than one or two pigs should be permitted to be in the possession of any officer; and some of the members of the board, myself amongst the number, thought it would be much better not to have a pig at all in the Institution; in short, that the offal should be used to feed pigs for the benefit of the patients.

5297.—At present it is used in feeding pigs for the benefit of the Apothecary?—I thought the resolution of the Board was carried out. As soon as ever the matter came under my consideration, I certainly had no hesitation in coming to the conclusion that the practice should be given up; and if it goes on now, it is certainly in defiance of the order or resolution of the Board.

CENTRAL CRIMINAL ASYLUM, DUNDRUM.

ROBERT HARRISON, Esq., M.D., F.R.C.S.I.

2997.—When the weather will not permit of their being employed at those out-door pursuits, are any occupations or amusements provided inside for them?—Not enough. It is very tiresome on wet days.

2998.—In point of fact, are the day-rooms of the Asylum, which are occupied by the inmates on those days that will not admit of their being out of doors, different in any way from the day-rooms in the ordinary workhouses?—Not at all. There are no books, or anything to occupy the minds of the patients.

2999.—Considering that the Asylum is not a mere place of detention for Insane persons, but it is also to be regarded as an hospital for curative treatment, are you satisfied with that absence of amusement, or the utter want of anything enlivening in the apartments they occupy?—I have often regretted the want of such things—a reading room, or a room with pictures—to excite or engage the attention, so as to keep them from a gloomy mood, into which they fall when unoccupied on a wet day.

3000.—In point of fact, I believe the day-rooms and corridors of this Asylum are particularly cheerless, the walls being merely white-washed?—Yes; our day-rooms are very cheerful, as far as light goes, but very cheerless in every other respect—in the way of furniture or of objects that could amuse the mind or engage the attention.

JAMES WM. CUSACK, Esq., M.D., F.R.C.S.I.

3406.—Do you consider that sufficient occupation and amusements are provided for the patients in the Hospital?—I do not think there are.

- 3407.—I presume you attach considerable importance to the minds of the patients being occupied, and to their relaxation, by means of amusement?—Certainly.
- 3408.—Do you consider that amusements, interesting objects in the shape of pictures, and various things of that kind, in an Asylum, would be advantageous, even to the most illiterate and ignorant patients?—I am sure they would.
- 3409.—Do you consider that the excitement which may be occasioned by playing at cards is at all a reason why an amusement of that kind should not, in certain cases, be provided?—I should say not. I have played cards and backgammon over and over again with patients.
- 3410.—Do you consider the arrangements in that respect in Swift's Hospital, as regards the supply of books and papers, at all suitable for the treatment of the Insane?—They are not at all sufficient.

C L O N M E L A S Y L U M .

JAMES FLYNN, Esq., M.D.

- 6033.—Are any amusements provided for the inmates?—Yes; we have a little library, a ball-alley; and they go out and run about.
- 6034.—I presume you find the occupation of a patient's mind very essential and advantageous towards his care?—Well, very much. I keep them employed as much as possible at labour—those that are of the agricultural class.
- 6035.—Do the patients themselves exhibit any anxiety or desire to avail themselves of any amusement provided?—They do; they feed pigeons, and like the trifling amusements outside. I allow three or four of them to go out to catch birds' nests, and they take great care of them.

C A R L O W A S Y L U M .

MATTHEW E. WHITE, M.D.

- 6394.—Are any amusements provided for the patients?—They read and walk.
- 6395.—Is there a library of books for their use?—Well, there was, but it is gone; the books are torn. It is twelve years, or perhaps fifteen years ago, since there was about £5 worth of books bought, and they are not now forthcoming.
- 6396.—If the library is not forthcoming, how are the patients enabled to read?—They get books or newspapers. I frequently give newspapers to patients; some of their friends send them prayer books.
- 6397.—Are any games, such as backgammon and draughts, played by them?—The men used to play cards, but they would fight and quarrel, and I was obliged to put a stop to it.

- 6398.—Do the female patients take exercise in the grounds daily?
—Yes; they walk daily.
- 6399.—How are they otherwise employed?—Sewing, knitting, spinning, carding, cleaning the corridors, washing in the laundry, and assisting in the kitchen. There are different sorts of female occupation.

THOMAS O'MEARA, ESQ., M.D.

- 6716.—Are you satisfied with the means of occupation and amusement afforded to the patients?—Not at all.
- 6717.—Do you consider that there is a sufficient number of books provided for their use?—They have no books. I would be strongly in favour of a school. I have spoken of it before. I endeavoured to get them to teach each other, or to get the warders to teach them. I think it would be of great importance and great advantage in a curative point of view. It would be troublesome and difficult; but still I think it could be carried out, and would not be expensive. I have endeavoured to procure a ball court for them. However, the alterations which are under consideration prevented the matter being pressed.
- 6718.—Would not the provision of suitable means for the amusement and occupation of the patients materially facilitate their cure?—Yes; much facilitate it. Occupation is one of the best curative means we have.
- 6724.—Do you consider the airing-courts of the Asylum, as they at present exist, suitable for the inmates?—I do not; they are too gaol-like.
- 6725.—Does that arise from their being too surrounded by buildings?—Yes; buildings and high walls.
- 6726.—Have you seen the new plan which the Governors are disposed to adopt for the extension of the Institution?—Yes; I made some suggestions with regard to the execution of this plan. There is a portion I do not entirely approve of, and that is with regard to the return building. Instead of having the return building at the point marked on the plan, I would have a sunk fence, and the place open.
- 6727.—By this plan one of the airing-courts would remain the same size as at present?—Yes; but one wall would be thrown down, and a sunk fence substituted, so that the patients in both yards could look out into the grounds. I may remark that I believe, without that return building, you could, on that plan, find accommodation for 200 additional patients.

MARYBOROUGH ASYLUM.

JOHN JACOB, ESQ., M.D.

- 7236.—You have alluded to the amusements and entertainments of the patients, and stated they had not been all you would

wish?—I think that, under a well-regulated system of attendance, and strict supervision and obedience on the part of the attendants, that a great deal more might be done, as is done, and as is provided elsewhere.

MULLINGAR ASYLUM.

JOSEPH FERGUSON, Esq., M.D.

- 7467.—Are you satisfied with the arrangements for the amusement and occupation of the patients?—Not altogether. I am a great advocate for amusements, and particularly amusements connected with music. As yet we have only been able to carry out to a certain extent what we hope shortly to perfect. I think amusements most essential in the treatment of patients. We wish to have a system of reading and amusement; and the matter is under the consideration of the Board.
- 7468.—Is there any library for the use of the patients?—No.
- 7469.—Is there any school instruction for those who may require it?—No.

BELFAST ASYLUM.

ROBERT STEWART, Esq., M.D.

- 7868.—Do you consider there are sufficient means at your disposal for the curative treatment of the patients in the way of books and amusements?—I do not.
- 7869.—Have these deficiencies been brought under the notice of the Board?—They have occasionally been brought before them; but I consider the resources in those respects here are equal to those in most places. In Asylums contiguous to London, and in the Scotch Asylums, there are improvements exceeding what we have here for such purposes. The Board here are always very willing to accede to any proposal for making improvements. There are further improvements looming in the distance, which I hope to see adopted here as well as elsewhere.
- 7870.—It has been stated that the class of patients in the Asylum would not be likely to avail themselves of the resource of reading as an occupation; do you agree in that statement?—It is the case to a very great extent. They might avail themselves of it indirectly. It is not generally known that the inmates of Asylums are not so much persons who become insane in many instances, as persons who have never been sane—whose minds have never been developed, but have remained in a condition of mental disquietude, till some circumstance occurred which plunged them into a state of insanity. Their minds have been in a state more of non-development than of actual insanity; and many of

them could not avail themselves of the opportunity of reading, but I dare say they could derive advantage indirectly from the instruction of others. There are individuals that if you speak to them and tell them something it will interest them, because of your using, in making the communication, the various accents of the human voice, while if the same persons read the same thing in a book it would not make any impression upon them.

HENRY McCORMAC, Esq., M.D.

- 7918.—Have you any suggestion to offer to the Commissioners respecting the subject of their inquiry?—Nothing further than that I should wish this Asylum should, as far as possible, co-operate in the general effort to improve the condition of the insane, and show an example in adopting measures of improvement suggested elsewhere, and in carrying out whatever should be suggested amongst ourselves, and which would be beneficial to the inmates. I think the moral treatment of the insane, keeping in view amusements and instruction, and even subordinate to that, acting upon their minds through the medium of their palate and their prepossessions, that treatment, I think, might be carried to a greater extent in all Asylums, and, I should hope, to a greater extent in this Asylum.

ARMAGH ASYLUM.

THOMAS CUNNING, Esq., M.D.

- 8416.—Do you think it would be advantageous or otherwise to have secular instruction given to those of the inmates who do not know how to read and write?—I do. I think anything that would occupy either the body or the mind of a lunatic is likely to be of advantage.
- 8417.—Do you consider that the Institution possesses a sufficient amount of those means for occupation and amusement which a curative hospital for the insane ought to have?—Well, I think it would be rather an advantage if there were some more means of recreation afforded to the inmates of the Asylum.

LONDONDERRY ASYLUM.

W. ROGAN, Esq., M.D.

- 9480.—Are there any games or amusements provided for the patients?—Chiefly ball-playing. That is the only amusement we find suited for the class of patients who come in here. They are never acquainted with any games such as draughts or chess. There are very few inclined to read entertaining books. The females have a dance every evening.

One of the patients plays the violin, and three or four times a year there is a mixed ball, which they seem to enjoy. It is at the discretion of the Manager. The Governors have directed parties to be given in the year, and the Manager generally gives three at his own expense and at his own option.

- 4981.—No doubt, you attach importance to the amusement and occupation of the minds of the patients?—Very great importance.

BALLINASLOE ASYLUM.

J. B. M'KIERNAN, Esq., Manager.

- 9961.—What means of amusement are there upon wet days for the large number of inmates in this house?—Nothing particular.
9962.—Are there any prints or anything on the walls to relieve the monotony of the place?—No.

CORK ASYLUM.

T. POWER, Esq., M.D.

- 10225.—What kind of occupation or amusement have you for patients during wet days or winter evenings?—We have some few books and some few newspapers.
10226.—How many books may you have for the use of the inmates?—Well, I dare say, about fifty or sixty books, or more.
10227.—Are those in general use?—Those are in general use—distributed all through the house. There are not many patients who read, but those who do read are very fond of reading.
10228.—Have you any other amusements for them?—There are some rough draught tables.
10229.—Is there any recreation hall?—There is a large hall.
10230.—Has it ever been used?—No.
10231.—Are there any parties or dancing given?—No. There was a lady here yesterday, who said she would bring up music on Saturday next to see what effect it would have on them, and I gave her leave. They are very fond of dancing. There are persons in the house who play upon a musical instrument, and when they play the patients dance.
10232.—Would you not attach considerable importance to amusements being afforded to these unfortunate inmates?—I do decidedly. I think there are several sources of amusement of the means of which we are very deficient. For example, we have no ball-court, though that would not answer on a wet day, unless it was roofed.
10233.—Is there any furniture in the long galleries which the patients are in the habit of frequenting?—No.

10234.—Then they stop in the day-rooms when they are within doors?—Yes; and they walk up and down the galleries, and look out of the windows.

KILLARNEY ASYLUM.

MARTIN S. LAWLER Esq., M.D.

10982.—What means are there of amusing the patients?—Their principal amusement is in the open air. They have a ball-alley; and the agricultural labour is a great amusement to the great majority of them. For in-door amusements there are books, newspapers, backgammon, and cards; but I find they do not make much use of any of them, with few exceptions.

10983.—Is there a recreation hall?—There is; but we have not used it up to the present. There is no furniture for it.

From the foregoing evidence (given chiefly by the Resident Medical Officers of Asylums) it is very clear that a very great deficiency existed at the period of the Commission in the way of either system or appliances for occupying and amusing the patients; and it is singular that this neglect was nowhere greater than in the chief Asylum of the Metropolis, placed though it was more immediately under Government supervision.

The Asylum for Criminal Lunatics at Dundrum does not appear either to have been an exception to other Asylums in those respects, although the same excuse could not be urged as might be offered with regard to them—viz., the unwillingness of Local Boards to provide what was necessary—as Dundrum, being supported out of the Consolidated Fund, is altogether under Government control; and I therefore assume that there the chief authorities of Asylums could, if they thought well, make it almost anything they desired—in fact have rendered it a kind of Model Institution, to which the attention of Provincial Medical Officers and Local Boards could have been directed as the standard they should adopt. The Commissioners, after hearing all the evidence they could obtain, and personally inspecting all the Asylums, thus expressed themselves regarding the deficiency observable as regarded the means of occupation and recreation, clearly pointing out that both on grounds of economy, quite as much as on those of humanity, better provision should have been made for affording the patients the advantage of this important auxiliary to recovery:—

“In the new asylums recreation halls have been provided, but, excepting in a few cases, as the new Richmond and Sligo Asylums, we found that they were either not used or were devoted to other purposes. We are sorry to be obliged to add, that we fear this has generally resulted from the Manager or Governors not attaching sufficient importance to the amusement of the patients, as a portion of their treatment. We hope

that this idea will be dispelled, and that the great want of any amusing occupation for the patients, which is particularly observable throughout the asylums (with few exceptions) will, before long, cease to be a subject of unfavourable comment. At present, whatever attempts have been made in a few instances, and especially at Richmond and Sligo, in the way of evening entertainments, &c., nothing has been done to mitigate the bare and cheerless character of the apartments usually occupied by the inmates. In corridor or day-room, the lunatic sees nothing but the one undiversified bare wall—giving to these hospitals, intended for the restoration of the alienated mind, an air of blankness and desolation more calculated to fix than to remove the awful disease under which it labours.

“It cannot be denied, notwithstanding the care and attention which appear generally to be given by the Managers and Visiting Physicians to the patients under their charge, that, on the whole, the lunatic asylums of Ireland wear more the aspect of places merely for the secure detention of lunatics than of curative hospitals for the insane. Probably it is by some considered that, the inmates being poor, the ratepayers should not be called on to provide for them comforts and appliances beyond their position; and something, perhaps, of the idea prevails, that the lunatic asylum should not, by the comfort it provides for its inmates, cease to be a test, like the workhouse, for those who seek it as an asylum. But it is almost needless to point out that the cases are by no means analogous, and it would be as consistent to prevent the surgeons of our county infirmaries or fever hospitals giving expensive medicines or comforts to patients, as to refuse to provide for the lunatic what may contribute to his cure. Besides, we believe it better economy to relieve the rates, by the cure of the lunatic, than to burden them with his permanent maintenance, by perpetuating his insanity.”

I have up to this point nearly refrained from offering my own opinion as to the actual condition and requirements of the Irish Asylums, having thought it better, after giving a brief history of the barbarities which marked the conduct pursued towards the lunatic down to a comparatively recent period, and the more enlightened treatment which succeeded, to confine myself, in the first place, to giving the opinions of the best authorities I could find as to the absolute necessity of suitable occupation and recreation as a curative agent; and, in the next, proving by the evidence of persons connected with the Asylums, as well as by the Report of the Royal Commission, the fact of the deplorable deficiency in the latter respect in those institutions.

These proofs are, I presume, sufficient to show that at the period of the Commission the Asylums needed amendment in the highly important particular alluded to.

Fully six years have passed since this most glaring defect in the treatment of the Insane in Ireland was forcibly pointed out, with all the weight that ought to attach to anything emanating from gentlemen so eminently qualified as the greater number of the Commissioners were, both professionally and otherwise, to pronounce on the subject. During that long period it was manifestly the duty of Government to take some steps to remedy what so strongly called for

amendment; but administration followed administration, and nothing deserving of being recorded was done up to the commencement of this year.

When some alteration was made in the Privy Council Rules—the most important change being the increased powers conferred on the Resident Medical Officers, particularly in reference to the moral and medical treatment of the patients—an experiment, made with a view to improvement, which it is to be hoped will be attended with success, and that these gentlemen will avail of the opportunity now afforded them of improving the institutions under their charge, and thus prove themselves deserving of the concession made to their wishes, which the recent regulation practically amounts to.

Especially to them it ought to be an object to have well defined the exact condition of the Asylums on the coming into operation of the new rules, in order that any improvements may be more noticeable. So far as I can judge, from having visited nearly a dozen of the Asylums within the last two years, (some of them a few weeks ago,) as well as from what I have heard of the others, except in a few particulars, in two or three of them, the state of things remains about the same as it was at the period of the report of the Commissioners. The most important instances of improvement, in my opinion, being the formation of an excellent musical band, composed of patients, at Belfast, and the system of drill adopted there, as well as the most creditable practice of sending a number of patients, two or three times a week, to walk in the country, an indulgence productive of much good, unattended, I believe, with any accident, and now causing no alarm or inconvenience to the public.

The employment of some females at fancy work in this Institution, and at Richmond, is a pleasing contrast to the almost utter idleness to which the greater portion of the women in other District Asylums are condemned. The schools in the latter Establishment are also deserving of much praise, and encourage the hope that other efforts, equally creditable, will be made to render an Institution so favourably circumstanced in many respects what it really ought to be.

I have not seen the Sligo Asylum, but understand that there most praiseworthy efforts have been made to improve the moral treatment of the patients; and, singular enough, (affording another proof of the great ignorance which prevails, even amongst otherwise well-informed persons, as to the course that should be pursued towards the insane,) I have been induced to think that that Asylum must be about the most progressive amongst them, from descriptions furnished me respecting a portion of the treatment, with a view of impressing me with the idea that a most mischievous course was pursued towards the patients.

Although I have resolved to avoid touching on the medical treatment of Lunacy, still I do not wish to pass unnoticed the introduction of the Turkish Bath into the Cork Asylum, more particularly as Dr. Barter, at whose instance, I believe, the experiment was tried, lately informed me that it was nearly as useful as a moral curative agent* as a medical one, from the great enjoyment it afforded the patients.

To the above truly philanthropic gentleman (as, to his great honor, he endeavours, even where no personal advantage can result, to place this great remedy within the reach of those who need it,) suffering humanity owes another obligation for the benefit which it has been proved in many instances at Cork, a "mind diseased" may derive from availing of the soothing influences of this invaluable addition to the healing art, which the people of this kingdom are indebted to him for having introduced. I also understand that at Cork some balls have taken place, which proved most successful.

*The following speech was made by Dr. Power (resident physician of the Cork District Lunatic Asylum, as to his experience of the Turkish Bath in the Institution over which he presided), at St. Anne's Hill, Cork, on the interesting occasion of presenting an address and testimonial to Dr. Barter, on the 23rd of April, 1862:

"I must beg your attention to a short statement of the curative and beneficial effects of that safe and powerful agent, in the treatment of the insane, in which I have had rather extensive experience, for the last year and a half, in the Cork District Lunatic Asylum. Reflecting on one very general and striking symptom of insanity, it occurred to me that the Turkish Bath, as established at St. Anne's Hill, by Dr. Barter, would be likely to remove that symptom, and with it the maturing cause which gave origin to it, and that such a result could not fail in having a beneficial effect on the original disease, and possibly in removing it altogether.

"I tried medicine, hot water baths, and out-door exercise for those symptoms, but all were ineffectual.

"Having reflected deeply on these points, and turned them over and over in my mind, for a considerable period, I eventually thought it incumbent on me to state them to the Board of Governors, and to propose the erection of a Turkish Bath for the benefit of the Institution, which, after much discussion and opposition, was finally acceded to. The bath was constructed under Dr. Barter's direction, and declared fit for use in February, 1861.

"The first persons submitted to its influence were much pleased with it, and were anxious to go again. Once in the week was the time appointed at first for its use, which was gradually made more frequent, and after about four months' use of it, I found that several persons had been perfectly cured by it, and sent home to their friends. The cases to which I now allude were a long time in the house, and classified with the incurables. After some months further experience of its beneficial action, new arrangements were made which enabled me to use it more generally and more frequently, and since then from 50 to 80 patients are daily submitted to its influence; many for its remedial action, but the greater number for motives of cleanliness; even these latter are wonderfully improved in appearance by its use, and have acquired the ruddy glow of health, instead of the pale and sickly look of invalids.

"Of course, out of more than 500 patients in the Institution all were not expected to recover, nor were they all under treatment for the purpose; but the best way of showing the effects of the bath would be by statistics. It was only fair to conclude that if the proportion of cures had been greater since the introduction of the Turkish Bath than before it, this bath must have had some influence in pro-

It affords me the greatest pleasure to give those instances of things which I deem to be deserving of being commended in the Irish Asylums, as regards that portion of moral treatment to which I have been adverting. If I have made any omissions, I shall feel most happy, on being pointed out my errors, to make every *amende*. I have visited nearly all these institutions, and respecting those I have been unable to visit I have endeavoured to obtain every possible information; but the more I become acquainted with them, either from personal observation or by report, the more thoroughly am I convinced that there is not a single one that can be held up as an example, even in a moderate degree, of what a curative institution ought to be, so far as one of the most important (probably the most important) aid to lighten the patient's existence, whilst he is deprived of liberty, and promote recovery is concerned. Let it not be supposed, however, that I am either insensible to or desire to ignore the great merits which the Irish Asylums possess in many other most important particulars, and which reflect credit on all connected with their supervision and management; and it is, therefore, the more to be regretted that there should be anything to detract from the claims which they would otherwise have on our approbation, but which must be withheld so long as the glaring and inexcusable defect to which I have been alluding is suffered to exist.

It is but just to say that I intend this observation to apply to all the Asylums, so far as I have seen or heard of them. Some, as in the instances I have just enumerated, may in a few respects be better than others; but, I venture to assert, that from amongst them there could not be selected an example, where anything deserving of being called a system, as regards the moral treatment of insanity, is in operation, consistently with the opinions of the most eminent authorities on the subject.

No doubt, the greatest cleanliness and decorum prevails in them—the health and comfort of the inmates is carefully attended to—the food and clothing good and sufficient, and no case, that I am

ducing that desirable result. I see by my notes that for the year ending March, '61, the cures were 59 per cent.; but for the nine months ending 31st December last, during which period the bath had been in use, the per centage of cures was 76—that is, 74 had been cured out of 96 entered. That was more than double the number of cures produced in any asylum in England. The patients, after the first few baths, all seemed to be much pleased with it, and were always longing for the time when it was to be administered. Those who had suffered a relapse, after having been sent out cured, showed no unwillingness to return to the Asylum; and even asked to be taken there at once, in order that they might get the bath, as they considered that nothing else would cure them. I have never seen any ill effects from the bath, except a little nausea and slight fainting in a few instances, but after a bath or two those effects disappeared. Up to that time I have used it on more than 900 cases; and, since March, 1861, 30 idiotic patients have been removed to a higher class, and rendered capable of enjoyment and of doing work about the Establishment. I would recommend the Turkish Bath into all public institutions, and I am firmly convinced that it has as beneficial an influence on the system as air and exercise."

aware of, has occurred of the patients being defrauded in any way, and the Asylums are free from those charges of neglect and cruelty that have disgraced some of the English County Asylums (fortunately, very few); on the contrary, the officers of every grade are remarkable for their kindly demeanour towards those under their charge.

Indeed, no better proof of all this can be afforded than the confidence which the humbler classes of Ireland (who, more than any other people, exhibit a solicitude for those afflicted by Providence) have as to the course pursued towards the patients, by the anxiety which they usually show to place their deranged relatives under treatment. The disposition sometimes shown of retaining them at home never, I believe, arises from any apprehension of ill treatment at the Asylums, but proceeds from the affectionate reluctance which the poorer Irish always evince to part from those to whom they are attached—more particularly should the latter, owing to any visitation or accident, loss of reason, speech, or sight, possess peculiar claims on their sympathy.

The Clergy of every denomination also invariably advise the Asylums to be availed of; so that, as may easily be imagined, those institutions are in a very favourable position to effect recoveries, as the patient is placed at an earlier stage of the malady under treatment than would be the case if a prejudice existed against them.

From conversations which I have had with the friends of patients, and with several recovered patients themselves, in various localities, I am fully convinced that, except in the one respect, the Asylums fully merit the high opinion entertained of them by the public. However, as the latter cannot be supposed, generally speaking, to have investigated the subject sufficiently to be competent to judge of more than the manner in which the physical requirements of the patients are attended to, their estimate as to the excellence or otherwise of the course of treatment must necessarily, as a rule, be confined to that point only; and, here I deem it well to say that, so far from objecting to anything connected with the diet, clothing, safe custody, and care of the health of the patients, I believe, beyond too close confinement, particularly as regards the females, there is not only very little to find fault with, but much to commend. I consider it the more necessary to state this distinctly, as otherwise, as occurred when I brought the case of the Asylums before the House of Commons, in reference to the defects in the moral treatment, I may be met, as I was then and afterwards, in the public press, with statements as to the high character of the officials connected with them, the excellence of the diet, the cleanliness of the Asylums, their freedom from abuse, and many other undeniable merits which, so far from disputing, I have always fully admitted, but which have little or no bearing on the real question I have raised, viz. :—Do the Asylums, according to the best received opi-

nions as to the treatment of insanity, fulfil, either as regards appliances or system, the requirements for the moral curative treatment of lunacy?

I repeat again, that even regarding them altogether as Asylums for the insane poor, and having every regard for wise economy, that they fall greatly short of what they ought to be in the above respects; and to this positive assertion I challenge contradiction—not from those who depend on official reports or hearsay evidence for their information, but either from medical men who, on their professional responsibility, will undertake to say that my statement is not well founded, or from non-professional persons, who can show that they have taken anything approaching half the trouble I have done to make themselves acquainted with the subject, by visiting Asylums, or obtaining information on the treatment of insanity from the best sources.

Let any impartial person, of ordinary understanding, only learn some of the most simple principles which, by universal consent, should be carried out in the moral treatment of lunacy, and then visit any one of the Irish Asylums, even the best, and I will rely for the vindication of what I have put forward concerning them on the decision which will be arrived at.

Some of them, in the instances I have enumerated, are something better than others, and give promise of further improvement; but out of the entire seventeen (including Dundrum) there are over a dozen which would fully realise the description which I will presently give of the aspect which, as a rule, characterizes the Asylums; and, from what I have seen and heard, unless Government show a determination to amend this deplorable state of things (and which is easily in their power), I fear much the progress of amendment will be very slow, indeed; and that what could be accomplished within one year without Act of Parliament, at a cost hardly worth mentioning (certainly not exceeding a thousand pounds for all Ireland) will probably, judging of the future by the past, take fully another half century before, at the present rate of progression, we can hope the Irish Asylums will become what there is not a shadow of an excuse on the part of former or present Governments, (Whig and Tory being equally culpable) for their not being to-day.

A Lord Lieutenant or Chief Secretary who would take the little trouble that would be necessary to become conversant with the matter, and show a real determination that a proper system, as regards moral treatment, should be introduced into the Asylums, and also make it manifest that the incapable or indifferent should make way for those possessing capacity and zeal for the duties of so important a charge, and increase the remuneration of the medical officers (particularly the resident) sufficient to make such positions objects of desire to men of ability—and adopt some plan by which competency and character, instead of political influence, would be

the only means by which candidates could hope for success ; and to this I will add, confining promotion to the higher positions to the meritorious officers of Asylums (unless where another course would be manifestly for the public interest) thus offering an incentive to the qualified and zealous,—which does not at present exist,—would, in my humble opinion, make the Asylums all we could reasonably expect them to be at present ; and, so far from entailing additional cost, I have not the slightest doubt but that a considerable diminution of taxation for their support would speedily result, consequent on the increased number of recoveries, to which I will add a consideration no less gratifying—the lightening of the weary time of those in process of cure, as well as alleviating the condition of others, whom the inscrutable wisdom of Providence may consign to the perpetual deprivation of the highest faculty conferred on humanity.

One of the most striking faults which the Irish Asylums present, in common with the greater number of English ones, is the prison aspect which they bear, in spite of a good deal of attempt at architectural effect, and considerable expenditure in external ornamentation. Indeed, almost everything connected with their construction goes to prove that the leading idea of those who designed them must have been that a lunatic should be treated very much after the fashion of a criminal (not on the Crofton system, for there is much in it which might be adopted with advantage in the cure of insanity, as well as in the cure of vice, but on the plan in operation in county gaols a few years ago), the means of close custody and every safeguard against escape being the leading features. A more intimate knowledge of the Asylums also tends to confirm the unpleasant feeling that they partake much more of the prison than what an hospital for the insane should be.

Those who have visited the Asylum of Leicester, and remarked that no fence whatever separates the grounds from the surrounding country, and hears that escapes are rarely, if ever, attempted, cannot but look with surprise and regret at the high wall which invariably surrounds similar institutions in Ireland, shutting out the patient from all but a very distant view of the world he is separated from, a proceeding not deemed necessary even at Bethlehem, situated though it is in the heart of a populous neighbourhood—many of the patients, particularly the females, being able, during their exercise hours, to enjoy a sight of the busy scene passing outside, through the railings. The exercise yards also, generally speaking, are precisely those of a prison, the same high walls and utter absence of a single object to interest. Beyond the sky overhead or the gravel beneath his feet, the patient has nothing to look upon except the sides of the everlasting dead wall, or perhaps a dreary array of grated windows. Here a considerable portion of the time of a great number of the patients is spent, particularly

those who will not engage in agricultural or other employment; and even those who do, spend much of their time in the yards, as at best they will only work by fits and starts; and, therefore, the daily return made of patients employed often conveys but a very imperfect idea as to occupation, as advantage is too often taken to return a patient as being occupied, from the circumstance of his having, perhaps, momentarily engaged in something, although he really may have passed almost the entire day moping about, or exciting himself in disputations with his companions for want of something to interest him.

Follow the lunatic from the yards into the day-rooms, and the state of things is, if possible, worse. The former are at least large enough to keep the patients from interfering with each other, but the latter are so small that the inmates are crowded together, usually speaking, without a single object to look at, except chairs and tables—in winter huddling around the fire, and frequently, *pour passer le temps*, having warm collisions with each other, thereby adding to the irritability natural to their disease, or else becoming a prey to their morbid fancies, either circumstance, it is only rational to suppose, being calculated to prove highly detrimental to recovery.

It is quite true that there is some agricultural employment for those who choose to engage in it, as well as a few trades; but every one acquainted with the waywardness of the insane well know how capriciously they will abandon an employment.

I have already shown, on good authority, how injudicious it frequently is to employ the insane at occupations which they might have been previously engaged in, or, owing to any cause, they may have a disinclination for.

A very common error is the placing of the peasant patients solely at field work, although, perhaps, there is no class of insane who would be more likely to be benefitted by a total change of employment to what they had been accustomed—singular as it may appear, according to an eminent authority, the calm pursuits of the country being more likely to dispose to insanity than those involving more excitement.*

*“A still more convincing proof that mental ruin springs rather from mental torpidity than from mental stimulation, is to be found by comparing the proportion of lunatics to the population in the rural and manufacturing districts. Sir Andrew Halliday, who worked out this interesting problem in 1828, selected as his twelve non-agricultural counties—Cornwall, Cheshire, Derby, Durham, Gloucester, Lancaster, Northumberland, Stafford, Somerset, York (West Riding), and Warwick, which contained a population at that time of 4,493,194, and a total number of 3,910 insane persons, or one to every 1,200. His twelve agricultural counties were—Bedford, Berkshire, Bucks, Cambridge, Hereford, Lincoln, Norfolk, Northampton, Oxford, Rutland, Suffolk, and Wilts, the total population of which were 2,012,979, and the total number of insane persons 2,526—a proportion of one lunatic to every 820 sane. Another significant fact elicited was, that whilst in the manufacturing counties the idiots were considerably less than the lunatics, in the rural counties the idiots were to the lunatics as 7 to 5! Thus, the Hedges of England, who know no-

There is no excuse more commonly urged by officers of Asylums for leaving patients to indulge in utter listlessness, than the difficulty in the first place, generally speaking, of inducing the insane to do anything, and the necessity, in the next, of allowing a great many to remain inactive. To all this I grant a ready acquiescence. The determination as to occupation should depend on the judgment of the medical gentleman in charge (so long as he is deemed competent for the discharge of his duty). No one should dispute with him the propriety of leaving any number of patients he thinks fit in a total state of inactivity, both as regards mind and body. My remarks refer solely to those who it might be considered would be benefitted by having something to occupy them—not necessarily involving active exertion or exciting amusements, both of which, I believe, are frequently productive of infinitely more harm than good.

As an instance, I may mention I lately witnessed a *fete* at one of the largest of the English Asylums—(not one of those which I include in my list as worthy of imitation). A large military band performed lively airs, to which a great number of patients were dancing violently, in the most confused manner, several of them almost in a state of frenzy from the excitement produced by their exertions, as well as the sight of some hundreds of strangers admitted amongst them. The result may be easily guessed. One of the attendants informed me that the officials always looked forward to these *gala* days with dread, as, from the excitement consequent on them, it frequently took a week before many of the patients calmed down again; and that, on the whole, such exhibitions, in the opinion of the most experienced, did more injury than otherwise.

The feeling created on my mind at what I witnessed was one of extreme pain and regret that so many hundreds of unfortunate beings should be placed under the charge of those so manifestly unfit to discharge so serious a trust. I might cite other instances of things I have seen in the Asylums of both countries, where what might have proved a most important aid to recovery, if judiciously used, became the very reverse in careless or unskilful hands. A really competent and zealous medical man, unshackled by undue interference on the part of committees, can always devise and carry out a system by which those in his care are prevented from falling a prey to utter listlessness.

Various inducements can be used to persuade some to employ themselves, which need not always consist in giving them extra food, thing of the march of intellect, who are entirely guiltless of speculations of any kind, contribute far more inmates to the public lunatic asylums than the toilworn artisans of Manchester or Liverpool, who live in the great eye of the world, and keep step with the march of civilization, even if they do but bring up its rear. Isolation is a greater cause of mental ruin than aggregation. Our English fields can afford cretins, as plentifully as the upland valleys of the mountain range, seldom visited by the foot of the traveller; whilst, on the other hand, in the workshop and the public assembly, 'As iron weareth iron, so man sharpeneth the face of his friend.'

beer, or tobacco; as I am well aware that a plan of this kind, extensively adopted, might lead frequently to all requiring to be so rewarded, as a condition to their exerting themselves. There should be various other means in an Asylum to induce patients to do what may be for their benefit; for instance, granting or withholding permission to join the walking parties in the country excursions, or being present during the performance of the band, or any other entertainments provided. For those who will not, or ought not, engage in pursuits requiring much exertion of mind or body, there are a hundred simple ways which might be adopted to save them from being devoured by the intolerable *ennui*, which must prove the greatest detriment to recovery.

Thus, the most indolent will, for a time at least, engage in some game, or amuse themselves with a pet animal, &c.; or, if they will not do this, they cannot help looking on at their more active companions amusing themselves with billiards, draughts, skittles, rackets, &c.

Even watching the evolutions of gold and silver fish, placed as much out of reach as may be necessary, will, for the time, serve the purpose (with other little distractions) of tending towards the great object of "taking the patient out of himself"—a desideratum as essential to recovery as to the mitigation of the horrors which, in spite of what has been said of the "pleasure of madness," more frequently attend loss of reason.

If anything connected with so serious a subject could justify a smile, it would be at the seriousness and complacency with which some officers of Asylums insist that the establishments under their charge contain ample appliances for the occupation and recreation of the patients, although at the same time, with the exception of the ground devoted to agriculture, in many instances a common penitentiary would possess more real resources; and, just as extraordinary, Boards of Governors are found to concur in the same opinion.

While the preceding part of this pamphlet was going through the press, I visited one of the largest Asylums in Ireland. The Resident Medical Officer very politely showed me over it, and afforded me every information. Hitherto his position, like that of all the other medical residents, was little else than that of a house steward, and as he was not sufficiently long in possession of the increased powers conferred recently on officers of his class, I do not at all seek to attach blame to him (though I would probably do so in a year hence if things are not amended) for the truly deplorable sight which I witnessed. The whole aspect of the interior was that of a convict establishment. Neither in day-rooms, sleeping-cells, corridors, or exercise yards, could I discern one solitary object to interest the patients, or divert their thoughts from themselves. The same blank, cheerless look was observable everywhere.

Out of upwards of four hundred, except a small number at field work, less than a dozen males were engaged in tailoring, shoemak-

ing, &c., and a few women at sewing and knitting ; for the others, there was absolutely nothing to prevent them from becoming a prey to their own fancies, as, in addition to having nothing even to look at within the walls, the latter were so contrived as to confine the view of those inside to the sky. And there they were, poor beings, comfortably dressed and well fed, no doubt, but, so far as moral curative treatment was concerned, they might as well, one and all, have been placed on board a convict hulk.

Whilst passing through a yard, a respectable-looking man, observing that I took an interest in the mode of treatment, requested permission to speak to me, and pointed out, with great ability and truth, the disadvantages resulting from the want of adequate means to amuse and occupy the patients. He had, previous to becoming insane, been connected with the medical profession, and appeared to be intelligent and well educated. He bitterly complained of having nothing to engage his attention when so disposed, as, from his previous habits, he was, of course, unfit for field work, or any of the few trades carried on.

He gave me a copy of a letter, which he was desirous should be presented that day, at the meeting of the Board, which clearly proved that, under a proper system, some other mode of treatment would have been pursued towards a man like him than condemning him to spend the live long day in a wretched yard, with nothing to lighten the necessarily dreadful tedium.

After calling the attention of the Board, in his letter, to the subject of the adulteration of food, (which appears to be one of his weak points,) he proceeds—

“ I wish also to suggest that this Institution is very much in want of a library, from which the patients might derive information upon the current literature of the day, and the modern scientific discoveries, with their practical application to the cure of disease and purposes of daily life. A good library would form around the patients a good moral and intellectual atmosphere, with regulated social habits, good taste, and union in a spirit of Christian brotherhood. I perceive by the report of Asylums, Dr. ██████████ was so kind as to send me, that the libraries lately established in them are a great source of attraction to the inmates, and, with their ample supply of periodicals, affords them much useful and agreeable occupation. The library should comprise a carefully selected assortment of books, among which almost every department of science and literature should be represented. Among them should be a large supply of standard works on The Nature and Constitution of the Legislature ; How the Government of this Great Empire is carried on ; How Laws are Enacted ; How Justice is Administered and Trials Conducted ; The Rights of a Community ; The Duties of Electors, &c.

“ How ignorant of the power of the British Government must any set of men be who, in those days, conspire to overthrow it by force. These foolish fellows of the Phoenix Society, for instance, how utterly unaware they must have been of the magnitude of the task they proposed to themselves !”

This poor man, possessed, as he was, of a considerable amount of education, highly intelligent, and evidently most anxious to be provided with some resource, was absolutely left without any. Books, I was told, were not to be had; and, even if he were provided with them, he would probably have found it impossible to read, from the noise about him, and the absence of all arrangement for patients disposed for quiet occupation. As an excuse for the state I found him in, I was told he was at times very violent, and that even if his wishes were complied with he would not long avail of the indulgence. Admitting all this to be true, yet it made the mal-administration the more reprehensible; as, in a properly conducted institution for the insane, the lucid intervals of such a man would have been availed of to agreeably occupy him in some favourite pursuit, and I have no doubt the violent paroxysms which he was represented as being subject to, would have been less frequent, and his ultimate recovery promoted, if there existed anything in that Asylum which even approached what might be called a curative moral system. I was also given to understand that none of the patients were ever permitted to take exercise in the country; so that unless for the few disposed for, or adapted to, field labour, they might as well, for all purposes, have been consigned to the county prison beside them. No matter how full of youth or physical health and vigour, that boon, trifling to grant, but inestimable to those poor prisoners, of occasionally seeing something of the world from which they were separated, and walking through green fields, was most cruelly and, as a mere question of economy (calculating its effect, as proved elsewhere on recovery) most unwisely denied.

For them, and unfortunately for thousands like them in other Asylums in Ireland, year after year rolls on, and as spring and summer suggest, each in its turn, to their minds thoughts of country, sea-side, or other loved scenes, it is not surprising if sorrow and despondency, or even desperation, should fill their hearts when they mournfully reflect that for them the returning season brings no participation in the joys which others look forward to, and which, if permitted, many of them could partake of with safety.

After my visit had concluded, I was very courteously invited by the Board, who were then sitting, to be present at their proceedings, and in reply to the inquiries of some of the members, as to how I liked the Asylum, much surprise was manifested that I had not been gratified at what I had seen; the idea evidently entertained by the Committee being that there was little to find fault with.

The principal business before the Committee that day was a correspondence with the Chief Secretary, regarding the new Privy Council Rules, which appeared to cause dissatisfaction, as interfering, as they conceived, with their functions, which, no

doubt, they believed they had discharged most advantageously for those entrusted to their charge; and yet, I will, with every respect, venture to assert (a remark almost equally applicable to every Board in Ireland) that if any one of a dozen eminent professional authorities on insanity, whom I could name, were brought over that Asylum, they would unhesitatingly declare that it was a deep reproach to all who could in any way be held responsible, for the utter absence of one of the greatest essentials for the patients' recovery.

And yet it would be difficult to find a Board in the kingdom composed of men from whom more ought to be expected. Amongst them were eminent Divines, distinguished Statesmen and scholars, and gentlemen who held a prominent and honourable position as magistrates, citizens, and promoters of useful public matters. And no better proof could be adduced of the erroneous ideas which exist on the subject of the treatment of insanity, even amongst some of the most intelligent and well-educated, than the stand-still condition of this Asylum; for, in the respect I allude to, it cannot be better than it was twenty years ago, for the simple reason, that, in the defect I complain of, it could never have been worse than it is at present.

I wish it to be understood that I have not singled out this Asylum as presenting anything very different from the others. By no means. I adopt it merely as a good illustration of more than three-fourths of the entire number. On the day before I visited another Asylum, containing nearly 200, in every sense quite as bad, and on the following day a third, which might take its place beside the other two.

At nearly every Asylum I visited returns were shown me of the number of patients occupied each day, which, to a person unacquainted with the way in which such reports are got up, would convey a very false idea, as any period, no matter how short, that a patient may be employed seems to be sufficient to justify his or her appearing on the daily return as occupied. Once that a patient has been induced to do enough to warrant his being put down, little heed appears to be taken generally as to how he disposes of himself afterwards.

More blameable (to use a very mild term) than even this is the attempt made by some officers of Asylums to show that amusements and occupations are provided for patients under their charge, when they must know in their hearts at the same time that little deserving of the name exists. Such a course is not only a fraud on the public, who are induced, by the misrepresentation, to suppose that everything is right, but it is also a gross and wicked fraud on the unfortunate patients, as it tends to pre-

vent them from being provided with what would mitigate the rigour of their confinement and promote their restoration to reason.

Local officials may shelter themselves from the imputation of misrepresentation by showing that their statements are nominally true ; but when they are not substantially so, the deception is the more criminal, particularly when the well-being of the most afflicted of all our fellow-creatures is concerned.

I will give but one instance to prove how, without investigation, an Asylum might be made to appear as having every requisite, whilst, at the same time, it was nearly destitute of the most important. About a year ago I called attention to the deficiencies of an Asylum as regarded the want of suitable means of occupation and amusement for the patients, of which there were scarcely any. Of this fact I had peculiar facilities for being aware. The Resident Officer immediately wrote to the local papers that there were ample means to amuse and occupy the patients, as there were, besides various games, animals, birds, plants, pictures, music, &c., and that some were allowed out ; and concluded by expressing a fear that if more enjoyments were added to those, that sane people outside would probably feign madness, in order to be admitted to participate in them.

Now, the gentleman who did this is, in his own department, a most excellent officer ; and, as devising the mode of treatment to be pursued in the Asylum forms no part of his duty (which should merely consist in carrying out the views of the officer responsible for the medical and moral treatment of the patients), I do not seek, in the slightest degree, to hold him accountable for a better system not being in operation ; but I regret that the intelligence and ability which enables him to fulfil his own duties so creditably, has not enabled him to see that as soon might it be attempted to prove that one swallow makes a summer, as that the stock of resources which he put forward so glowingly could be deemed sufficient (by any rational or humane person) for nearly two hundred people.

At the period I speak of (things have since, for obvious reasons, changed for the better, though still very far short of what they ought to be,) the four-footed animals consisted, I believe, of a calf in process of being reared ; and even to this interesting creature only a limited number of patients, and that by special favour, could have access ; a bird, caught by an enterprising patient, which subsequently either died or made its escape.

The plants were composed of half a dozen bad geraniums, and the pictures of a few wood-cuts, taken out of the *Illustrated News*. Indeed, the whole stock of the above resources, for male and females, would have been (except the calf) very dear at five shillings ; still they were sufficient to save the veracity of the Manager, as to such things being there.

The musical resources then consisted of a violin and a tambourine, but were not heard unless when some lunatic, accomplished in their use, was in the vein to play.

The statement as to patients being allowed out rested, I believe, on the fact of one man, who made himself very useful, being permitted occasionally to accompany the keepers when they went to market, &c. Since then, however, more relaxation has been granted to a few.

In order to show that I was not unsupported by others in my account of this Asylum, I give the report of a deputation of the Grand Jury, appointed to visit it at the period I write of. Three of the gentlemen who composed it were totally unconnected with the Institution, and perfectly independent of all influence, and, as men of honor and intelligence, incapable of being parties to any report in the truth of which they did not fully concur :

“The Foreman having suggested that it would be desirable for the Grand Jury to adopt the same plan as that followed by the County, by sending a deputation to inspect and report on the District Lunatic Asylum, it was

“*Resolved*—That a deputation, consisting of as many of the Grand Jury as wished to attend, should visit and report on the state of the Asylum on the following day.

“*Report of the Deputation appointed by the City of ——— Grand Jury to visit and report on the state of the District Lunatic Asylum.*

“The deputation beg to state that on the 13th they visited and inspected the entire of the Asylum, and desire to submit the remarks which they entered on the books of the Institution, as containing the opinion which they entertain as to some of the changes which they consider ought to be introduced, with a view of relieving the monotony of the patients’ existence by occupation and amusements—two essentials in which the Asylum appears to be very deficient—and which the deputation feel no doubt would tend considerably to alleviate the sufferings of the unhappy beings afflicted with mental alienation, and also contribute greatly to the restoration to reason of those capable of recovery.

“They also desire to again express their concurrence in the remarks bearing on this point in the Report of the Royal Commission, of which they subjoin an extract; and recommend that the attention of the Judge of Assize should be called to the matter, with a request that his lordship would have the kindness to bring the subject under the notice of Government, with a view of having the deficiencies, which they consider exist in Lunatic Asylums, remedied.—(Signed.)

“*Remarks of the Deputation in the Visitors’ Book of the Lunatic Asylum.*

“We, the undersigned, constituting a deputation appointed by the City of ——— Grand Jury to inspect and report on the state of this Asylum, desire to state that we have gone through the entire Institution, and seen every patient; everything appeared very clean and orderly, and the patients healthy. We have, however, been particularly struck with the great want which exists of appliances for the recreation of the patients within doors, and fully concur in the opinion expressed on this point in page 14 of the Report of the Royal Commission of 1857. In consequence of the wetness of this day the inmates are obliged to remain in the day-rooms; and, be-

yond a very few engaged in reading, and some women employed at needle-work, the others have nothing to interest them. This might be easily obviated by having a few plants, birds, and simple games provided, together with music. The objection urged that the former would be liable to be destroyed, is not, we consider, a sufficient excuse, as it appears that such results do not follow elsewhere when the experiment has been tried. We also recommend the establishment of schools on the male and female sides, and the levelling of the walls in some of the exercise yards, substituting in place of them sunk fences, or stout wooden bars. We are also of opinion that the patients fit for such indulgence ought to be occasionally permitted to walk into the country in the care of keepers.

"The contemplated increased accommodation will, we consider, be productive of many advantages, and enable several of the suggestions which we have offered to be carried into effect, and which, we have no doubt, would contribute materially to promote the happiness, comfort, and recovery of the patients.

"July 16, 1861."

Hitherto the practice of Grand Juries visiting and reporting on the condition of District Asylums has been confined to the County Grand Juries, although cities, of course, as contributing to their support, possess an equal interest in seeing that they are properly managed. Except in the foregoing instance, I am not aware of any other city where a Grand Jury undertook a similar task, an example which it is to be hoped will be followed elsewhere; and, especially, that those performing the duty will regard Asylums in another light to what they hitherto appear to have done—viz., as mere places for the safe keeping of the insane—the reports of the visits of Grand Juries that I have seen being such as would be quite suitable for a gaol or house of correction, evidently showing that they considered, beyond seeing there was order and cleanliness, good food and clothing, their functions did not extend, or, indeed, that anything more was required for the well-being and recovery of the insane.

If Grand Jury deputations were only impressed that there was something requisite in addition, and would satisfy themselves as to whether it found a place in the treatment pursued, and if, on discovering that it did not, had the interests of the patients and ratepayers at heart sufficiently to disregard any dissatisfaction they might cause officials, by pointing their duty out to them, (as the Grand Jury whose report I have quoted,) I have no doubt the Irish Asylums would soon present a marked improvement.

I will take advantage of being on this part of the subject to express my strong condemnation of the practice of many persons, whose rank or high official position gives importance to anything coming from them, placing on record in the Asylums they visit, without sufficient inquiry, their unqualified approval and admiration both of the institutions and of the system pursued.

This too often arises from such visits being made on great public occasions, when everything and everybody is expected to be praised,

and when doing anything to the contrary would be regarded as a great act of ungraciousness.

Persons holding such responsible positions, however, should reflect whether, if the same visitation of Providence deprived them of liberty, they would consider the system of which they express their approval such as they would wish to be subject to ; and before leaving the walls of an Asylum, free to avail of the numberless resources which the world offers to them, and the power to go where they please, they should mercifully think of the restricted enjoyments of the poor beings they are leaving behind within the narrow precincts, to which many of them may be condemned to pass years, perhaps their lives, and pause ere, by unmerited commendation, they unwittingly become a party to the glossing over of officials' incompetency or neglect, and thus assist in perpetuating evils, and frustrating the efforts of those labouring to remedy them.

I have already stated that the Irish Asylums, taken as a whole, are, I believe, quite as good as those of England and Scotland. To this opinion I still adhere, as the defects I complain of are, with a few exceptions, just as great in the Asylums of those countries as in Ireland ; but there are in England some half dozen Asylums far superior to any of the others, and equally superior to the Irish ones. I am far from holding them up as perfect models of what institutions for the insane should be, as I have yet seen nothing to realise my ideal of an Asylum ; but they are the very best of the kind I have met with ; and I should be well content if, in a few years, the Irish Asylums came up to them as regards the means adopted to make the patients as happy as circumstances will admit of, and to promote their recovery.

If being divested as much as possible of the aspect of a place of detention, and having instead as much of the air of an agreeable residence, combined with as much happiness as can be enjoyed by persons consistently with the loss of reason, together with the highest amount of recoveries, entitles to high consideration, then the Royal Hospital of Bethlehem deserves to take the first place amongst not only the best curative institutions of the empire, but even of the world. There was a time when it bore, and merited, a different reputation (even in our own day instances have not been wanting of revolting occurrences within its walls) ; and little was done worthy of ranking it beyond the most ordinary of other institutions of the same kind, until its medical arrangement was placed in the hands of its present able Physician, Dr. William Charles Hood—a name deserving of ever being mentioned with the highest honor in connection with the subject of insanity, and affording another instance of what one really able and zealous man can effect, having a noble object in view, and prompted by feelings of duty and humanity.

I deeply regret my limited space precludes me from entering into as full details of everything connected with the magnificent Hospital under his charge as I would wish.

Notwithstanding the numerous occasions I have visited it, yet I could do so over and over again with pleasure, so much is there each time to gratify anyone who feels an interest in seeing the insane treated as they ought to be, more particularly after witnessing the different state of things I have been describing as existing elsewhere. In Bethlehem may be seen, in successful operation, the principle I have strongly advocated, of providing for the patients, without taxing the mind too much, the means of always agreeably occupying themselves, and that by contrivances so simple and economical as to be practicable in any Asylum.

In the day-rooms and corridors (which latter have the advantage over those in Ireland of being twice as broad, thus serving many useful purposes, whilst the others are useless, unless as mere passages,) may be seen busts, statuettes and engravings, birds, pet animals (such as rabbits, squirrels, &c.), gold and silver fish, plants, &c.; and, for those disposed to read, newspapers and well-selected books.

Besides the larger trades carried on, there are (particularly for the females) various light occupations; and, in the way of other amusements, a good deal of music, balls, and excursions, both to London, as well as the neighbourhood.

The plants, fishes, and pet animals, are in charge of patients, who derive much pleasure from attending to them. The following extracts from two of the late reports will give some further idea of the system pursued and its success:—

“REPORT, 1859.

“The Chaplain has, with Christian benevolence, instituted Weekly Bible Classes in the male and female Criminal Establishments; and not only gives all who are willing to attend his ministrations the consolation of religion, but instructs those who are ignorant, and by shedding some light into their dark souls endeavours to make them moral as well as wiser men.

“The privilege of walking beyond the grounds of the Hospital continues to be enjoyed by both male and female patients; scarcely a day passes on which two or three parties do not pass the gates for exercise or sight-seeing under charge of their attendants. We feel thankful to state that on no occasion has the privilege been abused, or discredit brought on the party by the misconduct of any individual member. Only on one occasion have any failed to return at the specified hour, and this omission was so natural that it merited no rebuke: a mother yearned to see her only child, crossing the street a cabman hailed her, the temptation was too great, the opportunity might not return; she evaded the attention of the nurse for a moment, sufficient to jump into the cab; her absence was detected immediately, but search was in vain, for the cab was driving fast to the home of her child; contrary to her fears she found the child in good health, and readily returned to the hospital when requested to

do so by the nurse who had been sent for her, regretting the trouble and anxiety she had caused.

“The evening amusements are as much thought of, and anticipated with the same character of pleasure, as seven years since, when they were first introduced. The preparation for each monthly party, and the recollection of it when past, form subjects of thought and interest to many. We are usually assisted in the music by some patient, who, though herself discharged “well,” does not forget that she can by her presence offer encouragement and pleasure to others, to whom Providence may have been less gracious.

“The convivial meetings, though simple in their entertainment, are cheering to many who feel themselves separated from their families, and all they hold dear; while not unfrequently they kindle a spark of life almost unknown in the apathetic career of the demented. A singular instance of this occurred at our last Christmas gathering. One of the officers kindly undertook to perform some acts of legerdemain. Among the party was one who had not spoken or taken any interest in passing events for nearly four years. His dull life had been passed in mere vegetation, and his tongue only gave utterance to a few mumbling oaths when opposed in any of his wishes. On entering the room, he took his seat with the others, but not before he had scrutinized the gentleman, and expressed satisfaction with the disguise he had adopted; he followed with close interest all the tricks,—detected some, admired the dexterity in others,—and ended the evening with drinking a glass of wine from the “Wizard’s Bottle,” to the health of the Queen. Much of this mental sunshine was transient, but some improvement upon the dull past is hoped for. The following morning the idiotic man was sweeping his ward; each week a trifling advance may be noticed sufficient to alter the previous prognostics, and stamp the case as one which may, within the range of possibility, some day be cured.

“1860.

“There has been no reason to restrict the privilege of taking exercise beyond the grounds of the Hospital. The indulgence is much enjoyed by the patients, and the change of scene thus afforded is of great benefit in supplying subjects of interest to their minds. As the names of each are entered on a pass paper, I am able to state with accuracy that upwards of one hundred and fifty have, on different occasions, varying in some cases from sixty to seventy times each, walked out for pleasure and exercise, visiting museums, exhibitions, and other places of amusement, as well as their friends, and returning to the Hospital, without giving, during the course of the year, cause for one moment’s regret, in any instance, that the permission had been granted.

“It is not necessary for me to record all the different means by which recreation and amusement have been provided for those who, to a great extent, separated from the world, find solace and mental benefit in light and cheerful occupation. Each evening, in one or

other of the wards, the piano may be heard accompanying the dance or the song. The monthly general parties are looked forward to with as much pleasurable anticipation, and present as many happy animated faces as during the first year they were instituted. The billiard and bagatelle tables are still enjoyed; and the anticipations of many are raised by the promised continuation of the Series of Lectures on Travels in Switzerland and Germany, which our Chaplain commenced last year. The patient referred to in my last Report as so much benefitted by the stimulus of an evening's amusement has continued to improve satisfactorily and progressively; he no longer looks like the idiot man of last year, or passes day after day in passive idleness. Throughout the year his life has been an active one; and though still harbouring some strange delusions and mysterious fancies, he is happy in following his former trade of a bookbinder, and has rendered valuable assistance by restoring some of the dilapidated volumes in our library.

“We have again to record the Deaths of some patients who have passed many years under this roof, and also of a few who, from the state of extreme physical weakness in which they were brought into the wards, soon died, giving us but little opportunity of affording them relief—thus, two died after forty-three and one after thirty-six years residence; four died within ten days and ten within three months of their admission. In almost all the cases the death was anticipated and dependant either upon long persistent organic derangement or upon the extreme state of exhaustion to which the patient was reduced.”

The result of this judicious and humane course may readily be imagined. Whilst passing through the Hospital, the pity that frequently fills the mind of the spectator, when visiting other institutions for the insane is not called for here, as he looks at the happy appearance of the inmates; for, except with the few in the refractory wards (usually the latest admissions, who have not yet been subdued by the soothing influence of the treatment,) the most observant might look in vain for those melancholy features of the dread disease which are too apparent in the generality of Asylums. The following results, as regards recoveries, and other statistics, I have compiled from the last Report:—

“To many, who, from their warm interest in the Hospital are led to look with anxiety for the results of the past year, it may be gratifying to learn that the per centage of cures upon the number of admissions stands at 66 per cent., the largest ever recorded; but without any wish to check such satisfaction—indeed, if I may say, from a desire to place this annual balancing of our accounts on a right and satisfactory footing—I would solicit a moment's hesitation before judging of the past, or anticipating for the future, by the present return. The annual per centage is but a meagre—often a very false—criterion, of the continual outpouring of charitable

aid rendered by this Institution; the record of cures actually effected, although gratifying in proportion to their number, is but a circumscribed evidence of its usefulness, which must not be valued by the ebb and flow of medical success, or the thousand unforeseen circumstances which in the course of twelve months may affect the rise or fall of the statistical barometer. The mean average of a number of years will alone show, if comparison is required, whether we are before or behind our predecessors in success; a conscientious desire and hearty exertion on our part will alone shield us from inferiority. With this view the following Table has been prepared, and although some years appear to yield us less credit than others, it will show more forcibly than words, that by dividing the last forty years into four decennial periods, the per centage of cures has gradually increased:—

From 1820 to 1829 inclusive, the cures were	46	per cent.
„ 1830 „ 1839	52	„
„ 1840 „ 1849	54	„
„ 1850 „ 1859	56	„

On the 1st January, 1862, three hundred and twenty-two patients remained in the Hospital, belonging to the following classes:—

Curable	...	...	...	...	...	...	...	...	...	120
Incurable	...	...	...	...	...	...	...	...	...	73
Criminal	...	...	...	...	...	...	...	...	...	129

The two hundred and thirteen patients admitted were as follows:—

Curable	...	...	...	...	...	...	...	...	...	166
Criminal	...	...	...	...	...	...	...	...	...	47

The two hundred and fourteen discharged or removed were:—

Cured	...	...	...	...	...	...	...	...	...	104
Uncured	...	...	...	...	...	...	...	...	...	59
Special reasons	...	...	...	...	...	...	...	...	...	13
Criminals removed	...	...	...	...	...	...	...	...	...	38

The twenty-two patients who have died were:—

Curable	...	...	...	...	...	...	...	...	...	15
Incurable	...	...	...	...	...	...	...	...	...	2
Criminal	...	...	...	...	...	...	...	...	...	5

Time the incurable Patients have been in the Hospital:—

Upwards of 50 years...	...	...	...	...	...	...	...	...	...	1
„ 30 „	...	...	...	...	...	...	...	...	...	3
„ 20 „	...	...	...	...	...	...	...	...	...	19
„ 15 „	...	...	...	...	...	...	...	...	...	18
„ 10 „	...	...	...	...	...	...	...	...	...	10
„ 5 „	...	...	...	...	...	...	...	...	...	9
„ 2 „	...	...	...	...	...	...	...	...	...	6
„ 1 „	...	...	...	...	...	...	...	...	...	7

“ Although the daily average of patients resident in the Hospital was larger during 1861 than the previous year, the number of admissions was

considerably less. The bodily health and condition of a large proportion of those who were received was far from favorable. The majority were suffering either from a chronic form of disease, or that state of mental depression which, while not destroying the presumption that recovery might be obtained, admits of only a slow return to convalescence, and renders the treatment and necessary residence in the Hospital very protracted.— This physical aggravation will account for the large amount of sickness, and also some trifling increase in the mortality. A large number of the cases admitted were, either from the cause or form of disease, of a most interesting character. Some of those admitted in an apparently dying state, have returned to their families strengthened in body, recovered in mind, and full of grateful recollections; and the death-bed of more than one with whom cure was impracticable, has been made happy by the wise counsel of the Chaplain.”

It has been frequently urged that the present regulations of this Hospital are particularly favourable for obtaining the highest results as to recoveries, and that a comparison between it and other Asylums not having the same advantages, is decidedly unfair, inasmuch as no incurable patients are admitted, and that, generally speaking, those not recovered at the end of a year are discharged.

No doubt, this regulation has its advantages, but it also has its drawbacks, as a great number of patients are often discharged as uncured at the end of twelve months who have progressed towards recovery, and who, if retained for a further period, would probably be dismissed as cured. On being discharged they are sent to other Asylums that, of course, derive all the advantage of the previous treatment at Bethlehem, and reap all the credit for recoveries, the principal merit of which is probably due to the latter institution.— On this point Dr. Wood makes the following just observations:—

“ In comparing the recoveries in Bethlem Hospital with the recoveries occurring elsewhere, it is necessary to bear in mind the rules of the Institution, which are peculiar to it and St. Luke’s. These regulations render ineligible all applicants who have been insane for more than twelve months; all who have been discharged, *uncured*, from other Hospitals; and all aged and weak persons, and pregnant women. In addition to which, those who have not recovered at the expiration of a year after admission, are dismissed. Rules so stringent must have considerable influence upon the number of recoveries and deaths; and it is interesting to enquire what that influence may be. At first it might be supposed that the number of recoveries ought to be increased by leaving out unsatisfactory and hopeless cases; but, on the other hand, many additional recoveries would undoubtedly be recorded if the uncured patients were not discharged at the end of twelve months; the effect, therefore, of the rules of this Hospital upon these statistics is not at all made evident. That many patients would recover, if they were allowed to remain in the Hospital for a longer time, is manifest, and that this is so, may at once be shewn by a table which gives the experience of the Salpêtrière, under Esquirol, for a period of ten years.—(*Mental Maladies*, 1845, p. 61).

NUMBERS.	YEARS.											Totals.
	1804	1805	1806	1807	1808	1809	1810	1811	1812	1813	1814	
Admitted												
209	64	47	7	4	3	2	0	1	1	0	0	129
212		73	54	4	2	2	1	0	0	0	1	137
206			78	49	10	3	1	1	1	0	0	143
204				60	55	11	1	0	2	0	0	129
188					64	57	4	2	1	0	2	130
209						48	64	9	4	1	3	129
190							48	51	7	1	3	110
163								44	30	8	3	85
208									75	41	11	127
216										50	49	99
2005												1218

“ Of these 2005 patients, who agreed in nothing except in being cases which were presumed to be curable, 604 recovered during the first year, 497 in the second year, 71 in the third year, and 46 in the seven succeeding years. The numbers cured in the second year, as compared with those in the first year are nearly as 5 to 6; sometimes even more patients were cured in the second year than in the first; thus, in 1809, 209 patients were admitted, and of these 48 were cured in the first year and 64 in the second year; and again, in 1810, when 190 patients were admitted, 48 were cured in the first year, and 51 in the second. Such being the case, it is at once apparent that the number of recoveries must be greatly affected by a rule which limits the time for recovery to a single year.”

Amongst the other reasons advanced against instituting a comparison between Bethlehem and ordinary Asylums, is one for which there is more apparent reason, perhaps, than the one to which I have just alluded,—that the very large revenues which it possesses enables a more liberal expenditure on the patients than would be allowed in County Asylums. It must be borne in mind, however, that the class of patients in the former are, as a rule, far superior in position to those of the latter. Looking over the list of persons admitted to Bethlehem, I find the great majority of males to consist of clergymen, merchants, surgeons, architects, artists, shopkeepers; and amongst the females, that governesses, and the wives, widows or daughters of professional men, merchants, and clerks, preponderate. A scale of dietary and other things, in keeping with the previous station and habits of such people, is found, of course, essential, and necessarily involves a larger expenditure,—further augmented by the higher rate of wages and

price of provisions in the metropolis as compared with the country. I will, however, venture to assert positively, that that which constitutes the chief merit of Bethlehem is its admirable system of moral treatment, which can, after the first small outlay, be imitated in County Asylums, as successfully, without entailing the expenditure of an additional shilling. Before bringing forward instances to illustrate this assertion, it may be well to give some description of the system pursued in England with regard to the insane poor, more particularly as it will materially assist in bearing out the truth of what I have frequently contended for, that the Irish Asylums possess a decided advantage over those of England, in consequence of patients being generally placed under treatment at a much earlier stage of the malady than in England.

According to the last Report of the English Lunacy Commissioners, there were 31,533 pauper patients maintained out of the public rates, who were disposed of as follows :—

In County Asylums.	In Registered Hospitals and Licensed Houses.	In Workhouses.	With Friends or elsewhere, and Lodged or Boarded.
16,201.	1,143.	8,219.	5,970.

As may be perceived, little more than half the number are really under what can be termed treatment, those in workhouses being, of course, dealt with very much as the other paupers—their malady being rather augmented than otherwise, from the absence, as a rule, of anything like a system adapted for them.

Before reaching the workhouse, in a great number of instances the chances of recovery have been diminished by their being placed under the care of persons (generally their own relatives) who, for the sake of the stipend allowed by the parochial authorities (usually something under what their maintenance would cost in the workhouse), keep them until they become too violent or otherwise unpleasant to retain. In the same unwise spirit of economy, they are then usually sent to the workhouse, as being cheaper than the asylum. There they remain, until it becomes absolutely necessary to transmit them to the latter—the chances being then two to one against recovery, owing to the previous injudicious treatment. On this subject the following admirable remarks appear in the *Curiosities of Civilization*, extracted from a late number of the *Quarterly Review* :—

“ One of the most important points in reference to insane paupers, as we have already intimated, is the bringing them as speedily as possible under treatment. The reluctance of the lunatic himself to be removed is usually extreme, and it is marvellous what ingenuity he will often employ to thwart the design. The aversion of the sufferer himself to be taken away coincides with an equal aversion on the part of his relatives and friends to send him from home ; nor do they take the step till the madness

grows intolerable. Precious time is thus lost at the outset, and when the removal occurs it is mostly to the workhouse. Here the patient is usually kept during the remainder of the curable stage of his malady. The parochial authorities are generally guided by an immediate consideration for the pockets of the ratepayers, rather than by any care for the welfare of the lunatic; and, as they maintain him in the 'house' at three shillings a week—when they would have to pay nine if they transferred him to the County Asylum—in the workhouse he remains until he becomes so dirty or troublesome in his habits that the guardians are willing to pay the difference to get rid of him. The first few months of the disease, within the narrow limits of which full 60 per cent. of the recoveries take place, are thus allowed to run to waste. Months fly by, and the victim subsides into the class of incurables. This produces a second evil. As the drafts of incurables are perpetually flowing into the Asylums, they become 'blocked up' in the course of a few years, and are converted into houses for the detention of hopeless cases. To this condition three-fourths of the Asylums are already reduced; and the efforts of philanthropic medicine are brought to a dead lock by the shortsightedness of the parish authorities, who do not consider that, for the sake of saving a few shillings in the board of Betty Smith, in the first weeks of her craziness, they are converting her into a chronic burthen, seeing that she will probably live to a good old age in the Asylum, and cause them an ultimate expenditure of hundreds of pounds. To the swifter removal after the outbreak of the disorder, we must look for a permanent remedy; but in meantime something must be done to disembarass the public Asylums of the dead weight of hopeless cases, if we seriously intend to take advantage of the curative appliances we already possess. The Commissioners seem inclined to favour the erection of separate Asylums for those who are beyond the reach of medical art. To us it seems that the more economical plan would be to apportion certain wards in the various workhouses for the reception of chronic cases, and to draft off the idiots alone to special establishments. By this means our water-logged Asylums would speedily right themselves, and again become what they should never have ceased to be—hospitals for the cure of the insane. At present we encourage an elaborate system for the manufacture of life-long lunatics. It is well known that the cures of early cases of insanity throughout England amount to 45 per cent., and at Bethlehem and St. Luke's, where no others are received, the cures have amounted to 62 per cent. and 72 per cent. respectively; whereas, at Colney Hatch, Hanwell, and the Surrey County Asylum, the three great receptacles for the sweepings of the metropolitan workhouses, the average cures do not exceed 15 per cent. If we take the lowest averages of cures, there is still a difference of 30 per cent. of human creatures who sink down into the cheerless night of chronic dementia and idiotcy, or who dream away the remainder of their lives in hopeless childishness."

Some idea will be formed of the state that many patients must be in as regards curability, when received into the County Asylums, from the following extracts from the Report of the Commissioners for 1860, as to the condition of some pauper patients. I might give some scores of other instances, both from what I saw myself as well as accounts supplied me from trustworthy sources, but prefer confining myself to authority furnished from official sources:—

"As regards the case of T. E., who has been confined in the garret of his father's house at Newcastle-in-Emlyn, for several years in a perfectly

naked state, doubts having been raised as to whether he can be considered a pauper or not, we have given directions that steps should be taken under the 68th section of the Lunatic Asylums Act, 1853, to cause his removal to an Asylum as a Patient not properly taken care of.

"It is a somewhat singular coincidence that two instances of insane persons, kept in a perfectly naked state by their relatives, should have fallen under our notice in one year. Case of E. R. This Patient was found by one of the Commissioners in the month of June last, living with her aged and bedridden mother, in a wretched, filthy hovel in Carmarthen.— Her miserable condition, and the fact that three other persons had been in the habit of sleeping in the only bed (almost the only piece of furniture) in the room, were reported to the Board of Guardians. Reply was made by them on the 3rd of September that the case had been attended to by the Relieving Officer, and that the place had been cleansed and otherwise improved.

"The same Commissioner, however, on making a second visit to this poor woman, on the 13th of October, found himself under the necessity of reporting that the statement so made by the Guardians was utterly untrue; and that the hovel was in a more filthy and disgraceful state than before. He concluded his report with the following comment on the case: 'In the reply made by the guardians no notice appears to have been taken of the fact that three other persons, one being a male, in addition to the idiotic woman and her decrepit aged mother, occupy one bed, which is moreover reported to be infested with vermin. This extraordinary circumstance was distinctly pointed out in my former report. Its continuance is most disgraceful, and the authorities deserve the greatest censure for not having taken immediate steps to put an end to the arrangement. For this purpose I suggest that the idiotic woman and her mother, as well as the little girl, should be forthwith removed to the workhouse, and that the young woman and young man, who appear to be now leading a vagabond life, should be otherwise taken care of, and put in the way of obtaining regular employment.'

"Notes made on the Condition of Single Pauper Patients in Carmarthenshire and Cardiganshire, visited on the 26th and 27th of June.

"The first is that of an Insane Patient (at Carmarthen) who is placed under the sole charge of her daughter, who is also insane. The second is that of a weak-minded woman (also at Carmarthen) who lives in a wretched hovel with her mother, who is aged 93, bed-ridden, and totally helpless; the room is extremely filthy; it is destitute of the commonest domestic conveniences, and contains only one bed, in which three other persons (one of whom is a male), besides the Idiot and her mother, sleep every night.

"The last case is that of a young man (at Newcastle Emlyn), who has been kept shut up in the garret of his father's house, and allowed to remain perfectly naked during the last three years. The place where he has been thus confined, is a sort of loft for lumber, and is dreary and dismal in the extreme.

"MR. MAGOR'S REPORT ON T. R.

"1. That I found the Lunatic naked in an unfurnished room of moderate dimensions, confined by a chain about five feet long, one end of which was attached to his wrist, and the other to a post extending from the floor to the ceiling.

"He was lying in a peculiar position (presently to be described), on a mattress of coarse sacking stuffed with straw; the bed clothes consisting only of two ordinary coverlets. The window was secured by strong iron

bars, but nearly all the glass was broken ; there was no fire-place or other contrivance for warming the room, and the plaster of the walls and ceiling was broken in several places. The floor was a mud one ; the room was not provided with any convenience, and I observed stains about the bed-clothes.

“ The man who attended on the Lunatic informed me he had cleaned the room after my arrival at the house, and before my inspection.

“ 6. T. E., about 30 years of age, lives with his father, D. E., a hand-loom weaver, near Newcastle Emlyn ; has been weak-minded from infancy, and formerly he wandered about the town, resorting principally to the stable-yard of the hotel, where his fondness for animals was gratified. He is said to be inoffensive if not irritated, but when vexed he would cast dust or pebbles at those who annoyed him.

“ It appears that about 10 years ago he threw a stone at a party passing through the town in a carriage, whereupon he was handcuffed by the police and ordered to be kept within doors. He was consequently detained at home and restrained by means of the handcuffs. In about two or three years afterwards the links of the connecting chain became so thin by constant friction that they ultimately gave way, and his hands were thus set at liberty. The instruments of restraint were not repaired, and subsequently he was kept confined in the loft or garret of his father's house. He became violent and destructive, tore up his clothes and bedding, and for the last three years he has been permitted to remain in a perfect state of nudity, and has been kept shut up in the loft during the day time.

“ This attic is reached by means of a steep stair ; it has only a small barred opening, high up in the gable, for light and air, and has all the appearance of an old lumber loft. It contained a few cast away articles of furniture, a little loose straw, and a tub for the use of the Patient.

“ I found him entirely naked, and wandering about the dismal loft, the wooden floor of which had become highly polished by the constant friction of his bare feet. On my approach he retreated to a far corner, and crouched down on a heap of loose straw ; in a little while, at the request of his father, he rose up and shook hands with me. He was not emaciated, and his person appeared to be tolerably clean.

“ He usually sleeps with his father in the lower room of the cottage, which contains two beds ; but as an uncle, who is now on a visit, occupies his place at night, he lies at present with his sister, an intelligent young woman, about 24 years old. The worn-out handcuffs were produced in testimony of the difficulties they had to endure, and all the particulars of this painful narrative were freely, and I believe truthfully communicated. From these it appears that a weak-minded youth, who for nearly 20 years wandered about his native place, without prominently manifesting either violence or destructiveness, was suddenly handcuffed and kept in confinement, and that subsequently he became both violent and destructive, and was ultimately reduced to the inconceivably deplorable state already described. Had proper means of treatment been adopted there can be no doubt this sad condition might have been entirely averted, and even now removal to a well-conducted Asylum would be followed by the best results.

“ This opinion I communicated to his relatives, to the Clerk of the Union, the Overseer, and Medical Officer ; to the latter gentleman I also stated that T. E. ought to be reported by the Relieving Officer as a case of insanity, ‘ not under proper care and control,’ in his district.”

From the details furnished by the Lunacy Commissioners for Scotland (Report, 1861), it would appear that the condition of

many of the single patients, placed with relatives and others, is just as dreadful as in England. For example—

“J. S. This woman’s condition is, in all respects, unchanged. The report of last visit exactly describes what I saw. A scene of greater confusion and dirt could not be imagined. She and her cats and her hens occupy a small one-roomed hut, built for her at the back of a wood, on a piece of waste ground, with only one other dwelling in sight, and that at a considerable distance. The situation is bleak and lonely, and the house itself though substantial and warm, has a painfully deserted, lifeless look. The filth and grotesque disorder of the interior make it indescribable. All this is highly unsatisfactory, but that which makes the arrangement for the proper care of the patient so very objectionable has still to be pointed out. Her age is said to be 78, and she exhibits in her increasing frailty the evidence of this great age. Yet she lives alone in this isolated hut, practically under no surveillance, although her last dwelling was twice burnt down, and although it must be evident to every one that the risk of a third conflagration is imminent. This danger arises from the bodily frailty of the patient, from her mental confusion and weakness, and from the nature of the rubbish with which her house is filled. In the last Report all this was forcibly pointed out, and I only repeat it to make the necessity for some change still more clear. An argument for continuing the present arrangement may be found in the fact, that it has already existed for a long series of years without any great calamity. If, in any case, such an argument should be listened to, in this particular case it should not, and for the reason that while the surroundings remain unaltered, she herself has undergone great change. She is now aged and frail, and increasingly imbecile, and beyond all doubt unable to provide for her own safety. There is another feature of her case which makes this still clearer. She is an inveterate wanderer, leaving her house often at nightfall, and going long distances. She was lately seen on the road at midnight, and not long ago she was found with her face severely cut and bruised, probably from a fall. I venture to predict, that if the present arrangement lasts, this woman will either be burned to death, or found dead on the roadside, or in her house some morning when it is visited. She labours under chronic mania, passing into dementia, and the mental disease is not small but great.”

“R. A. The inspector of poor declined to approach the house of this lunatic, on pretext that if seen by him he would lock the door.

“The reporter was directed to obtain access by proceeding behind the cottage, and taking the inmate by surprise. The door was found open, and the lunatic in a bare, squalid, smoked, damp house, containing a table on which were arranged a number of old books, a press, and two box-beds, the doors of which were closed. On entrance, lunatic was gazing at a copy of a New Testament, and was dark, dirty, and unshaven.”

“A. M’K., æt. 23. Is taken out by mother to walk, and then held by the arm; at all other times, except during the night, she is tied by a strong common rope, secured roughly round the waist to the foot of a bed.”

“A. R. Found in bed and groaning most piteously. Has been insane for eighteen years; malady attributed to the loss of money; first assumed the form of melancholia, but latterly it has passed into dementia. . . . Bed on floor in the corner of the kitchen, but nearly under hole in roof, serving as a vent. She is separated from the earth by a layer of ‘breckan, and a bundle of rags.”

"E. M., residing at M., has been insane for upwards of twenty years; and, during the greater part of this time, has been confined in a room in her brother's house. She was formerly occasionally violent, but she is now shut up, apparently to prevent her wandering." In April 1858 our attention was specially directed to this case by Sir John Heron Maxwell; and in May the patient was visited by one of the Commissioners, who reported that 'He found her in bed, free from all bodily restraint, but pale, apparently from long seclusion in a small and badly aired room in an off-shoot from the house, built for her detention, the floor of which was of stone and damp; the smell offensive and urinous, although this might partly proceed from temporary causes, and the door of which was so secured that the lunatic could not obtain egress. It would appear that, with rare exceptions, the lunatic has not been allowed to leave this apartment for three years, and that she has been secluded elsewhere for a longer period."

In order to show the length of time that often intervenes before persons are sent to the Asylums, I have taken the following from a table showing the number of Patients admitted into the Lunatic Asylums, Hospitals, and Licensed Houses, in England and Wales, during the year 1857, with the period of duration of existing attack at the time of admission:—

Under 1 Month.	1 to 3 Months.	3 to 6 Months.	6 to 12 Months.	1 to 3 Years.	3 to 6 Years.	6 Years and upwards.	Not stated.
2,209.	1,505.	825.	575.	633.	234.	444.	1,283.

On which the Commissioners make the following remarks:—

"This latter table enables us to see what are the results of early treatment in cases of Insanity. Of 100 Patients admitted in 1857, the duration of whose attacks at the time of admission did not exceed 1 month, 50.9 (or 509 in 1,000) were discharged recovered, 9.7 (or 97 in 1,000) were discharged relieved, 5.8 were discharged not improved, 17.8 (or 178 in 1,000) died during the three years, and 15.3 were remaining at the end of the three years. Of 100 Patients, the duration of whose attacks was one month and under three, 45.4 were discharged recovered, 19.5 died, and 16.5 were remaining at the end of 1859. At 3 and under 6 months the per centage of recoveries was 35.2, of deaths 23.0, and of remaining 22.5. At 1 and under 3 years 15.8 per cent. recovered, 26.1 died, and 34.3 were left under treatment. Of 100 Patients admitted, the period of duration of whose attacks was under 1 year, 44 recovered, 20 died, and 18 were remaining. At 1 and under 6 years, 14.5 per cent. recovered, 24.9 died, and 37.4 per cent. were remaining. At 6 years and upwards, 5.0 per cent. recovered, 17.3 per cent. died, and 63.3 per cent. were remaining under treatment at the end of the three years.

"From these results it would appear that the chances of recovery are much greater when Patients are placed under treatment in an early stage of the attack than they are when the disease has been allowed to remain unchecked for some time. The recoveries decrease with the increase of the period of duration of the attack at the time of coming under treatment, while the deaths increase as the period of duration of the attack rises to 1 and under 3 years, after which they decrease slightly in the next two periods. The proportion per cent. of Patients remaining under treatment at

the end of the three years increases progressively from 15 per cent. at the period of duration of under one month, to 63 per cent. at the period of duration of 6 years and upwards.

"It should be observed, at the same time, that of the total number of Patients admitted into the Asylums, Hospitals, &c., in 1,283 cases (or 16.6 per cent.) the duration of attack was not stated, and in 58 cases the cause of discharge was not stated."

I have been informed that many of those admitted as labouring under Insanity (one to three months) are re-admissions.

The effect of this unwise and pernicious system, pursued in England and Scotland, on the part of parochial authorities, of boarding out many Patients long before sending them to the Asylum, has been, as already shown, to crowd the Asylums with chronic cases to such a degree that numbers, who might be cured if taken in time, become incurable, so that not in a single instance that I know of can an English County Asylum (no matter how good the system pursued) be said to be in a fair position to show what superior skill and care can effect.

In May of the present year (1862) a return was made to the House of Commons of the number of Lunatics at present confined in the Lunatic Asylums of England and Wales, classified as Curables, Incurables, and Idiots, which forcibly illustrates my assertion. Each Asylum furnishes its own statement under the above heads; there is no calculation as to the entire results which I have been obliged to make myself, and cannot, therefore, vouch for its positive accuracy; I think, however, it will be found tolerably correct.

According to my calculation the entire number of Patients in the County Asylums at the above period, which is no more than a year later than the Commissioners' report, from which I have made other extracts, and will account, therefore, for any difference that may be found in my figures, there were 20,155 Patients in County Asylums, of these 16,234 were returned as Incurable, 1,137 as Idiots, and 2,784 as Curable. We find in round numbers that out of 20,000 Patients the astonishing number of 17,000, represented as Incurable, and scarcely 3,000 as Curable, even giving the latter the benefit of doubtful cases, so that hope of recovery can only be entertained for more than one-seventh of the entire number under treatment.

From the 42 Asylums I will select ten of the returns, which will show how extremely difficult it would be to form a just estimate of the merits of those Institutions, if the calculation were based on the per centage of recoveries on the entire number under treatment:

LINCOLN COUNTY LUNATIC ASYLUM.

Curables	27
Incurables	389
Idiots	11
Total	427

CORNWALL COUNTY ASYLUM.

Curables	34
Incurables	309
Total	343

MIDDLESEX COUNTY LUNATIC ASYLUM, COLNEY HATCH.

Curables	162
Incurables	1,673
Idiots	47
Total	1,882

MIDDLESEX LUNATIC ASYLUM, HANWELL.

Curables	67
Incurables	1,368
Total	1,435

HAMPSHIRE.

Curables	56
Incurables	416
Idiots	81
Total	553

KENT.

Curables (probable)	47
Incurables	590
Idiots	93
Total	730

BUCKS.

Curables	8
Incurables	234
Idiots	19
Total	261

NORTHUMBERLAND.

Curables	129
Incurables	58
Idiots	7
Total	194

CAMBRIDGESHIRE.

Curables	21
Incurables	212
Idiots	10
Total	243

OXFORD AND BERKS.

Curables	30
Incurables	381
Idiots	83
Total	494

The following statistics of the Irish Asylums I have compiled from the last Report of the Inspectors, for the two years, ending December 31st, 1861, in which they state—

“The insane classes of all denominations, placed directly under our control and inspection, amounted on the 31st December last to 8,055, and were thus distributed :—

	Lunatics.	Idiots.	Epileptics.	General Total.
In District Asylums.....	3934	138	316	4388
„ Poorhouses	668	1017	907	2592
„ Gaols	325	...	...	325
„ Private Asylums.....	475	28	12	515
„ Central Asylum	125	4	2	131
„ Lucan Spa Asylum (House of Industry Patients),	80	..	...	80
In Convict Prisons	10	...	...	10
Total	5617	1187	1237	8055

“ Besides the above, from returns we obtained at the close of 1860, from every police district in Ireland, and in which the particulars as regard name, age, residence, &c., were given, there appeared to be an aggregate of 8,991 human beings of all grades more or less mentally affected, of whom 1,651 were lunatics properly so called, 5,469 were imbeciles, and 1,871 affected with epilepsy. We need scarcely observe that these returns, from the mode through which they were obtained, although, as stated in our last Report, every care was taken in their compilation, can only be regarded as simply approximative.”

From this table it will be seen that the number of pauper patients (excluding the Criminal Asylum), and assuming those in gaols to belong to that class, amounted to 7,319, of which 2,592 were located in workhouses and 339 in gaols. On analyzing the return it will be found that the insane in workhouses are composed of 1,924 idiots and epileptics. In the remaining 668, described as lunatics, nearly half the few curable (and consequently eligible) cases for the Asylums are contained; as out of 287 persons returned as requiring curative treatment 128 are epileptic, 31 idiotic, and 128 lunatic.

Under the same heads 916 are represented as persons whose cases are of an incurable nature, but who require medical treatment or constant care and attendance, as not being able to perform the commonest offices for themselves; and 1389 as of persons incurable but harmless, and not unfit to remain in the workhouse, and mix generally with the inmates.

Some counties—such as Queen’s, Kerry, Waterford, Carlow, Sligo—do not appear to have a single curable case in the workhouses; and in others, as King’s, Kilkenny, Kildare, Fermanagh, Tyrone, Monaghan, Leitrim, there are not more than from 1 to 3 in the workhouses throughout the entire counties. And the gaols in those districts, with two exceptions, seem tolerably free from lunatics; so that these Asylums, and the great majority of the others, are infinitely better circumstanced than those in England to effect cures, by reason of obtaining the patients at a much earlier stage of the malady.

They also possess, generally speaking, a greater advantage in drafting off to the workhouses harmless incurable patients—a good many of those under that head in the latter establishments being persons either refused admission to Asylums as incurable, or discharged from that cause. Thus, as will be seen from the following table, there are by no means the same amount of chronic cases accumulated in the Irish Asylums; for, whilst I have shown the incurable are seven to one as compared to the curable in the English Asylums, they only amount to four to one in the Irish ones—thus giving the latter nearly double the advantage in effecting cures on the entire number in Asylums, besides, as I have already shown, being also much better circumstanced as regards recoveries on admission:—

State as to Probability of Recovery of Patients in District Asylums on 31st December, 1861.

Asylums.	Probably Curable.	Probably Incurable.	Total.
Armagh	25	119	144
Ballinasloe	48	285	333
Belfast	111	246	357
Carlow	96	108	204
Clonmel	25	115	140
Cork	227	252	479
Kilkenny	26	128	154
Killarney	31	166	197
Limerick	69	320	389
Londonderry	31	198	229
Maryborough	91	96	187
Mullingar	75	203	278
Omagh	75	226	301
Richmond	102	574	676
Sligo	37	148	185
Waterford	54	81	135
Total	1123	3265	4388

The following will enable something of a comparison between the similar table, relative to English Asylums:—

Table showing the duration of Disease previous to Admission in those Discharged Recovered, during the One Year ending 31st March, 1861, in Irish Asylums.

MONTHS.			YEARS.			Total Discharged Recovered.
Under 3.	3 to 6.	6 to 9.	Under 1.	1 to 2.	2 to 3.	
335	52	32	26	21	12	
YEARS.						Total Discharged Recovered.
3 to 4.	4 to 5.	5 to 6.	6 to 8.	8 to 10 and upwards.	Not specified.	
7	4	1	1	4	62	567

The above shows that more than three-fifths of the total number discharged were not three months suffering when they were placed under treatment.

In their report for 1859 the Inspectors made the following observations as to the comparison of recoveries:—

“In estimating, therefore, the success of professional treatment in Hospitals for the Insane, we cannot but regard the practice of making it appear solely dependent on the proportion of annual cures to annual admissions as likely to lead to misconceptions; the more so, as if an analysis be made of all the Inmates in Asylums, the number of Curables will scarcely form one-fourth. For example, eighty may be received into an establishment averaging 300 Inmates in the course of a year, at the expiration of which forty are returned as cured on admissions; hence, to the casual reader it would appear that of the whole, half were cured, when, possibly, there were scarcely thirty, thus leaving fifty of the eighty behind, the difference in the recoveries being made up from the 220 who had been resident therein from preceding years.

“On contrasting statistical returns from other countries with those of our own, whether recoveries be calculated by the per centage on admissions only, or on the daily average number under treatment, or on the total number in Hospital during the year, as indicative of the general system of treatment adopted in Irish Asylums, we can safely refer to results, the successful character of which is calculated to place these institutions in a foremost position.

“On admissions, the absolute cures in Irish Asylums during the last two years reached 48.71 per cent., as against 36.99 in Scotland, 38.49 in England. Independent of the recoveries in our Asylums, there were also discharged improved 13.26 per cent. of the admissions, representing under both heads 62 per cent. Of the daily average 16 per cent. recovered, and 4.20 improved; and, in like manner, on the total under treatment, 12.15 and 3.30 respectively.”

Acting, I presume, on the suggestions offered to him (as he had not then acquired personal knowledge on the subject), Sir Robert Peel, in the House of Commons, last August, not unreasonably, sought to establish the superiority of the Irish Asylums over the English, on the strength of the foregoing statistics. Several of the leading Irish journals adopted the same view, and the public generally appeared to assume that as the former appeared to be so much better than the latter there could be no reasonable cause of complaint. I have already, at pages 1 and 2, shewn that even assuming the Institutions in one country to be better than in the other, still it did not follow that what appeared the better might not be susceptible of improvement.

I am disposed to think, however, that if the whole subject were inquired into more closely it would be found that so far from the Irish Asylums having a claim to immunity from comment, on the ground of the greater number of recoveries, that the balance is in favour of England, taking into account the really workable materials in each country from which to effect cures. As already detailed, owing to the unwise system pursued by the English paro-

chial authorities, the Asylums have become so choked up with chronic cases that only 14 per cent., on the entire number in confinement, are curable, whilst on the other hand no out-door relief for the insane being permitted in Ireland, no inducement to keep them at home is thus held out; and, except in a few districts, where there is deficient accommodation, a comparatively small number of really curable cases are retained long in Gaols and Workhouses. Besides this, I believe a greater amount of harmless patients, when recovery appears hopeless, are transmitted to the Workhouse, than in England; the consequence is, that in Ireland the curable cases amount to 25 per cent. on the entire number. If, therefore, on the average number under treatment in England 14 per cent. are curable, and out of these 10 per cent. on the entire number are cured, there ought to be, on the same calculation, within a fraction of 18 per cent. of recoveries on the whole average number under treatment in Ireland, whilst there is, in reality, only 16. Continuing the calculation on the number amenable to recovery, it will be found that on the same principle the English Asylums would be on an equal footing with the Irish, if the cures reached a fraction under 9 per cent., whilst actually the recoveries are 10 per cent.—With regard to cures on admissions, if we bear in mind that “the facility of cures and the proportion of recoveries bear a direct ratio to the shortness of time that has elapsed from the origin of the complaint to the commencement of the treatment,” and could accurately calculate the state of curability of patients on their reception into the Asylums of both countries, I have no doubt it would be found that Ireland was so much better off, as regards the curability of the admissions, that the recoveries were really less than what they ought to be.

There is also another very important circumstance that should be taken into account, viz., whether, as a rule, the disease is more easy of cure in the natives of Ireland than those of England (supposing all things equal as to the time of coming under treatment)?

My own experience, derived from enquiries I made respecting Irish patients whom I found confined in many of the Asylums I visited in England, fully convinces me that, though usually more violent at the commencement, yet that they were amongst those who more speedily improved. I would not offer this opinion did I not find it fully confirmed by one of the highest authorities on insanity, Dr. Connolly, of Hanwell, who says, in his work on “The Construction and Government of Asylums,” page 152 :—

“The large number cured in the Irish Asylums may, in some measure, be accounted for by the peculiar character of their patients. The Irish patients in English Asylums usually recover rapidly, the form of disease being frequently pure excitement, which is soon allayed by quiet, temperance, and the orderly regulations of an Asylum.”

I have not made the foregoing calculations with a view of creating an impression that the Irish Asylums are inferior to the Eng-

lish. As I have before stated, I believe, with four or five exceptions in favour of the latter, they are equal to them in every respect—same grave fault as to moral treatment being common to both—except in the instances I will presently allude to. My chief object in analysing the statistics of recoveries is to show in the first place that before adopting them as a test of the efficacy of treatment, it is essential to be acquainted with the antecedent and subsequent history of the cases, so far as the duration of attack previous to being placed under treatment, and the length of time before a relapse occurs, if any ; and, in the next place, as the statistics of the Irish Asylums have been so often quoted, as it appeared to stifle all effort for their improvement, and throw ridicule on any one making the attempt, I feel it would be unjust to the cause for which I plead if I did not endeavour to remove one of the obstacles of its success, by showing that, when fairly examined, the chief argument of the “*laissez faire*” policy, as regards the Asylums, is not so strong as might be supposed. After going over an enormous mass of statistics relative to the institutions for the insane in almost every part of the world where they exist, I have come to the conclusion that in no instance is the sarcastic adage that “next to facts, figures are the least to be depended on” more applicable than to the statistics of Lunatic Asylums. Take, for example, some of the American Asylums, which claim, if I mistake not, over 80 per cent. of recoveries on admissions—a result, I admit, highly probable under a perfect system—but certainly not under such a one as described to me as being in operation in the establishments vaunting those results.

To come to instances nearer home, I could point to Asylums where the annual report shows a greater number of discharges under the heads of “cured” and “improved” than in the others ; and, yet, an examination of the books showed me a larger amount of relapses than in the others, there being actually in the house at the moment a higher per centage of cases, that had been from one to half a dozen times previously confined, than in the Asylums which claimed fewer cures, and I saw Patients raging mad who appeared as often as three times cured on the records, and had also gone to swell the statistics of recoveries in the Annual Blue Book Report, and possibly would do so as many times again, and be found in the end by some inquisitive visitor in their old quarters. Patients of this description are of infinitely more value for statistical purposes than those who on being admitted once make a permanent recovery, and do not again return, and for a very simple reason, the latter appear on the records as one admission and one cure ; but the former, though on each return (according to the time out), may be entered as relapses or re-admissions ; yet, at the option of the Physician, at every discharge, can be classed as cures, and until lately if they did not return within a certain time I believe were entered as new cases. Now I understand this practice is altered ; but at each discharge the Medical Of-

ficer may take credit for them as cures, quite as much as if they were altogether recent cases. No doubt many of them are for the time genuine recoveries, and I would not make any remark on the subject, but for local statistics having been used to prove me in error on an occasion when I expressed doubts as to the system which was pursued in a particular institution, being likely to produce the highest results. I am induced to give here (as a further proof of how necessary it is not to rely on bare figures when desirous of aiming at the real truth) the result of my examination, as to whether the claims to be considered as deserving of being placed in the foremost ranks of curative establishments was well founded.

Of one thing, however, we may be quite certain, that in the end those Asylums must produce the best results that are conducted the nearest in accordance with the best admitted principles for the treatment of Insanity. Particular circumstances may be unfavourable to recoveries, even where the greatest skill and care are employed, and Asylums much inferior in these respects may from adventitious causes, be able to make a greater show of recoveries.

Richmond, for instance, where there is insufficient accommodation for the Insane of the district (as would appear from the number in the Prisons and Workhouses) must labor under the disadvantage of getting a large proportion of Patients at an advanced period of their disease; the same may also be said of other places similarly circumstanced. Some of the new Asylums now in course of erection will also have the drawback of being obliged to accept for their first inmates a number who have been for extended periods in Gaols and Workhouses, as well also, no doubt, as many others long insane, but whose friends have been unwilling to consign them to the latter, but will avail of the Asylums when opened. Kerry, also, has the serious disadvantage of having a larger number of cases of persons afflicted with hereditary Insanity than any other county (usually the case in mountainous countries where intermarriages are frequent), 29 out of 195 being within the degree of second cousinship. Asylums so circumstanced may even, if nothing be wanting on the part of the local authorities to render them what they ought to be, still exhibit to the casual or uninformed visitor an apparently less flourishing return of recoveries than an institution less meritorious, but having better materials to work on. Nevertheless, if all circumstances be carefully weighed, I would not fear to assert (supposing medical care equal in both cases) that the Asylum does most which approaches the nearest in moral curative treatment the English Asylums, which I will now presently describe, supposing, of course, the medical treatment the same.

I will first take Leicester, as, after Bethelam, it was the earliest I saw, and I have besides visited it more frequently than the others.

There are 399 Patients. The Asylum is situated on a height overlooking the town, from the centre of which it is not more than half a

mile distant, a very good point taken in connection with the liberty allowed the inmates. On my first visit I missed my way, and walking through a perfectly open country, I found myself in the middle of the Asylum grounds, and in the midst of a number of the Patients who were quietly walking or amusing themselves. To my great astonishment I perceived that neither wall nor dyke separated the ground from the adjoining land; and if those whom I saw about were disposed there was really nothing to prevent them descending to the town, or wherever else they fancied, as there appeared not to be a greater number of attendants in charge of them than I have seen with an equal number working within the high walls of other Institutions, and I was equally surprised (as until then I had not had an opportunity of realizing to the full extent what really could be done under a good system) to hear that the number of escapes, and attempts at escape, were much less than from one of the most bastille looking of the Irish Asylums which I had seen some months before, having about the same number of Patients.

Within the building itself there was everything calculated to increase the favourable impression created by the novelty (for such to any one accustomed as I was to the prison system of Asylums) I had witnessed in all Asylums without walls. Everything appeared to be conducted on the same principle as at Bethlehem, and as much quietude and contentment seemed to prevail as could reasonably be expected amongst some hundreds of people, the chief feature of whose malady is usually irritability and restlessness.

One of the most remarkable differences that struck me between the Inmates and those of similar places in Ireland, was the little desire there appeared to get out. On each occasion of three visits I paid the Institution at intervals between of several months, I rarely found a Patient expressing a wish to be released; whereas, in nearly every Irish Asylum I have been in, as well also as several in England, numerous and earnest appeals have been addressed to me as I went along to assist in procuring liberty for the applicants. Some few Irish Patients whom I found both at Leicester and Derby, belonging to the labouring class, appeared to share the general feeling of contentment, and bore grateful testimony to the kindness of the Medical Officers, to whom they were quite as much objects of solicitude as the others under their humane charge. The reason of the different feeling with which the Patients regarded their detention, as compared with other Asylums, is very easily explained. They were made to feel as little like prisoners as was consistent with their safe keeping and proper control, and every means adopted besides to cheer, occupy and amuse them; there was not an hour of the day, whether within doors or in the open air, but there was something of an exciting character to divert their thoughts. Here there was no pretence of a system, which did not exist, of pointing out to a credulous visitor a bird, a geranium-pot, a few pennyworth of

prints, or a violin, and then asserting there were ample means to interest and amuse patients, whilst at the same time, for hours upon hours during the live long day, to my own knowledge, where such dust-throwing in the eyes of the public has been practised, and for the time successfully, the unfortunate have been left to pine in listless inactivity, both of mind and body, become a prey to their morbid fancies, or be driven into a state of dangerous and injurious irritability from the absence of occupation or other soothing influences.

The great merit of the Institutions with which I am dealing is the conscientious perseverance with which the system laid down is adhered to. There are no holiday displays, such as a ball, ostentatiously announced, or things of the same kind on particular occasions, and then the patients left to their own devices, perhaps, for months afterwards, except such as might choose to engage in farm labour, or needlework (often the very people who should be kept from such occupations); but in those two Asylums there was satisfactory evidence that there was always in operation the best admitted principles for the recovery of the insane, and for which the names of Dr. Birch and Dr. Hitchman deserve to be mentioned with all the honor that can attach to the enlightened humanity that has rendered the Institutions under their care worthy of being imitated.

Leicester has the same disadvantage as many other English Asylums, in having consigned to it a large number of chronic cases, and others, though curable, yet far advanced in mental disease. In April last, out of 399 patients, there were—Curables, 44; Incurables, 333; Idiots, 22. According to the Commissioners' Report, which makes calculations for periods of five years—the last being down to 1858—it appears in that year the daily average number under treatment was 326; on which there were 51 recovering, or 17 4-5th per cent.; whilst at Surrey it only reached 7 per cent.; at Colney Hatch, 7½ per cent., and in many other places (over which Leicester has no advantage but a better system) quite as low;—a pretty good proof of what judicious treatment can accomplish.

The recoveries on admissions I have not been able to ascertain in time, with sufficient accuracy to insert here; but in 1858 the admissions appear to be 96, and the recoveries 58. Out of the total number admitted to the Institution since its opening (according to the Twelfth Annual Report) was 2236; of these there were discharged cured, 994, being nearly 45 per cent.—twice as many as in some other Asylums. It must also be taken into account that this average includes a number of years, during which the Institution had not arrived at the satisfactory position, in point of treatment, at which it now stands; and though the Irish Asylums claim three per cent. more of cures, yet, if the facts as regard the curability of the patients, at the time of admission, be considered, the results accomplished at Leicester, I am positive, would be admitted by any

person conversant with the subject, to be far beyond the most successful of the former.

The Derby Asylum was opened in 1852, and then received 212 patients; of these 181 were incurable, 9 being congenital idiots; and of the collective number first admitted only 6 were cured down to 1860.

In many of the Reports Dr. Hitchman speaks of the serious disadvantage under which he labours on account of the long period persons are suffered by the local Poor-Law authorities to remain without curative treatment; thus rendering recovery difficult, and often hopeless. In 1859 he says:—

“These statements are the echo of former Reports; but the general character of the admissions during the past year has most painfully shown that they have not hitherto arrested attention, or produced conviction in the minds of members of Boards of Guardians, and of others whose duty it is to watch over the Lunatic Poor. Of the forty-four Male, and forty-four Female Patients, admitted during the year that has past, nineteen only of probably curable cases were admitted within a month of the onset of their disease—*i. e.*, there were nineteen only, who were received in their primary attack, and who were free from Epileptic or Paralytic complications. Of the remaining sixty-five, five have been idiotic from birth—two were blind from long-continued disease of the Brain—twenty-one were Epileptic, or Paralysed—nine had been insane for more than a year—and the remaining twenty-eight for periods nearly as great. To each and all of these the Asylum will prove an advantage and a comfort; many will improve in their mental and bodily condition; but unhappily more than eighty per cent. of the above number are placed beyond the probability of Cure.

“These sad facts prove that ‘line upon line, and precept upon precept,’ are yet required to convince individuals that it is their pecuniary interest, as well as their moral duty, to regard the poor Lunatic as a sick man requiring medical aid and the resources of a Hospital; and to convince them, that if he obtain these in the early stage of his Malady, he may be restored to his home and to usefulness again. Incurable Cases there will be, as in all Maladies; but these, instead of being as now under existing practices some seventy or eighty per cent., may be reduced to thirty per cent., and will most assuredly be reduced to this amount, or even to a smaller ratio, whenever the public shall take a correct view of the Malady and its requirements, and shall act upon that knowledge in a spirit becoming a Christian people.”

He again appeals against the evil practice in 1860:—

“The number of incurable Pauper Lunatics is increasing so largely that their proper disposal is becoming an embarrassing question. Asylums of large dimensions are being further enlarged, and additional Asylums are being built in almost every county. This evil will continue to progress until parsimonious Boards shall recognise the oft-repeated truth, that the surest economy in matters of Lunacy is to place the sufferer at once under appropriate treatment; and, when he is restored, to guard against his relapse by treating him generously during the first few weeks that he is called upon to grapple with the difficulties of life. It would be found that a

present sacrifice of a few shillings would be followed by the saving of many pounds, and that simple obedience to the Christian law of charity would be the wisest measure of parochial finance."

The fearful result of the system he remonstrates against is thus painfully shown in the official return of the present condition of the patients:—Curables, 22; Incurables (probable), 266; Idiots, 23.—Total, 311.

Before stating what has been done in effecting recoveries in the face of such tremendous difficulties, I will borrow a few extracts from the local reports, as well as those of the Commissioners of Lunacy, to show the means employed for the purpose:—

"The General Management of the Asylum has continued as heretofore. Mechanical restraint is unknown. Dances, Magic Lantern Exhibitions, Lectures, or Popular Readings, have been given every Thursday night during the winter months. On Saturday evenings throughout the year many of the patients assemble in the chapel for the practice of psalmody.

"The crowning party of the year took place on Christmas Eve. The leisure hours of several weeks were occupied agreeably in preparing decorations for the Entertainment Room. As on former years the room was decorated with much taste by patients, under the guidance of the Chief Attendant. The Attendants generally exerted themselves in a praiseworthy manner in the evening, both in the dance and in the music band, and 'The Party' passed off with much gratification, and was followed by salutary results. In the summer, long excursions into the surrounding country, visits to the Derby Arboretum, and other places of interest.—Cricket, foot ball, and similar games, and useful occupations are at all times resorted to. The workshops and the lawns supply recreation and employment during the day, and in the evening Bagatelle Tables, &c., and an Amateur Concert by the Attendants and Patients.

"The Superintendent Physician has great pleasure in stating he has been 'cordially aided by the Steward and Chief Attendants, and the entire work of the Institution has been carried on with harmony and good will and unity of purpose, and the result has been in accordance therewith.'

"The general principles of treatment have been such as have been described in former Reports. The well-being of the Patient has been steadily considered, both in his occupations and his amusements. It has been attempted to make him not only a more sane man, but a better man; for whatever adds to the moral strength of an individual serves as a barrier against the encroachments of disease. Idleness, slovenliness, and dirt are enemies alike to bodily and mental health; and a distaste for these enervating influences has been inculcated, not by railing against them, but by surrounding the Patient with their opposites—industry, order, and cleanliness. His room is rendered comfortable and cheering by warmth, flowers, and pictures (cheap in their original cost, but not destitute of beauty and design in execution), and other simple accessories; it has been found that a love of flowers, and of Nature, is more diffused, and is indeed a more instinctive feeling than many persons may suppose;—it is perhaps stronger in the minds of the English than in other nations, at all events it is obviously felt by many Patients, and its strength seems to grow with the moral elevation of the individual. The work of the day is followed by innocent amusements—such as Bagatelle, Draughts, and the like—while the Library affords the means of profit and pleasure to all who are capable of

reading. Those who are incapable of gaining information by reading themselves, listen with interest to others who read aloud for their benefit.

"In the summer months the Patients resort to cricket, ball, and such like amusements, while the more trust-worthy were also allowed, under the control of the Attendants, to take walking excursions into the surrounding country.

"REPORT, 1857.

"Moral treatment, all important as an auxiliary to medicine, will not, of itself, effect a large amount of cures; and medicine, unaided by moral agencies, is inefficient, delusive, and disappointing. The treatment which has been found most successful has been that in which, so to speak, moral and medical therapeutics have been combined, and which was based on the idea that mind and body act and re-act upon each other—that as mental anxiety can shock and derange the digestive function, so can disorders of the digestive function embarrass and disturb the operations of the mind.—The entire arrangements of the Asylum have been carried out upon the psychological principle, thus briefly illustrated. The Patients have had their minds occupied calmly by pleasing pursuits; by attendance upon Lectures and Readings from various authors, by Pictorial Exhibitions, by visits to the Arboretum Fetes, by pleasant walks into the country, by a judicious supply of newspapers and magazines, by chess, cards, bagatelle, and draughts. The most rigid attention has been paid to their bodily health, by providing them with warm clothing; by securing a warm agreeable, and equable temperature, and an efficient ventilation of their rooms; by scrupulous cleanliness of their persons, their dress, and their bedding; by a good diet, regularly supplied; by accurately adjusting repose and occupation, and by combating the earliest indications of bodily disorder.—Exercise has been secured to them by light labour in the garden and fields; by tending to the stock on the farm, and to various pet animals and birds of their own; by dances in the winter evenings; and by skittles, cricket, foot-ball, and other manly out-door pastimes in the summer. The Females are occupied in laundry and domestic work, and in making and repairing their own clothing, and the linen garments and stockings of the men; and during the summer months have been amused by long excursions into the surrounding country, by dances in the open air, and by gentle games suited to their sex. In the winter evenings they share in the lectures, the singing class, the music, the magic lantern exhibitions, and dances with the men. Believing the study of natural history in its various branches to be highly beneficial to the Insane, your Physician has had great pleasure in presenting to the Institution a small collection of stuffed animals and birds (crocodile, seal, auks, gulls, swan, wild ducks, widgeon, &c.), and a set of Professor Henslow's beautiful botanical diagrams. These, he trusts, may form the nucleus of a larger collection, and will form the materials for some interesting lectures during the ensuing year. The mind, like the body, becomes enfeebled if not exercised, and the study of natural history, by its constant appeals to the senses, interests without unduly stimulating the intellect, and furnishes, as to state, a mental tonic—much needed in cases predisposed to imbecility and dementia.

"The result of these general arrangements has been, that the recovered Patients have looked back upon the Asylum as a Hospital and a Home.—They speak kindly of it to their friends, and frequently make visits to the Nurses and Attendants under whose care they have been. When, as it sometimes happens, they experience a relapse of their malady, they have no dread (as was once the case with the Insane) of being retaken to an

being universally resented as an offence against the entire community. It can readily be understood how infusing such a spirit amongst the patients must contribute to their happiness and recovery. Another considerate and judicious arrangement is the absence of a uniform.

For males and females there are three or four descriptions of materials for clothing, which, though the same in quality and price, differ as to color. Any of these a patient can select, and if the wish can be gratified within reasonable bounds, they are at liberty to select the fashion as to its make. They are thus divested of the convict look which the "felon gray" gives them elsewhere; and, besides being calculated to relieve them of the idea of being prisoners, (one of the greatest causes of irritation, I believe, to a lunatic,) the little incident of ordering their own clothes and consulting their own taste as to cut and color, is a source of great pride and gratification, and acts as an incentive to good conduct, particularly with the women, who do not leave behind them the characteristics of their sex, and to whom the thoughts of what they should select and how they would trim their dresses, so as to make themselves appear to the best advantage, as well as criticizing the taste displayed by their neighbours, affords them almost sufficient occupation in itself.

The wisdom of this considerate indulgence particularly struck me when I recollected a poor lunatic whom I had seen a short time before in an Asylum with which I am acquainted. He had been for some time in America, and had acquired a democratic hatred of a uniform, more particularly, perhaps, as the one forced on him was probably associated, in his mind, with the idea of crime—which he was conscious of not having committed. He became so ungovernable that he had to be placed under restraint. I saw him when he was for some time in durance, giving every one about him a good deal of trouble; he assured me that "all should be serene" if he were given a blue coat with brass buttons, which I ventured to suggest (as an easy means of settling what appeared to be growing into a formidable dispute) should be given to him. I believe a compromise was subsequently effected, and that quiet was obtained by providing him with something approaching the coveted habiliment. The same man, for want of something else to do, and probably in reprisal, also, from some real or supposed grievance, executed a "fresco" of, I believe, of one of the officers of the Institution, on the wall of his cell, which, though not a very faithful portraiture, having been executed from memory (as the subject was by no means a consenting party to the transaction, and did not favour the artist with a sitting) still, under the difficulties as to materials, displayed considerable ingenuity. Now, had this patient been at Derby or Leicester, it is more than probable, having other distractions, he would not have been incurable, as regarded his fancy for a coat; and had he been so his moderate desire would, most likely, have been gratified, and

his taste for art been given a more useful and less personal turn,—as much of the funny painting that decorates the corridors and day-rooms is done by the patients—although, very properly, to quote the words of one of the Reports—

“No indoor employments have been resorted to, upon a large scale.—The Shoemakers’ and Tailors’ shops have been supplied chiefly with paid labour, as the health of the individuals belonging to these trades especially demanded that they should be much in the open air, and their minds relieved from the routine and irksomeness of their former occupations. All of those artisans who became convalescent, recognised the importance of this procedure, and ascribed their recovery mainly to it. One shoemaker stated that ‘he had been sitting so long with his head hanging over his work, that he felt motion and change necessary; he did not dislike work, but would get well before he worked at his trade again.’ He was quite right;—the mechanics of our large towns need the fresh invigorating air of the country—and the change and cheerfulness of out-door occupation for the recovery of their physical health, and through it the restoration of their mental powers.”

Though the grounds are not quite open, as at Leicester, yet the enclosing wall is so sunken that the country all round is easily seen, and escapes are very rare.

The results, calculated in the usual manner, show a marked improvement since the commencement. I must again, however, observe that I have seen no plan by which more than an approximate estimate can be obtained of recoveries, so many circumstances are always occurring which, in spite of excellent treatment, often make the best Institutions appear to disadvantage. Thus, in many of the older Establishments the natural tendency is for the per centage of cures to decline with the age of the Institution, owing to the influx and accumulation of chronic patients.

In 1854 the number of cures on admissions were $32\frac{1}{2}$ per cent., and increased gradually until 1858. The Report states—

The general results of the year were as follows:—

Patients admitted	81
„ Discharged recovered	41
„ „ Improved	12
„ „ Unimproved	7
„ Died	31
„ Remaining in the Asylum, Dec. 31	261
Per centage of recoveries upon admissions	50
Deaths upon the entire number under Treatment	8

The cures upon the admissions have been 50 per cent., which, as embracing all classes of Patients, may be considered satisfactory.

This is the highest that appears to have been attained by the Institution, except on selected cases, and, as compared with the greater number of other English County Asylums, is far in excess of the usual number, proving incontestibly the beneficial results of the treatment.

As I have frequently heard it urged, as an excuse for not putting the Irish Asylums in as good a state of efficiency as those I have held up as examples in England, that great additional cost would be entailed, I will give some examples of the cost of maintenance of patients in both countries, when I think, taking the higher rate of wages and cost of provisions in England, as well as the inferior dietary given in some of the Irish Asylums, that it will be seen the cost, comparatively, is quite as low in England, and in some instances even lower, than in Ireland. For the purpose of comparison I will take the Asylums that more nearly approach each other in point of numbers.

In the Asylum for the North and East Riding of Yorkshire, deserving, I believe, in every respect to be classed amongst the best in England, as regards treatment and results—though having a larger number of incurable cases, and obliged to admit many of the same character—the recoveries on admission amount to $44\frac{1}{2}$ per cent., and on the entire number 13 ;—a very creditable amount, considering many adverse circumstances it has to contend with. It contains about 500 patients :—

DIETARY SCALE.

	Breakfast.	Dinner.	Supper.
1 day ...	Gruel, thickened with oatmeal, $1\frac{1}{2}$ pint, with 6 oz. of bread.	Pease soup, $1\frac{1}{2}$ pint, with 6 oz. of bread.	6 oz. of bread with butter and tea.
3 days		Cooked meat, free from bone, 5 oz.; bread, 6 oz. for males and 4 oz. for females, with vegetables, and $\frac{1}{2}$ pint of beer.	
3 days		Meat pie, with vegetables, and $\frac{1}{2}$ pint of beer. Irish stew, $1\frac{1}{2}$ pint, with 4 oz. of bread.	

On calculating the amount of meat I find each person gets about 27 ounces, cooked, and free from bone, per week.

The proportion of keepers is about 1 to every 13 patients.

SUMMARY OF COST PER HEAD PER WEEK:

Salaries and Wages	...	...	...	...	1s. 8 $\frac{1}{4}$ d.
Provisions	...	...	...	...	3s. 3d.
Wine and Spirits	...	...	...	...	0s. 2d.
Necessaries	...	...	...	...	0s. 8 $\frac{1}{4}$ d.
Surgery and Dispensary	...	...	...	...	0s. 0 $\frac{1}{4}$ d.
Clothing...	...	...	...	...	0s. 8 $\frac{3}{4}$ d.
Furniture and Bedding...	...	...	...	...	0s. 5d.
Garden and Farm	...	...	...	...	0s. 8 $\frac{1}{2}$ d.
Miscellaneous	...	...	...	...	0s. 2d.
					<hr/> 7s. 10d.
Less from miscellaneous receipts	...	...	...	...	0s. 5 $\frac{3}{4}$ d.
					<hr/> Actual cost 7s. 4 $\frac{1}{4}$ d.
					Or £19 5s. 6d. per Annum.

The Richmond Asylum, containing 652 patients, allows to each patient for breakfast, 1 quart of stirabout and 1 pint of milk.

Dinner— $\frac{1}{2}$ lb. of meat (it is not stated whether cooked or free from bone), 1 pint of soup, and 10 oz. of bread.

Supper is mentioned under the head of "Extras"—1 pint of cocoa and 8 oz. of bread—so that I am uncertain whether it is included in the usual diet. Cost of each patient, £25 19s. 7d. per annum, or 10s. per week.

This high rate is, however, accounted for by the larger number of officers required, owing to a portion of the Institution being separated from the rest.

At Derby the care and maintenance of patients costs 9s. 5 $\frac{1}{4}$ d. a week per head, or about £24 10s. per annum.

BREAKFAST.—6 oz. bread, 1 pint milk porridge.

DINNER.— $\frac{1}{2}$ pint beer, 6 oz. bread; and for four days, 7 oz. uncooked meat; one week day, 1 pint good soup; one day, 14 oz. pie or pudding; one day, 12 oz. stew; besides, 48 oz. vegetables during the week.

SUPPER.— $\frac{1}{2}$ pint beer, 6 oz. bread, 2 oz. cheese.

Workers get 1 pint of beer extra during the day.

The female dietary of the usual proportion less than the above.

Belfast, containing about 80 patients more, has the following dietary:—

BREAKFAST.—One quart stirabout (made with 8 oz. fine or 7 oz. coarse meal) and three-fourths of a pint mixed milk.

DINNER.—One half-pound loaf bread (or 3 lbs. potatoes), 6 oz. solid meat, and one pint soup—three days a week. One half-pound loaf bread (or 3 lbs. potatoes) and one quart soup—three days a week. Three-fourths of a pound loaf bread (or 3 $\frac{1}{2}$ lbs. potatoes) and one pint mixed milk—one day a week.

SUPPER.—One half-pound loaf bread and three-fourths of a pint of new milk—Summer six months. One quart stirabout and three-fourths of a pint of new milk—Winter six months.

Cost of patients (1861), £18 16s. 2 $\frac{1}{4}$ d., or 7s. 3d. per week.

I have selected those Asylums in England where the best system is in operation, for the purpose of showing that, independent altogether of the large saving effected for the ratepayers on account of the number of cures, in some instances being 50 per cent. over other Asylums, where the cost is the same but the system inferior; and, if we take into account the much more generous dietary given to patients in England, particularly as regards meat, and the higher price of provisions, especially beef and mutton, (which I found, on comparing contract prices, was, as a rule, fully one-half more,) and also the more liberal rate of salaries to keepers and servants, generally double that in Ireland, it will be at once seen that, if we take an English County Asylum, where the moral curative treatment is as good as I have described in the institutions I selected for illustration, and compare it with one inferior in that respect in Ireland, it will be found that the difference of expense arises altogether from the higher rate of wages and provisions in the former, and that the cost between a good system and a bad one is absolutely nothing in

point of present expenditure, whilst the former, by augmenting recoveries, tends very considerably to the diminution of taxation.

Nothing appears to me more simple than the means that might be adopted to render the Irish Asylums, within a few years, all that could reasonably be looked for. It really only requires, on the part of the executive Government, a disposition to render them what they ought to be, as well as a firm determination that the principles decided on as those best calculated to effect that object should be resolutely carried out. In reply to me, Sir Robert Peel stated, in the House of Commons—

“Happily, in Ireland as well as elsewhere, the time is past when lunatics were treated like criminals; but I readily admit, that in addition to kindly treatment, it is highly desirable that the monotony and desolation of mind endured by patients in Lunatic Asylums should be relieved by occupation and amusement. I do not think that the recommendations contained in the Report of the Commission of Inquiry, to which the Hon. Member for Waterford has adverted, which sat in 1855, have been sufficiently carried out. The Commissioners urged the necessity and advantage of introducing a system of recreation and amusement into Lunatic Asylums, but the Hon. Member must know that the remedy for the evils which he has pointed out is a matter not within the province of Government, but depends upon the local boards. The District Asylums are governed by boards, which are sustained by local rates, and although the law gives the Lord Lieutenant considerable powers, yet it is obvious that it would not be desirable he should exercise them, except in extreme cases. The Hon. Member says the monotony of Asylums should be relieved by books, music, &c., &c. No doubt such means of recreation and amusement would be very valuable, but their introduction depends on the boards of directors in each Asylum, and if the Lord Lieutenant were to exercise the powers conferred on him by law, I am afraid such exercise would be regarded by the local boards as an unwarrantable interference with the rights and authority of the cess-payers.”

In the foregoing remarks Sir Robert fully bears out all I have stated, as to the absence of sufficient recreation and occupation for the patients, and admits that the recommendations of the Royal Commission were not carried out; and speaking as he did, four years after that Commission had made their report, it does not appear creditable to an administration to be forced to admit before Parliament that they had not done their duty in so important a matter. The excuse also urged through the Chief Secretary, and which is the one frequently used, “that the remedy lay with the local boards, with whom it would not be judicious for the Lord Lieutenant to interfere,” is not a valid one. The Lord Lieutenant exercises all the patronage in connection with the appointment of the medical officers of the Asylums, and is therefore responsible for their competency, and the proper discharge of their duties. With him alone rests the power of retaining or dismissing them, and these gentlemen regard themselves as officers of the Government, and not of the local boards—at least in every instance where I have touched on the subject with any of them, they always so expressed themselves. I consider that it forms

one of the most important portions of the duties of the inspectors to see that a proper system is carried out in each Asylum; and it is manifestly their duty also, if they find such is not done, either owing to the incapacity or neglect of the responsible medical officer, to represent the same to the Executive, who are bound by every obligation to apply the obvious remedy, which rests alone in their hands.

To do this does not require the exercise, on the part of the Lord Lieutenant, of powers likely to be received with dissatisfaction by the local boards, or regarded by them "as an unwarrantable interference with the rights and authority of the ratepayers." On the contrary, I have no doubt it would be, as it certainly ought to be, regarded by them with satisfaction. Local committees cannot be supposed to be conversant with the treatment of insanity, and the very fact of the Government reserving the appointment and control of those to whom this duty is confided, shows clearly that it reserved the right (and, of course, with it the responsibility), of seeing the curative treatment, properly carried out. If, therefore, the inspectors and Government would do their part earnestly, the defects pointed out by the Royal Commission, and fully admitted by the Government, would not exist much longer, and things would be set right, without coming into the slightest collision with local authority. I believe within a year hence the greater number of the Irish Asylums might be so far improved as to be fit to take their place in every respect beside those I have adverted to in England, not only without entailing additional cost, but effecting a very considerable saving on account of the diminution of expenditure from the greater number of recoveries, and also the relieving of the poor rates from the burden of supporting the families of many insane persons depending on them, who, under a better system, would be more speedily restored to reason. As to directors of Asylums objecting to the outlay of the few pounds, in the first instance, that might be necessary to procure the trifling matters required to enable a physician to carry out moral curative treatment properly, I do not think there is a board in Ireland, on the matter being fairly represented to them, would hesitate for a moment to grant whatever might be necessary, and should any board be found so inhuman and so impolitic as to act otherwise, would any reasonable person hesitate to say that a Lord Lieutenant would not only be justified, but absolutely bound to exercise the powers vested in him to compel such a directory to supply what would be necessary for the restoration of the mental health of the patients, quite as much as he would insist on medicines and other things necessary for the bodily health being supplied, in case of a like refusal on the part of a board to procure them? Besides, if it is thought expedient to leave such matters to the discretion of local boards, means ought at least be taken to put every member in possession of a few simple general principles that ought to guide the moral treatment of insanity. If this were done, every man of common sense would easily judge whether they were in operation in the Asylum of which he had a share

in the management. By this I by no means intend that every governor should be transformed into a lunatic doctor (as, no doubt, many will endeavour to give such an interpretation to my suggestion), but merely to give him such information as would afford him knowledge enough on a subject of which, for the efficient discharge of his duties, he should at least know sufficient to insure his co-operation in carrying out suggestions of a beneficial character, as well also as enabling him to judge whether the patients were treated in accordance with the best admitted principles. One hour's labour in drawing up a few simple heads containing such principles, by a competent person, and the expenditure of not more than five pounds altogether for printing and conveying a copy to each governor, would be all that would be requisite for this purpose.

How often Governors of various Asylums, to whom I have pointed out the defects in the institutions under their charge in point of moral treatment, have said to me—All you say appears true, but we never heard of it, and it never struck us before; we thought it was the duty of the inspectors and local medical officers to look after such matters, and therefore, hearing no complaint, supposed everything was right, and thought our duty only consisted in looking after the contracts, examining the accounts, and seeing that the house was clean and orderly.

In fact, so prevalent is the opinion on the part of Boards of Governors of Irish Asylums that they are nothing more than a mere finance committee, that during the present Session of Parliament, a Member, who was about bringing forward some complaint against the Government, relative to the Asylum of which he was Governor, on my stating to him that I thought some blame also attached to himself and the other members of the Board for the deplorable state I saw his Asylum in a few weeks before, as far as regarded sufficient occupation and recreation for the inmates, declared that he thought that seeing after that part of the matter was the province of the inspectors, and hearing no complaint on the point from them, took for granted all was right. Now, when a highly intelligent and well-intentioned gentleman, as this was, entertained this opinion, it shows how local boards depend altogether on the Executive as to a right course of treatment being carried out, which, I regret to say, is not done satisfactorily without now stopping to inquire on whose shoulders the blame should be properly laid.

The question, however, that we should now apply ourselves to is, to consider how to remedy these defects; and for this purpose, taking all circumstances into consideration, the first thing, in my opinion, that should be done would be to render some Asylum as much a model one as possible, so that the medical officers of the others could be referred to it as having in operation a system worthy of being imitated, and also where members of the boards of management would have an opportunity of seeing whether the plan pursued

in their institutions, as regards moral treatment, was in accordance with that in operation in the one referred to.

A good deal of difficulty would arise as to the selection of an Asylum for this purpose, as the local board might object to the outlay that might be necessary for the carrying out of the plan; and difficulties might occur in obliging the medical officers to co-operate. The most suitable Asylum for the purpose, in my opinion, would be the one for criminal lunatics at Dundrum, as, besides being supported out of the Consolidated Fund, it is placed directly under Government control, and therefore the Executive would be altogether untrammelled in their operations, and where, as I before stated, the inspectors would have an opportunity of practically illustrating their ideas as to the best medical and moral curative treatment. As it will probably be urged that an Asylum devoted to criminals is not the best to select for such a purpose, I will offer a few remarks on the objections I anticipate may be advanced; and I will at once admit that if I had a choice I would far prefer selecting some other Asylum, but, owing to the difficulties I have just stated, none of them would afford the same facilities for the purpose; and, besides, as Dundrum stands quite as much in need of amendment as any other in this particular I complain of, Government are bound, independent of every other consideration, to render the Institution immediately under their own control what it ought to be, and the senseless objection sometimes urged against placing a criminal lunatic on the same footing with other insane people is a prejudice now happily passing away.

If aberration of mind was not deemed a sufficient reason for moral irresponsibility, and satisfactory proof of derangement at the time of committing an offence considered enough to exculpate the perpetrator from the final consequences of the crime, it is to be supposed he would be dealt with like other offenders, and not sent to an asylum; and as such institutions must be regarded as curative hospitals, and not mere prisons, those entrusted with their administration, no matter what may be the after disposal of the patient, should do all in their power to promote his restoration to reason, and no more would those responsible for his care and treatment be justified in withholding anything calculated to alleviate his mental sufferings, or promote his recovery, than would the surgeon of a convict prison be justified in relaxing any exertion of his skill for the recovery of a prisoner from any bodily ailment, on the ground that he had committed some grievous crime.

Most unfortunately and unjustly, however, there is yet a strong prejudice in this kingdom against regarding and treating the criminal lunatic in the same way as other insane persons; and I have myself witnessed how the humane head of Bethlehem Hospital was, though most unwillingly, compelled to act on it to some extent, until his eloquent and repeated remonstrances against the system he had to carry out had the effect of his obtaining the sanction of the Secretary of

State to pursue a more rational mode of treatment towards the criminal lunatics, and served also to hasten the erection of a distinct institution for them.

Another great advantage that would, I think, follow from making Dundrum a model Asylum would be, the training of properly instructed keepers for the country Asylums, for which there is a very great want, and also enabling to be carried out one of the most important recommendations of the Royal Commission, regarding the rendering Asylums available for the purpose of conferring a knowledge of the nature and treatment of insanity on persons proposing to take charge of Asylums, and who, generally speaking, most improperly, now obtain their appointments without being required to show that they possess any special knowledge whatever of the disease which they undertake to treat.

The Commissioners on this point make the following judicious remarks :—

“ This is to be regretted ; for if, as is well known, a superior knowledge of the ordinary maladies of the human frame is best acquired by the medical student who is resident in an hospital, and thus become practically conversant with diseases, it will be admitted to be equally true that similar residence in a Lunatic Asylum will be the surest means of imparting a knowledge of the many phases of lunacy, and of the physical diseases with which they may be connected or complicated.

“ It is also to be remembered that of all departments of medical science the treatment of insanity is one in which the most important changes and improvements are at present in progress, both in regard to the cure of the disease, and the alleviations which may be afforded, and more especially in reference to the introduction of the non-restraint system, in place of the coercion and cruelties to which insane patients had been formerly subjected. We have to express our regret that even still, in many instances which came before us, the very nature of this system has not appeared to be understood, and that it has been erroneously supposed to consist of a continued struggle of keepers with lunatics, and this error appears to have led frequently to the expression of opinions in favour of the continuance of the employment of mechanical restraint.

“ We feel confident that if the Lunatic Asylums of Ireland were made places of instruction, medical science would be improved and humanity benefited, and that the benefit would not be limited to Ireland, but that the blessing of a humane and enlightened treatment of the insane would be extended through other countries. In 1840, Dr. Davey learned at Hanwell the non-restraint system, and in 1844 he introduced it with singular success into Ceylon.

“ We cannot doubt that, if proper exertion were made, students in medicine, or graduates who had just completed their course, would seek for appointments as residents in Asylums, as the knowledge thus acquired, and the certificates they would obtain of such residence would be esteemed recommendations in many positions in which they might afterwards be placed. We would recommend that, in the first instance, the experiment of such appointments should be made in the Asylums of Dublin (St. Patrick's and the Richmond), of Cork, and of Belfast, in which towns there are large

medical schools; that public notice should be given of the intention of making such appointments, and of the qualifications necessary, which might be that all applicants should be graduates in medicine or surgery, or medical students of at least three years standing, and one year's attendance on a recognised hospital, and with certificates of good moral character, and of attentive professional habits.

“Such resident pupils might be appointed by the Board of Governors, on the recommendation of the resident physician, and should be subject to his directions. Their duties would consist in keeping notes of the cases admitted, and their treatment, in seeing to the due administration of medicines, baths, &c., and in a general care of the inmates and patients in the intervals of the visits of the resident or visiting physician; in short, in discharging towards the inmates of the Asylum such duties as are now performed by resident pupils towards the sick in general hospitals. We would propose that the term of residence should be for six months, or, perhaps, it might be advisable to extend it to a longer period; and that, on the expiration of such residence, a certificate should be given by the resident physician, or Board of Governors, of the manner in which the duties of the appointment had been fulfilled.”

As hitherto the Resident Medical Officers of Asylums had in strict accordance with the Government regulations little better functions to discharge than those of House Stewards, having, when the visiting Physician chose to exercise the powers conferred on him, really no right to interfere in the medical or moral treatment of the patients beyond carrying out his instructions, professional capacity appears to have been matter of very secondary importance now. However, when by the recent Privy Council Rules he is to be intrusted with the moral and general medical treatment of the inmates the case becomes very different, and for the proper discharge of his functions he should possess qualifications hitherto not by any means so requisite. Unfortunately for those most seriously concerned, I fear appointments have been made in some instances of persons who though perhaps able to fulfil the duties which devolved on them under the previous system will be ill adapted for those now entrusted to them. To remedy this must prove, I admit, a task of extreme delicacy and difficulty, and I will only remark that facilitating their retirement on liberal terms would be a wise economy on the part of local boards where the appointment of competent persons in their stead would be guaranteed. Regarding future appointments to those now important offices, a very serious duty devolves on the Government, who having the matter altogether in their own hands will incur a deep responsibility to God and Man if they suffer any other consideration than the fitness of those whom they appoint to influence their selection, involving as it probably will, in many instances, the fate of the poor helpless afflicted beings whose restoration to the blessing of reason or continuance in mental darkness must be much influenced by the degree of skill possessed by those to whom they may be entrusted.

For the future, therefore, no candidate for the position of medical resident officer should be eligible for appointment until the Inspectors have reported favourably on his fitness, the mode of ascertaining which could be hereafter determined, whether by examination or satisfactory certificates of having attended the practice at some Asylum for the treatment of Insanity. If the Inspectors are to be held at all responsible for the satisfactory working of the Asylums, they should at least have a voice as to the selection of the medical officers, as to the visiting physician (an office which I trust will never be discontinued—being calculated to exercise a most salutary supervision). Nothing more can be expected than a selection from the best to be obtained in the locality; and as the exercise of professional skill will be expected now from the resident physicians, I trust their remuneration will be raised to a scale commensurate with the important duties they are called on to perform, and will render their positions objects of competition to men of capacity and acquirements. Poor though the income usually is that can be gained, by even able medical men, in Ireland, still the salaries offered in the Asylums are below what a gentleman, really possessed of the necessary qualifications, would be disposed to accept.

As an incentive to exertion, as vacancies occur in the larger Asylums (where, of course, the remuneration would be higher), they should be given as promotion to meritorious officers, whilst reduction of pay or removal to less remunerative positions should be inflicted as a penalty for matters not calling for absolute dismissal. Another most important improvement, in my opinion, would be dividing Ireland into two districts, and apportioning one to each of the inspectors, who would thus have a distinct responsibility, which would serve as a stimulus to render the Asylums under their respective charges as perfect as possible. Experience has fully proved that a divided credit never acts as so great an incentive as when the result of one's own exertions is likely to appear; and under each of those gentlemen I would place a sub-inspector, to be selected, if possible, from some of the present medical officers (from whom, as I have already said, all future promotions, when fairly practicable, should be made), as it is quite impossible that the work of inspection can be properly performed (more particularly as new Asylums are about to be established) in the few and rapid visits which their heavy office duties permit the inspectors to make.

Much good would also result from more judicious selections being made in the choice of matrons. The remuneration for this office is tolerably fair, at least quite sufficient to secure a greater amount of competency than appears to have been obtained in some instances which have come under my notice. Like all the other positions connected with the Asylums in the gift of the Government, the can-

didate possessing the greatest amount of parliamentary influence is the most likely to be selected; and hence many persons have obtained the appointments who, considering themselves above them, are consequently inclined to regard the performance of some of the duties as derogatory, and simply confine themselves to the routine of passing through the wards at certain times, and other things prescribed by the Privy Council Rules; but are not disposed to lend hearty co-operation in effectually carrying out a good system of moral treatment, which, after all, does not consist in exacting the greatest amount of stitching that can be effected, by pressing the patients disposed for such work to an extent frequently most prejudicial to their recovery—the matron deriving credit for the saving she has effected to the Institution by the number of shirts, petticoats, dresses, aprons, stockings, &c., &c., made, although, at the same time, it would often be a more economical policy for the Asylum, independent of its humanity, if she could show that the same time that these things occupied in being manufactured was employed by those of her patients, fit for such indulgence, on short excursions in country walks, about the grounds, or in-door amusements.

Although it is most desirable to have the matron independent to some extent of the medical resident, yet, for the carrying out of a proper system, it is absolutely essential that she should sedulously second his plans in her department.

That there are several most competent and willing to do this at present in Asylums I am well assured, but in other instances I am equally certain there is much room for improvement; and hope, whenever the Government resolve to set earnestly about rendering the Asylums what they ought to be, that, amongst the other offices to which applying the rule of making appointments, on the principle of the suitability of the person for the office, instead of the suitability of the office for the person, that the situation of matron will not be made an exception.

I have already adverted to the desirability of endeavouring to have properly trained keepers available as required, and pointed out how it might be effected. The first essential, however, would be to render the situation one worth looking for by persons likely to prove valuable in that capacity, as well as to induce them to remain. If this were done, I have no doubt but many eligible persons of both sexes would be glad to pass a short probation at Dundrum, at their own expense, if they were sure of appointments as vacancies occurred in the country. It would hardly be too much either to expect Government to maintain a few extra keepers, from whom District Asylums could be supplied. Every good authority on the subject of the treatment of insanity combines in impressing the absolute necessity of efficient attendants for the proper protection, control, and recovery of the patients, as through them, generally speaking, the physician applies his remedial means, and on them he must mainly depend for his plans being carried out.

Dr. Connolly, of Hanwell, who, in common with other eminent members of the profession, has devoted much attention to the subject, attaches the highest importance to the description of attendants employed. From a chapter on the subject, in one of his works, I extract the following:—

“To compel the physician to treat his patients with the aid of attendants in whom he can have very little confidence, and for whose fidelity, and even for whose kindness he has no security, is as injudicious as it would be to oblige him to employ drugs of an inferior quality, selected by persons unacquainted with the articles of the *materia medica* of all the physician’s remedial means. They are the most continually in action; all that cannot be done by his personal exertion depends on them. The character of particular patients, and of all the patients in a ward, takes its colour from the character of the attendants placed in it. On their being proper or improper instruments—well or ill trained, well or ill disciplined, well or ill cared for—it depends whether many of his patients shall be cured or not cured—whether some shall live or die—whether frightful accidents, an increased mortality, incalculable uneasiness and suffering, and occasional suicides, shall take place or not.”

That the attendants in the Irish Asylums are kind and well intentioned towards the patients, with very rare exceptions, I am sure; but, creditable as this is, there is something more required for the proper fulfilment of the “important and delicate task of regulating the conduct of persons of unsound mind, of controlling excitement, restraining waywardness, or removing mental depression;” and, unfortunately, in Ireland the selection is generally made with a false idea of economy, from persons who are often ill qualified by intelligence, education, or previous occupation. With a view to save expense, I have frequently seen men worn out in other services selected—such as pensioned soldiers or superannuated policemen—who, though well qualified, from habits of discipline, to enforce obedience, yet, on that very account, are often the worst agents to employ where moral force or gentle persuasion are deemed more judicious. From their age too, and settled habits, it is often found impossible to train them into ways different to what they have been accustomed.

Ordinary labourers also, and other persons who only remain until something better offers, constitute the general run of male keepers; the female attendants are pretty much the same description, the rate of wages being quite too low in most cases to induce a better class of persons to offer. In England, in the best managed Asylums, it is quite different—good pay securing efficient service, and proving in the end a real saving, as fewer are required, besides the extent to which they contribute towards the patients’ recovery. As it has been stated that a largely increased number of attendants would be required to carry out such a system as I described in the English Asylums, the particulars I give below will show that there are really less than in many of the Irish Asylums.*

*At the Asylum for the North and East Riding of Yorkshire there is 1 keeper

The question of an improved dietary with regard to some Asylums, is one well worthy of attention, viewing it even in an economic point.

In England the quantity of food given sometimes amounts to 321 ounces of solid and 28 pints fluid food per week. At Hanwell it consists of 247½ ounces solid and 15 pints fluid; and though less in other Asylums, still, with the exception of Richmond, the scale of dietary in most of the English Asylums is much higher than in Ireland. No doubt the poorer food the people are obliged to subsist on in the latter country affords reason for giving them less than the patients in the former institutions; but this feeling leads to the allowance being cut down in some places far below what it ought to be—in certain instances no meat whatever being allowed; and where the strength of the soup is not stated, I fear there is nothing to boast of, some that I tasted in two or three Asylums appearing rather meagre.

Supposing the inmates of Asylums to be perfectly sane, yet, like other prisoners, from the monotonous life they lead, they require more food than persons at large; but when, as is frequently the case, the mental disease arises from debility, and, as Dr. Connolly states, "in certain classes the frequent result of half starvation going on for years or for generations," the restoration of the mind depends on the bodily health being brought up to its proper tone by generous diet; the greater wear and tear of body generally attendant on the diseased mind furnishes another argument in favour of the diet being better than what would be necessary. In every instance where a good regimen has been substituted for an inferior one, cures have largely increased and mortality decreased.

At Bicetre, when better food was given, the deaths decreased from 57 out of 110 admissions, to one-eighth.

to 13 patients. At Lancaster, an admirably managed institution, where the cures amount to 50 on admissions, and the cost only 7s. 3d. per head, to 14 patients there is 1 keeper. At Gloucester, one of the best in England, 489 patients, 1 keeper to 14 patients; Leicester, with no surrounding wall, 1 to 15. Of Derby I am not quite positive, but I believe the proportion is about the same.

According to an official return of the number of keepers in the Irish Asylums for 1861, Richmond appears to have had 88 keepers and servants, although only 63 seem to come strictly under the former head, still the tailor, shoemaker, and at least one of the female servants may be fairly considered as keepers, making altogether 66, which, on 657 patients, would amount to 1 keeper to 10; Belfast, 1 to 10; Clonmel, 1 to 9; Ballinasloe, ditto; Cork, 1 to 10; Limerick, 1 to 9. Some of the Asylums style what really are keepers by so many other names, that it is extremely difficult to ascertain the true number. Thus, Omagh has the astonishing number of 10 housemaids, and Limerick 4 assistant laundresses, besides 3 head laundresses, and 9 women entitled ward women, in addition to the 16 nurses. However, after giving a liberal allowance of servants to each of these Asylums, I calculate the number of keepers to be 1 to 8 or 9 patients. Waterford, 121 patients at the time of the return, had 16 keepers, which would give 1 keeper to 7½ patients. Supposing the patients, however, to amount to 136 (as I believe they are at present), and no augmentation of keepers, the proportion would be nearly 1 to 8½.

Dr. Thurnam has placed the matter beyond controversy by the Tables he published in his work on the statistics of insanity, exhibiting the diet and proportions of recoveries and of mortality in seven County Asylums in England ; he divided them into two groups ; in the first, the diet consisted of 225 ounces of solid food per week, exclusive of vegetables ; in the second group, of 150½ ounces. The recoveries in the first were 43 per cent., and the mortality 9 per cent. ; in the second, 35 per cent., and deaths 14 per cent.

Government should (as in the workhouses) determine on a minimum standard, below which local boards should not be allowed to go.

The disposal of a certain portion of the incurable cases, with a view of freeing Gaols and Workhouses of such of their insane inmates as are susceptible of recovery, as well also as rendering the Asylums free to receive all cases eligible for admission at as early a stage as possible, becomes a matter deserving of serious consideration. In the Lunatic Law (Amendment) Bill, which lately passed the House of Commons, a clause was introduced by Mr. Henley, by which it was enacted that "it shall be lawful for the visitors of any Asylum and the guardians of any Union, within the district for which the Asylum has been provided, if they shall see fit, to make arrangements, subject to the approval of the Lunatic Commissioners and the President of the Poor Law Board, for the reception and care of a limited number of chronic lunatics in the workhouse of the union, to be selected by the superintendent of the Asylums, and certified by him to be fit and proper so to be removed." This useful provision will enable the English Asylums to free themselves to some extent of the enormous mass of chronic cases with which they are choked up ; and a similar power extended to Ireland would be productive of much good. I agree, however, with Dr. Connolly that the only cases which should be selected for separation should be those poor imbecile helpless creatures, who have fallen into an utter state of fatuity and dementia ; as he humanely urges that as many incurables are, during the year, superior in habits and manners to even many of the curable—and therefore their companionship could not prove detrimental to the latter—and by sending them away they would feel it as a sentence of eternal banishment, and all hope would be extinguished in their hearts (often the only blessing left them), and they would also be deprived of much of the benefits (which many of them would be capable of appreciating) more likely to be obtainable in a curative hospital than elsewhere. As the number of cases of the character which ought to be sent to Workhouses, would be too few in each union, to enable (consistently with due economy) suitable provision to be made to render the position of such patients as agreeable as possible, the best plan, in my opinion, would be to select for each province a workhouse affording sufficient accommodation, and devote

the available wards for the purpose of an Asylum for such patients as I have described, and charging their cost to the respective unions.

This arrangement would also allow of more paying patients being admitted to the curative hospitals—a great boon to persons unable to send their friends to a private Asylum, and yet willing to contribute something for their support in a public one. Some local boards contend they have no right to receive any payment for patients, and, accordingly, refuse to admit unless the usual declaration of inability is made by the friends of the lunatic. This has led frequently to rather a clear piece of equivocation on the part of the former, as when the patient could contribute a portion of the cost in a private Asylum, it is considered the declaration may be conscientiously made that he is unable to pay the requisite sum. I am aware that many persons are thus maintained out of the public rates whose families would not be distressed, and who would also be willing to pay the entire or a portion of the expense, if required. As there exists a doubt on the point, powers should be distinctly given to local boards to receive payment for the care and maintenance of patients, as well as to enforce it when unjustly withheld.

With the exception of Belfast, there is no other Asylum where the local authorities have refused to appoint chaplains, so that only there the patients are deprived of the comfort and advantages derivable from religious ministrations. A host of eminent authorities, too numerous to quote, unite in opinion that the insane, with few exceptions, are benefited by religion being employed as an auxiliary to their cure.*

* Many profound sophisms have been delivered as to the introduction of religious worship among lunatics. It has been argued that such exercises are addressed to the highest feelings of our nature, and bring before the attention the most awful truths—that they are eminently exciting, and consequently prejudicial; and the aphorism has been quoted, that it is necessary to avoid all excitement; that as no opportunity should be given for the irritation of the furious, or the intimidation of the timid, neither should any plan be adopted which may tend to foster religious impressions in the superstitious. This opinion has been controverted by the assertion, that such an appeal is tranquillizing and consolatory, and leads the enfeebled mind to the only source of strength and succour. One authority adduces examples of the efficacy, another of the evils of such an attempt. It is prohibited, because it sometimes causes insanity, or aggravates a predisposition to the disease; it is recommended, because it brings hope and peace to those who, although sane, are miserable. I regard the grounds of opposition and advocacy as equally invalid. Upon certain forms of mental disease, religious teaching or ceremonies would act as a direct irritant; upon others they would fall powerless; upon a third class, such ministrations would operate as any other novel scene or occupation which assisted in relieving the monotony of their mode of life; while upon a fourth, their influence would be altogether benign, affording a legitimate gratification to healthy feelings, directing the mind from depressing or agitating, to soothing associations, and tending to inspire with brighter and nobler hopes, which disease can neither darken nor quench, which will beam in on the troubled spirit amidst its gloomiest delusions, as clear and certain points of guidance, like shore lights on the storm bound sailor. Upon the discrimination of the patients to whom religious instruction is adapted, the whole question of its utility rests. To prescribe it as applicable to all cases, would be as wise as to seek for the *elixir vite*, and to exclude it, because sometimes

Much to the credit of the inspectors, they have done all in their power to induce the Board to rescind their resolution against the appointment of chaplains. In their last remonstrance on the subject, contained in Report for 1862, they say—

“But while most willing to concede to that Board (Belfast) all the praise it deserves, we cannot refrain from again expressing our regret that it should stand alone in the whole empire in its opposition to the regular attendance of chaplains, duly appointed as such, on the mass of patients so likely to derive consolation, if not direct curative benefit, from their ministrations. To join issue on a technical point of law, or to wait till an Act of Parliament shall decide as to whether Chaplains are or are not to officiate, is beside the question—the principle remains intact—the rites and comforts of religion should be afforded to our fellow-creatures, who, being confined in public institutions, are thereby denied the opportunity of seeking them out of doors; and, as we have already observed, we cannot conceive why delusions restricted to one subject should necessarily influence the correct exercise of the mind on all others; or why, for example, if a patient believed himself to be a lord mayor, judge, or general, he should not have the facility of attending a place of worship according to his creed, for surely the practice of religion is not incompatible with the functions of any of those exalted personages to whose order he might fancy he belonged. In criminal law the accused is justly held responsible for the offence he may have committed, unless it be associated with his delusions; hence partial sanity is legally recognised as coexistent with partial insanity. By strengthening the former we materially modify the latter, and thus, irrespective of its other influences, religion may act as a sanatory agent.”

The evidence of the Medical Officers of Irish Asylums before the commission of 1857 showed very clearly the advantage of having chaplains attached to the institutions. Everyone having the management of the insane in this kingdom and abroad to whom I have spoken on the subject has borne testimony to the same effect.

Dr. Jacobi, the great German authority, and Dr. Connolly, combine in regarding a good and prudent clergyman as a useful auxiliary to the Physician, in being enabled by his peculiar vocation to render very efficient and valuable assistance to the curative means employed by the latter. As to the great danger of misapplying religious attentions there can be no doubt; and at Belfast, more than in any other district, the Asylum contains a greater number of sincere but misguided victims of those excited religious meetings which have

injurious, betrays a deplorable ignorance of the constitution and the wants of the human mind. I may, with all reverence, compare the employment with that of any other medicine. It must be regulated by the idiosyncracies of the patients, by the symptoms, the duration, and the complications of the disease. No man entertaining this view, will establish public worship as an hospital routine duty, in which all must or may participate. It should be reserved for the few who can understand its meaning, who may be quieted by its solemnity, cheered by the prospects which it affords, attracted by the beauty of the service, or roused by the recollections which it calls up—the condition of each of these classes having been previously examined and tested as to the extent to which such impressions may be borne, and may prove beneficial.”

taken place in the north of Ireland, and inspired by the best motives, the local authorities are prompted to exclude whatever they deem calculated to prevent the calming down the excitability caused by the overwrought religious enthusiasm of these poor creatures; but it seems hard, in consequence, to deprive those who would derive consolation and benefit from participation in religious exercises of the regular attendance of a chaplain, particularly, as no doubt, the choice could be made from such as would assist to correct fanatical delusions, moderate spiritual conceit, vindicate God from the unjust views of His creatures, and revive every hope that is permitted to the imperfect and the penitent. From the high character borne by the board of management of Belfast for humanity and intelligence, I am encouraged to hope they will not leave an institution which takes a foremost place with those which promise best in the way of improvement, much longer in its present singular position as regards chaplains, and that the anticipations of the inspectors will be realised; "that the board which has hitherto so kindly ministered to the comfort of its inmates by the formation of an admirable band of music, the encouragement of evening entertainments, reading, country excursions, and the like, will afford us the opportunity of stating in our next report that it had itself applied to your Excellency for the appointment of three Chaplains, an Episcopalian, Presbyterian, and Roman Catholic, as at Omagh and Londonderry, where, according to an official report from the Governors, 'the system of religious instruction and public worship has been productive of beneficial results exceeding their most sanguine expectations.'"

In the Report of the Inspectors for 1861, they state—

"As a general rule, the patients in District Asylums are industriously employed both in and out of doors; and while their comforts and sanitary condition are carefully attended to, means of amusement are not neglected. At the Richmond, Sligo, Belfast, and some other institutions, there are regularly trained bands of music, with apartments specially allocated for the purposes of recreation; while in the first-named or Metropolitan, besides those females who are engaged in industrial pursuits, there is a class of from fifty to sixty who are instructed by competent teachers in reading, writing, figures, singing, &c., &c.; and so satisfied are we, from the result, that a continued system of tuition must prove beneficial to the insane, by giving a fixity to their thoughts, and diverting them from the subject of their delusions, that in those institutions where the number of patients will justify the application, we intend seeking assistance, through a grant of books and other requisites, from the Board of National Education.

"But desirous as we are to promote in every way the amusement of the inmates of our District Hospitals, and to afford them every means of in and out-door occupation suited to their antecedents, it should not be forgotten that a large proportion of them is composed of agricultural labourers, and of individuals from the humblest walks in life. In England, on the contrary, while the insane of a similar position are located to a considerable extent in licensed houses, or, for the sake of economy, in the lunatic wards of union buildings, the regularly constructed borough and county asylums, erected at a cost fully one-third greater than ours, are

peopled, for the most part, from the artisan, and better instructed classes, and from the shopkeeping and farming communities—both alike accustomed to many domestic comforts, and to which the rural population of this country, it must be admitted, are as yet strangers in no small degree. Nevertheless, although for all practical purposes there may exist an equal amount of substantial advantages in Irish asylums, as shown in the average scale of dietary, clothing, &c., which obtains in them, as well as in the attention paid to direct personal necessities, remedial and other, but above all, in an undeviating humanity towards the insane, it should not be a matter of surprise if, considering the relative social condition of their inmates, a deficiency of furniture, carpeting, and ornament is noticeable in them, as contrasted with many of the more expensively supported establishments in the sister kingdom. Comparisons having occasionally been made between these similar institutions of either country, with reference principally to their interior arrangements, wishing to uphold, but in a spirit of candid emulation, the character and usefulness of our own, we have entered on these explanatory remarks; and would further state for your Excellency's satisfaction that, while many of our institutions are kept with a most creditable taste and neatness, no longer presenting that nakedness hitherto so much complained of, in all, under the careful superintendence of their Resident Medical Officers, order, regularity, and a regard to outward comforts, are steadily progressing from day to day, with an extension of certain improvements originated in this, and which are being adopted in other countries."

I must most respectfully differ from the Inspectors as to the class of patients in the County Asylums in England being so different from those in similar establishments in Ireland. The result of a good deal of inquiry on the subject induces me to think that such a difference does not exist as they suppose. Many of the licensed houses are, in fact, a kind of auxiliary Asylums, and a large proportion of the patients in workhouses ultimately find their way into the Asylums.

Selecting Cork and Belfast, the only two, as far as I am aware, that publish a table of the previous occupation of patients, I find that out of 656 under treatment in the former, in 1861, only 169, including females, belonged to the labouring class; and in the latter, out of 102 admissions the same year, there were only 12 of the labouring population—although in both instances large agricultural districts are attached to the Asylums. In the Lincolnshire County Asylum, out of 144 admissions in 1859, 44 were labourers, and, though not able, from the terms employed in some of the returns furnished me, to distinguish "factory hands" from ordinary labourers, I feel tolerably certain that the proportion of better class patients in England is not much above Ireland.

The expense between giving an Asylum a cheerful interior aspect and leaving it in the almost utter bareness which I contend characterises the greater number of the Irish Asylums, would not involve an original outlay of more than one hundred pounds for even a large Asylum; and when we consider that a large number of patients are better fed, more amused, and judiciously occupied, and safely

retained without outer walls, at a cost of 7s. 3d. to 7s. 6d. per week, at an Asylum like Leicester (paying much more for wages and provisions than in Ireland), there can be no excuse on the score of expense why an equally good system should not be in operation in every Irish Asylum.*

I feel it unnecessary to remark on that portion of the Report for 1861 which is calculated to lead to the supposition that there was sufficient means of occupation and recreation for the patients, as in the subsequent Report (1862) the opinions of the Inspectors on this point appear to have undergone some change, as will be seen by the following extract:—

“Our object in introducing the educational condition of the inmates of the different District Asylums, and in which the illiterate more than double those who have received a fair amount of education, was to exhibit their previous social position, and to show the beneficial working of these institutions in producing habits of order, neatness, and even some approach to refinement among the insane classes; while the number daily employed in and out of doors serves to prove the encouragement given to industrial occupations. On this latter head, however, we feel satisfied that great room for improvement still exists, and that suitable occupations could be devised for a much greater proportion of patients than at present; for nothing can be more injurious to the insane themselves than idleness, and that listless mode of existence, particularly within doors, which we regret to observe is too much tolerated. In the absence of industrial employment, pastimes ought to be more generally provided.”

This statement of the Inspectors so fully corroborates all I have said regarding the inadequacy of the means of occupation and recreation, that it would have been almost sufficient for me to have adopted their report, as supplying all that I required, to prove that the Executive should take steps towards having the defects remedied. It depends much on these gentlemen whether this drawback on the otherwise highly meritorious character of the Asylums under their charge shall continue. The co-operation of Government, local boards, and officers of Asylums, would, of course, also be required; but I do not anticipate much difficulty in that way, as no Asylum could lag long after the others, once the work of improvement vigorously commenced.

I could name two or three boards anxious to perform their part if the right way were only pointed out to them; and I can answer for the one to which I have the honor to belong, as most desirous to do all that devolves on them to promote the happiness and recovery of the patients, having very lately granted a sum of money to provide additional means of recreation.

The four principal Asylums possess, I think, advantages which ought to lead to their becoming models for all the others. Rich-

*The amount paid by paying patients does not influence the calculations as to the cost of treatment and maintenance, as if there should be any excess over actual cost it goes to the credit of the Institution.

mond already has shown the way, in establishing a good school for a portion of the inmates, and being fortunate to have for its Resident Medical Officer a gentleman of whose capabilities no better proof can be afforded than the honourable position he lately filled as President of the Association of Resident Medical Officers of the Kingdom, there seems to be no reason why the Hospital under his charge, now that he has acquired enlarged powers, should not be to Ireland what Bethlehem is to England. Cork, the first to introduce what promises to be the most important tranquillising and curative agent yet known—the Turkish Bath—ought, on that very account, to be able to afford its patients increased liberty, and introduce amongst them additional means of recreation.

The Board at Limerick having lately shown a desire to prevent what they deemed an encroachment on their rights in the government of their Asylum, I would hope that the same spirit would lead to such improvements in the condition of the patients as would render the terrible surrounding walls no longer necessary, and enable the visitors to enter on the grounds without meeting with such obstruction, and mingle amongst happy, tranquil patients, as I did at Leicester.

Belfast, with its orderly, well-disciplined column marching through pleasant, familiar scenes, to the well-played airs, performed by the band, composed of patients, without exciting alarm, or any accident resulting, will, I have no doubt, not rest satisfied until other improvements are effected creditable to its able and humane resident and visiting medical officers. The latter has, in one of his last admirable works, forcibly pointed out the defects existing in the greater number of Asylums, as well as suggested the remedy, and I regret I am unable to give more than a brief extract, bearing out almost everything I have said on the subject.*

* To look upon the malady as material only, is to fly in the face of observation, all just induction and analysis. As the causes of insanity are Moral Causes mainly, so must the treatment, the insanity regarded, be a moral treatment mainly. I would rather see insanity morally treated by a practical, experienced, intelligent, non medical person, than by a medical man entertaining, and only influenced by, materialistic views. The treatment of lunacy apart from psychology, is simply quackery. We cannot deal with the insane unless we sympathise with them and understand them. For insanity is a moral disorder, acknowledges moral influences, the needfulness of culture and discipline of the will, in fine, a judicious alternation of remedial moral, and physical means. What possible weight, indeed, could an efficiently-organised moral treatment have in the eyes of one with whom psychical derangement is a mere question of plus or minus phosphorus, and mind itself but motion in the molecules of the brain.

The great intelligence and humanity of very many who have to do with the treatment considered, I do not think that those who undertake the difficult task of dealing with the insane are afforded sufficient scope.

The comparative fewness of recoveries in acute cases, the yet more lamentable deficiency in chronic, is owing in part to the paucity of remedial means at the disposal of those who have the charge. Hence, too often, the passive, inert, and pining state to which so many of the insane are almost necessarily relegated, and in which they therefore spend and end their days. For every means should be

The other Asylums would hardly suffer themselves to be surpassed, and I can easily foresee that if the simple course were adopted that I have pointed out, the Irish Asylums would present this difference with regard to the English ones, that whilst not more than a fourth of the latter can be selected as fairly coming up to the right standard, nearly every one of the former would do so in a short time.—The comparatively smaller number of epileptics and idiots admitted to the Asylums in Ireland as compared with England, the earlier stage, generally speaking, at which the patients are placed under curative treatment, the lesser amount of incurable cases, combine to render the district Asylums a satisfactory field for skilful operations. Now that Government and the Inspectors admit that there is a deficiency in two of the great curative agents—occupation and recreation—there is no reason why the defect should not be remedied.—No doubt there may be some difficulties at first where the system remains the same as when the Asylums were established a quarter of a century ago, and in such instances it would frustrate the object if everything were attempted at once. To be safe and successful the change should be gradual, and the patients prepared for the increased indulgence and confidence that should be eventually extended to them.

yielded calculated to remedy psychical derangement, in short, to reform and integrate, when disordered, the nobler machinery of the soul. More attractive bodily occupation there should be for one thing, at one time beneath the free heaven, at another in some cheerful, roomy, well-ventilated space indoors. It requires the greatest seriousness, the entirest directness, in dealing with the insane. A higher class of persons, better educated, better remunerated, should be entrusted with the immediate culture, so to speak, of the insane. Such would prove susceptible of a far more elevated order of motives than the common herd of keepers and keeperesses, and would correspondingly bring these motives into comparatively influential operation. Indeed, the insane should be held to constant wholesome cheering employment of body and soul as free from violence and physical constraint. They must be set to work at some healthy material moral occupation, that they may be cured. For it is difficult to imagine the extreme torpor of mind and body into which so many of the insane are plunged. Yet, even they, for the most part, might be reached through the medium of their animal wants, various food and clothing and action, some lingering harmless addiction which it would be the business of the skilled attendant to discover. To music's gentle solace very many are accessible, and why not, since the musical faculty itself is not insane. When we come to the higher motives furnished by Religion, Science, Letters, Art, we find that many are immediately susceptible, and others prospectively so. For they all help to turn attention from the mental craze, aid our attempts at individual development, the furtherance of sequential effort, the control of appetite, and the exercise of healthy will. Idleness, inoccupation, and gloom, are indeed the bane of asylums, where moral culture, with a wholesome habitual cheerfulness, should come more fully into play. And since the affections and feelings are not necessarily depraved, not even insane, there is in them a perfect mine of moral influence for thoughtful loving intelligence to turn to account when it will. For let us but reflect, that of the mind in itself we know nothing, know it only in its operations, which in the insane are at fault. It is our business, then, to remedy impaired morbid thought, to bring it under the moral law, in short, to avert mental ruin, and rehabilitate into healthy life and action the weakened consciousness of man." —*"Metanoia, a Plea for the Insane,"* by Henry M'Cormac, M.D., visiting-physician to the Belfast District Hospital for the Insane Poor.

To advocate that immediately every Asylum should be assimilated to Derby and Leicester would be worse than folly. The person recommending such a course would deserve to be placed amongst the insane himself.

A Medical Officer who stated that the lives of the inhabitants of the town near his Asylum would be endangered if the things were done there, which I represented as being in successful operation elsewhere, was perfectly right, as I have no doubt if in the Institution under his charge the means of amusement were provided, as at Derby and Leicester, without previous preparation, and the walls levelled as at the latter, a universal smash of everything breakable would ensue, probably including the officers and patients' heads, and a nearly tenantless Asylum before many hours, be pointed to as triumphant evidence of my folly.

Place men, however, like Drs. Hood, Buck, or Hitchman, for one year in such an Institution, and before the end I will rely on its altered aspect for my vindication.

That there are several gentlemen connected with the Irish Asylums capable of rendering their Asylums as good as any others in the Empire I have no doubt, and anticipate they will yet do so.

To those who either seek to raise apprehensions or who entertain them, when more liberty and recreation is advocated for the insane, I refer to the history of the Lunatic Colony of Gheel as a proof of what the power of kind and judicious treatment can accomplish for tranquillization, happiness and recovery, even in the hands of a peasant.—(*See Appendix.*)

As I have before said, much devolves on the Inspectors in the way of effecting improvements. From their position, extended opportunity of ascertaining the best course of treatment, and the merits of experiments, Government, local Boards and Medical Officers must naturally look to them for advice, and from the high personal and professional character which these gentlemen enjoy, and the confidence reposed in them, their recommendations could hardly fail to be attended to.

Hitherto almost every Administration has exhibited too much supineness, shown by the long period suffered to elapse before carrying out even one of the recommendations of the Royal Commission. To do Sir Robert Peel justice, I am bound to say that since he came into office he has taken considerable trouble to inform himself on the question, by visiting some of the English and Irish Asylums, and endeavouring to effect changes which he considers likely to prove beneficial. I believe to him is mainly attributable the alteration in the position of the resident Physicians, the utility of which change yet remains to be proved, but appears to be justified by the fact that, during the long period the chief power remained in the hands of the visiting Physicians, with a very few exceptions, the Asylums did not improve as regards moral treatment.

I trust the Chief Secretary will be induced to make further efforts for a class for whom he has shown an interest. The local governing boards can also do much to assist by exercising the functions entrusted to them, and seeing, in addition to the Asylum being clean and orderly, the accounts regular and the contracts fulfilled, that the few simple principles which I have already alluded to with regard to the moral treatment are in operation. It will not be out of place to remark, whilst on the subject, that committees would be much increased in efficiency by Government substituting other members for those who rarely attend, and establishing some rules by which an absence from a certain number of meetings during the year, without satisfactory reason being given, should, as a matter of course, disqualify from being longer a member of the board. If the Inspectors would, in addition to their useful table of the members who attend meetings during the year, also publish one containing the names of those not attending, I think it would be seen that a very large number habitually neglect their duties.

In conclusion, I trust to the leniency of my readers to pass over indulgently the imperfections in these pages. Written during parliamentary session, and amid other duties, I have been unable to devote sufficient care to their preparation, and being printed some hundred of miles from where they were written, I have been precluded from even correcting the proofs, owing to the rapidity with which it was necessary to print, in order to get out the Pamphlet before bringing forward the motion relative to Asylums of which I have given notice.* I have carefully avoided suggesting anything for which I could not quote the most eminent authority to justify, as well as point to instances where the principles I advocate are in full and satisfactory operation.

The improvement of the treatment of the insane is of interest to nearly all. The dread disease is not a partial one. The noble and the pauper, the beautiful and the deformed, the learned and the ignorant, the good and the wicked, are alike subject to its terrible influence,

“æquo pulsat pede, pauperum tabernas,
Regumque turres.”

And unhappily its victims are, it is to be feared, on the increase; therefore, it becomes the more necessary to do all that skill can devise or humanity accomplish for its cure.

From what I have seen of many private Asylums, even where large sums are paid for patients, they are not altogether exempt from the same faults as I have complained of in public Asylums;

*NOTICE OF MOTION.—FRIDAY, 1ST AUGUST.—Mr. Blake,—Lunatic Asylums (Ireland).—To call attention to the defects in the moral treatment of insanity in the Public Lunatic Asylums of Ireland; and to move, that, in the opinion of this House, it is the duty of Her Majesty's Government to take steps to carry into effect the principal recommendations contained in the Report of the Commissioners of Inquiry into the state of the Lunatic Asylums of Ireland (1856).

therefore, those having friends in them should wish for improvements in the former, while, of course, the latter, not to suffer by being contrasted unfavourably with the Institutions for the humble classes, would make efforts to keep pace with them. To the Ratepayer it is a matter of no small importance that Asylums should be brought to the highest point of curative excellence; for with an increase of recoveries the demand made on him for their support would decrease; and to the poor themselves it is probably a matter of the greatest interest of all that those of their kindred, on whom God's dread visitation might fall, should be quickly restored to the humble home, of which they may have been quite as much the comfort, or stay, or pride, as the occupant of the lordly mansion. To assist in accomplishing something beneficial for those whom Providence visits with so terrible an infliction, is a holy and a noble task, and the Press, both medical and political, can render more real service in the matter, perhaps, even than the Legislature—by a thorough investigation of the question—and fearlessly pointing out what really calls for amendment. When I brought the matter first under public notice some of the leading Irish journals strongly dissented from some of my statements and conclusions, which, I have no doubt, they must have felt convinced they were warranted in doing, and I will not complain even if they deal with me in the same manner again. I will only venture to ask, for the sake of those for whom I plead, that before doing so they will calmly investigate how far I am correct in the statements which I have incurred the responsibility of putting forward. I would be quite content to have the merits of the Asylum tested by what the *Dublin Daily Express*, of August 13th, 1861, lays down as the course that should be adopted with regard to the insane, and hope the eloquent and humane writer of that article, and his brethren of the Irish press, will lend their powerful aid to effect for the lunatic what he so justly and feelingly advocates.*

*We quite agree, however, with Mr. Blake in the general principles which he maintains with regard to the treatment of the insane. Monotony is by all means to be avoided, and the sense of restraint, as far as possible, mitigated. Insanity is, for the most part, the result of brooding over one idea till it becomes dominant. When the reason completely gives way, this idea becomes the tyrant of the mind, monopolizing all the thoughts, and excluding everything else. There is one object ever before the eyes, seen in a magnifying haze, and assuming all sorts of phantastic shapes. As the art of preserving mental health consists very much in breaking up this monotony, in diverting the attention from the object of morbid regard by all sorts of variety, so the recovery of mental health must be sought by the skilful cultivation of the same means. If possible, the patients should not be allowed to feel that they are in prison, and that they are haunted by keepers; they should not be obliged to gaze upon the same unvarying objects, the same bare walls, the same dull uniformity, every day. They should be allowed to live much in the open air, to be conversant with Nature as she puts forth her beauty, and clothes herself in brilliant tints, in gardens, fields, and woods. They should inhale the fragrance of opening flowers, and listen to the humming of bees, and the singing of birds, and the purling of streams. As the harp of David charmed the demon of melancholy

I desire that it should be particularly understood that I have not ventured lightly to occupy public attention with this subject, without first endeavouring to make myself thoroughly acquainted with it. Apart from other considerations, I felt bound to do this to enable me properly to discharge my duties as one of a local Board of Management of an Asylum, as well as a member of the Legislature, where so many questions affecting the insane are discussed. During the present Session three important Bills relative to them have been passed. In addition to having visited nearly every Asylum in the Kingdom, I have gone over some of the principal ones on the Continent, consulted the best works, and have had the advantage of personally conferring with many of the men who have proved most successful in the treatment of insanity. My object is to make the public mind comprehend and adopt the great truths laid down on the subject, and especially to impress these truths on the minds and consciences of those who are placed in a position to alleviate the condition of those whom Providence has visited with the sad consequences of insanity. For until then we cannot hope to see accomplished for those afflicted ones all that skill, judiciously directed, can effect. Wherever an Asylum merited honourable mention, for anything, I have gladly alluded to it; and if I have unintentionally omitted any, I shall be most ready to make every amend. I have avoided naming Asylums which I considered deserved censure,—hoping

from the mind of Saul, and soothed his troubled spirit, the blessed influence of music should be brought to bear upon the insane. It has a power of awakening dormant memories, of opening visions through the gloom in which reason has been enveloped, of revealing sunny landscapes far away in the past, when the mind was sound and the feelings were happy. Some once familiar melody, some tune of a psalm, or snatch of song, may revive a world of thought and lost consciousness; lost trains of ideas may come into view, like the variegated landscape of a well-cultivated hill-side, as a freshening breeze gradually rolls away the clouds, and the sun sheds its gladdening light upon the scene.

Far more effectual than medicine are these sanitary influences “to pluck from the memory its rooted sorrow, and raze out the written troubles from the brain.” The fine arts, too, exert a most salutary influence in effecting the cure of insanity, on the same principle of amusing the patients, and diverting attention from their imaginary grievances. Everything should be done to render them cheerful, and to chase away the phantoms that haunt their gloomy imaginations, provided always that the proper remedies are applied to remove or mitigate the physical causes of cerebral disease. Industrial employments of manifest utility tend very much to gratify the mind, while promoting the bodily health of the insane; and it has been found in the Belfast Asylum, that military exercises, combined with music, have a powerful effect in promoting recovery, or, at least, mitigating the malady. Happily, the subject has obtained so large a share of public attention, and is becoming so well understood, and its importance is so fully recognised, that there is no danger of serious neglect or apathy on the part of public functionaries intrusted with such responsible duties; but something beyond this is required—an active spirit of philanthropy—a strong feeling of humanity, ever prompting to efforts at improvement and amelioration, which never rests so long as evils are to be remedied, abuses corrected, and sufferings mitigated; and this spirit, we believe, animates the gentlemen to whom we have referred, so that we are sure they will be always ready to carry into effect whatever improvements may be suggested by Mr. Blake or any other practical friend of the insane.—*Dublin Express.*

that on a future occasion I would be enabled to class them with the meritorious. Personally, I have no reason to entertain any feeling but kindly ones towards the officers of the Irish Asylums with whom I am acquainted ; and it would prove a much more agreeable task to praise than to find the faults which I have been obliged to do, for the sake of those on whose behalf I write. However, it is satisfactory to know that all that has been complained of admits of an easy remedy. Should I ever again allude to the subject, I have a cheerful hope that it will be to state that those responsible for the treatment of the insane in Ireland are discharging their high mission as they ought—for there cannot be a loftier aim than to be instrumental in alleviating the sorrows of a mind diseased, and aiding to bring it back to health and peace and usefulness ; I hope I can then record that I found the patient surrounded by pleasing objects, calculated to withdraw him from the contemplation of his lingering delusions, and that no pains were spared to make him “feel like a man amongst men,” and that nothing was neglected that could promote healthy thought and action.

I should have stated that at the Kilkenny Asylum, as at Sligo, the excellent practice has been for some time in operation, with great success, of bringing the male and female patients together at dinner.

APPENDIX.

A LUNATIC VILLAGE.

Being an account of the singular colony of lunatics at Gheel, which, planted early in the Middle Ages, yet remains a marked instance of successful intelligence, both in the theory and practice of non-restraint.

Happy is the subject of dry medical science which can be connected with a legend, and an Irish legend too; we may believe it or not, if we choose, but we are far less likely to forget that than the most elaborate article in an encyclopædia, and so we will summon M. Duval to tell us how the Irish princess Dymphne, a convert to Christianity, in some early age untold, fled from the court of her wicked father, accompanied by the missionary who had effected her conversion, and took refuge in a small village, which was then but a collection of huts gathered round a chapel dedicated to St. Martin, the apostle of Gaul. The wicked father followed in hot pursuit, and caused the missionary (Gerrebert) to be put to death by his followers; but finding no one willing to execute his bloody commands as to the young maiden, he cut off her head with his own hands. Honored as a martyr to the Christian faith, her tomb was visited by certain madmen, who there regained their reason.

Another version of the legend relates that the madmen saw the wicked Irishman cut off his daughter's head, and thus were frightened into their wits. Be that as it may, the princess was hereafter known as the patroness of the insane; and the people brought their mad relatives to pray at her tomb, and often left them with the neighbouring cottagers in the hope of miraculous benefits; and so grew up the extraordinary colony, which is neither a dream nor a delusion, but may be seen at this day clustered round the church of Saint Dymphne.

Gheel, thus mysteriously introduced to the modern reader, is, however, but two days' journey from London. It lies in the flat country to the left of the railway between Antwerp and Malines. Whatever be, however, the improvements introduced into our asylums in France and England, these still partake somewhat of the nature of a prison rather than an hospital. Very strict discipline, the obligation of sleeping, walking, and eating at fixed hours, and, above all, exclusion from the society of friends are necessary conditions of the establishment, where numbers of the insane are gathered together. The minute delicacies of individual treatment, and the nice adjustment of the liberties to the exact state of the insane patient, is impossible in an asylum. The fourth resource, of *colonising* the insane amidst a population of people in a normal condition, may sound a somewhat wild proposition, yet the system has actually been carried out at Gheel for nearly a thousand years, where it grew up naturally under the stimulus of devotion, created originally quite without theory, and developing like a tree from a seedling, or a man from a child. Whether it can be *imitated* is another question; but it is at least deeply interesting to know with what success many hundreds of insane people have been induced to dwell quietly among hard-working farmers and labourers, generation succeeding generation from century to century.

The traveller in walking through the streets of Gheel would very probably be far from divining the character of the locality; all bears the same

appearance as in other country towns. The quiet streets with their few passers-by, curious folks looking out of the windows, others at work in the gardens, here and there scattered loungers at the *cafés*; general silence and monotony—such is the outward aspect of Gheel. If, however, he be cognisant of the condition of a part of the population, or if he be of the medical profession and quick to discern the signs of mental aberration, he may notice some wandering dreamer, with his eyes cast up to heaven, or another eager to overwhelm him with smiles and salutations, or a third who instantly treats him as hail fellow well met. It is quite true that he is in a sort of metropolis of insanity; concerning which, by due inquiry, he may learn the following details:—

Of the total number of 5,500 insane in Belgium, Gheel receives from 800 to 1,000, or not quite a fifth; of these, half are sent from the asylum at Brussels, which only retains a few patients of this nature, in cells annexed to its beautiful hospital of St. John. Mad people of all sorts are admitted at Gheel, except those whom it is absolutely necessary to confine continuously; patients afflicted with murderous monomania, and incendiaries; those who could not be persuaded to remain without running away, and all such as are prone to trouble public propriety, are, of course, likewise excluded from Gheel. But patients only liable to occasional fits of fury are, as we will explain further on, much sought as inmates by the peasants. Unfortunately, the greater number are already confirmed incurables when received into the colony; as relatives send them there after more pretentious methods of treatment have failed, and rather to get rid of them than with any hope of their cure. Thus the deaths are in greater proportion than the recoveries, and that from no fault of the treatment.

Of the whole 527, men and women taken together, who have been admitted during the last four years, 334 had been insane for more than a year (ranging up to twenty years of insanity); and of curable or doubtful cases at the time of admission there were only 145, while 382 were already incurable. I lay particular stress on this latter point, as showing the degree to which the admirable results of the treatment pursued at Gheel are lessened in appearance by the practice of trying other remedies first, and only sending cases there when these have failed, and the malady has become chronic.

But in such colonies, as in Gheel itself, it is above all desirable that they should not be considered as mere retreats where incurable lunatics can be well taken care of. It is in the early stages of the malady that fresh air, liberty, and useful occupation are invaluable. It was stated above that the recoveries among those who go to Gheel under the head of curables are 50 and even 65 per cent.; an ample testimony to the value of the principle exemplified in the treatment pursued.

Dr. Parigot, the medical superintendent of the arrangements, made a round with me among the mad folks, and showed me statistics in proof of the doctrine that "free air and family life" may be safely allowed to an immense majority of mad people; the cases of homicidal tendency and other cases requiring confinement being comparatively rare. Pinel, he remarked, raised the madman from the condition of the criminal whom we detest, to the rank of the malade with whom we sympathize; and the new theory raises the malade, hitherto restrained through false unreasoning fear, to the rank of a free man; kindly tended and guided, so far as his infirmity renders this necessary, but not, as heretofore, unjustly deprived of his liberty. A large proportion of the ailing persons thus restored to freedom are able, he contends, to take part in various sorts of labour, and thus

wholly or partly to earn their living, while enjoying the largest possible measure which their malady (according to its degree of severity in each case) permits of the rights and privileges of humanity. My own observations at Gheel confirmed the wisdom and humaneness of the doctrine. I saw mad people doing field labour, carpenters' work, &c.; others harmlessly wandering about, or basking away their time in freedom by the wayside, or sitting amidst the family of the cottage with whom each is quartered, frequently sympathized with and sympathizing; a far less painful spectacle than the same number of such folk confined in a madhouse.—The most furious maniacs are most desired by peasants and farmers, as showing more energy; while of idiots or infirm patients no use can be made. Fits of fury, if only periodical, are soon brought under restraint, and it is found that active labour out of doors is a wholesome discipline which soon tends to prevent their recurrence. Small sums in pocket-money are allotted for such work, and if the medical man advises the stimulus of any particular reward, he is always obeyed. Simple, ignorant, and laborious, free from vanity and ambition, but good by nature, and religious by education, the *Gheeloises* accomplish marvels with the insane. The patient depends for all his comfort on the mistress and on the daughters of the house, and they acquire extraordinary empire over him, managing his propensities, and dissipating the sulky brooding in which he is so often prone to indulge. It is not uncommon to see maniacs of herculean frame, in their most capricious and agitated moods, obeying little women bent and thin with age, and using no weapons but a few authoritative words. Nobody hinders them in any harmless pursuit. The same man who elsewhere would be shut up as dangerous—an object of terror to women and children—here “sits in the market place,” smokes his pipe at the *café*, plays his game of cards, reads the newspapers, and takes his pot of beer with his comrades; only wine and spirits are forbidden him, under pain of fine to the tavern-keeper. Thus, inside and outside the house perfect freedom prevails. So complete is the fusion, that it is by no means easy always to distinguish who is crazy and who is not. Of two women, one of whom cooks the dinner and the other waits at table, each of whom rivals the other in eagerness, often in loquacity, the guest will not always easily discover which is the mistress and which merely her inmate. Outrages of any kind are of very rare occurrence. As to suicide, any fear which may naturally be entertained is dissipated by the facts; voluntary and violent deaths are almost unknown; one, only, occurred in 1850, another in 1851. The complete change of ideas undergone by the patient adopted into a new household, and the absence of anything like irritating restraint, helps the dispersion of morbid ideas and what we call melancholy madness; and the isolation of the different families hinders, to a great degree, any fear of contagious example. As to attacks against the person, only two have occurred in half a century. Public security is, therefore, complete, and women and children have no more fear of meeting a mad neighbour than a sane one. To carry on such a system elsewhere the inhabitants must be at once gentle and robust, and the religious feeling should be at once strong and practical. We have alluded to religious solemnities; the insane have their own church, where they join in all the services, walk in processions, and conduct themselves with propriety. The patients are admitted to the Sacraments if their mental condition allows of their comprehending their importance and their meaning, and it is found that participation in the spiritual life of their fellow Christians has a very healthy and calming effect on their minds.

The entire town is Catholic ; but perfect liberty of conscience exists in Belgium ; and Protestants, if sufficiently numerous, could perform public worship. No systematic classification according to the nature or the gravity of the mental affection is carried out. There is something wonderfully touching in the story of the colony ; founded in religious feeling, a thousand years ago, preserving its peculiar character through the lapse of ages, and affording at every turn pathetic romances attached to each farm and cottage. Condensed from the work of M. Jules Duval :—“Gheel, ou une Colonie d'Aliénés, vivant en Famille et en Liberté.”—*The English Woman's Journal. Account of a Colony of Lunatics, living free from restraint, at Gheel, in Belgium* (1861).

E R R A T A .

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The first part of the report is devoted to a description of the general situation of the country at the beginning of the year. It then proceeds to a detailed account of the various events which have taken place during the year, and concludes with a summary of the results of the year's work.

APPENDIX

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2
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The following table shows the results of the year's work in various departments. It is divided into two columns, the first of which contains the names of the departments, and the second contains the results of their work. The results are given in terms of the number of cases, the amount of money, and the number of persons.