

Report on insanity and idiocy in Massachusetts / by the Commission on Lunacy under resolve of the Legislature of 1854.

Contributors

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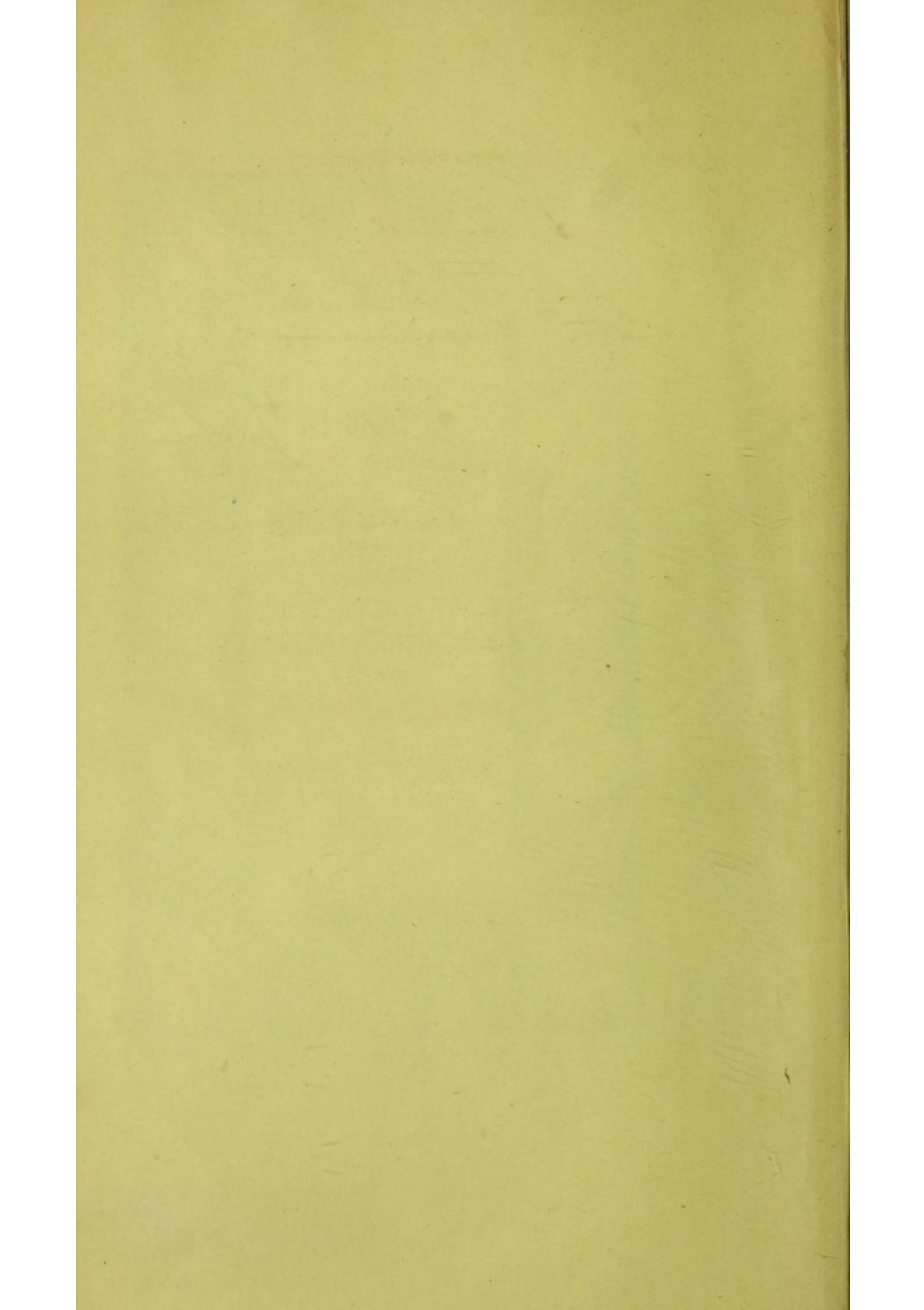
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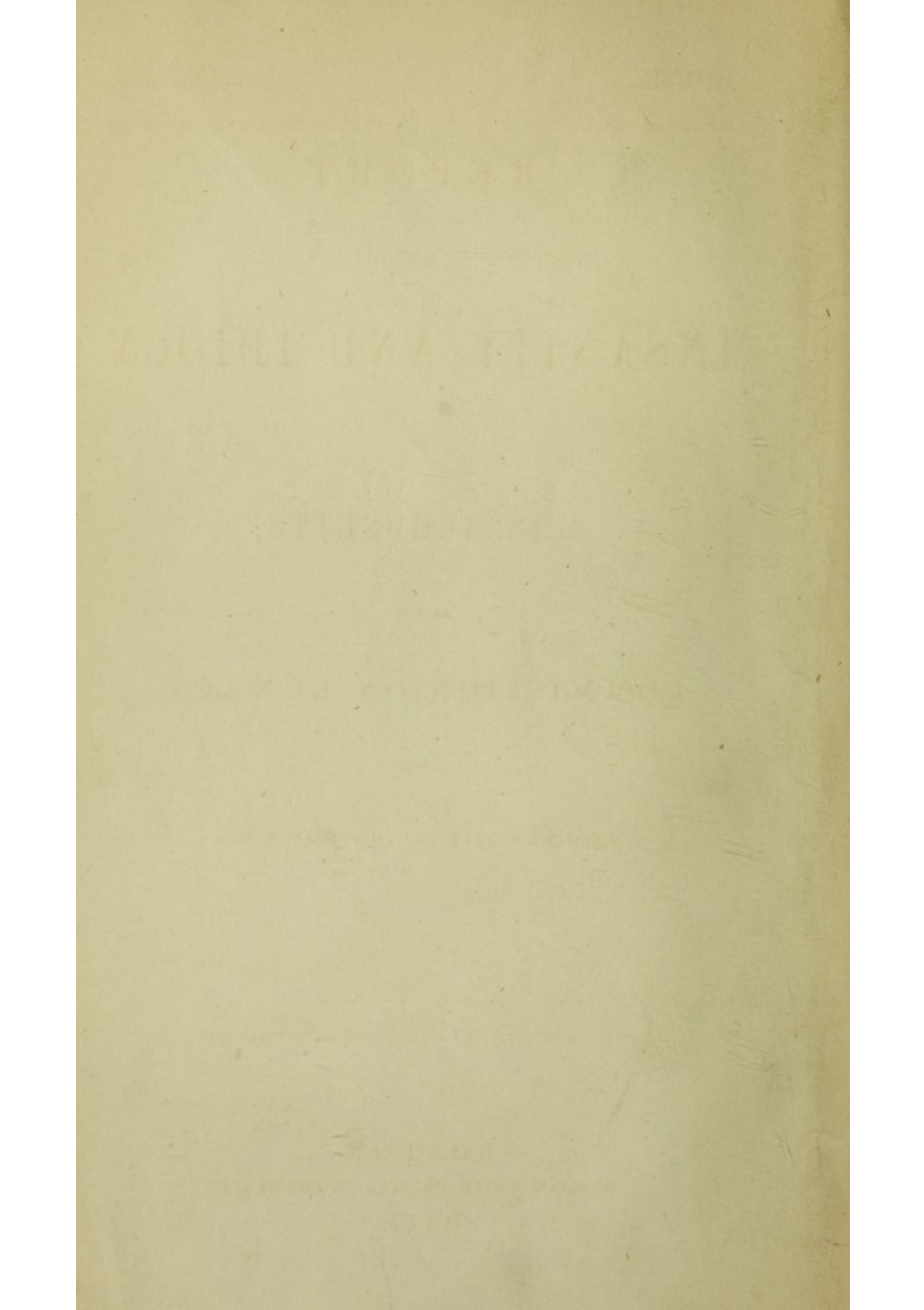
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R E P O R T

ON

INSANITY AND IDIOCY

IN

MASSACHUSETTS,

BY THE

COMMISSION ON LUNACY,

UNDER

RESOLVE OF THE LEGISLATURE OF 1854.



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EXPLANATORY NOTE.

The facts contained in this Report were gathered, in accordance with the Resolve of the Legislature of 1854, during the autumn and December of that year. The returns of the number, condition and situation of the lunatics, which were received from the physicians, overseers of the poor, the superintending officers of hospitals and other public establishments, were digested, the tables were prepared, and the Report written, during the winter of 1854-5.

The Report shows these facts as they were when the returns were received ; but since it was written, and while it was in press, several of the insane and idiotic State paupers were transferred from the receptacles, &c., to the State almshouses. This changed their location, but not their condition, nor their relation to the Commonwealth.

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Commonwealth of Massachusetts.

IN SENATE, May 5, 1855.

ORDERED, That three thousand and five hundred copies of the Report of the Commissioners on Insanity and Idiocy, also the same number of the Report of the Committee on Public Charitable Institutions, (House Doc. 282,) be printed, and a copy of each bound together. Said copies to be in addition to any number which may have heretofore been ordered, and to be printed under the supervision of the said Commissioners; and that a sufficient number of copies be placed in the hands of the Commissioners to enable them to send one copy to each Clergyman, Physician, Superintendent of Hospital, Sheriff, Town Officer, or other person in America or Great Britain, who aided the said Commissioners in preparing their Report, by furnishing facts, giving counsel, or otherwise; and that the remainder be left with the Secretary for the use of the Commonwealth.

Sent down for concurrence.

P. L. COX, *Clerk.*

HOUSE OF REPRESENTATIVES, May 7, 1855.

Concurred.

H. A. MARSH, *Clerk.*

A true copy.

Attest:

P. L. COX, *Clerk of the Senate.*

Commonwealth of Massachusetts.

To His Excellency HENRY J. GARDNER, Governor, and the Honorable the Council of the Commonwealth of Massachusetts:—

The undersigned, the Commissioners appointed under the Resolve of the Legislature of 1854, "concerning the Insane in this Commonwealth, and the State Lunatic Hospital of Worcester," respectfully

REPORT.

The Resolves by which their commission was created required of them,—

1. "To ascertain the number and condition of the insane in the State, distinguishing as accurately as may be between the insane, properly so considered, and the idiotic or *non compos*; between the furious and the harmless, curable and incurable, and between the native and the foreigner, and the number of each who are State paupers."

2. "To examine into the present condition of the Hospitals of the State for the insane, and see what number of patients can properly, with due regard to their comfort and improvement, be accommodated in said Hospitals."

3. "To see what further accommodations, if any, are needed for the relief and care of the insane."

4. "And, generally, to examine and report the best and most approved plans for the management of the insane, so far as the size and character of Hospitals, and the number of patients proper to be under one supervision are concerned."

5. "To examine into the present condition of the State Lunatic Hospital at Worcester, and ascertain what kind and amount of repairs are needed, and at what probable cost, and consider the expediency of disposing of the said Hospital and the lands connected therewith, or any part thereof, and of recommending a site for the erection of a new Hospital or Hospitals."

6. "To report the estimated proceeds of the sale of the present Hospital and the grounds therewith connected at Worcester, if they deem such a sale desirable."

7. "To accompany their Report with plans, specifications and estimates of cost of any new Hospital which they may recommend."

As early as possible after receiving their appointment, the Commissioners addressed themselves to the work assigned them by the Legislature.

On careful consideration of the language and spirit of the Resolves and the purposes of the Legislature in reference to this matter, they thought that the number and condition of the insane in the State, their prospects and their wants, lay at the foundation of all further action, and that therefore this inquiry should be first made. They then determined to make the requisite enumeration of the insane and idiots, and ascertain all the facts concerning them specified in the law, as the first step in their work, before they should proceed to the others, except so far as they might be attended to incidentally, while in pursuit of the first object.

In order "to ascertain the number and condition of the insane and idiots in this Commonwealth," it was necessary either to visit every family, in person or by proper agents, to make the inquiry, or to obtain the facts of those who already knew them. The former, the personal inquiry from house to house, if done by the Commissioners, would probably require some years to accomplish the object; and if done by others, it would

require the aid of so many as to make the work exceedingly expensive. And moreover, it is not probable that the facts could be thus ascertained by the inquiry of agents at the doors of the several families through the State; for most people, whose friends or relatives are disordered in mind or deficient in intellect, are unwilling to talk about it, and many would be still more unwilling to confess these painful and disagreeable facts and circumstances in their domestic relations, to a stranger. And if that inquiry were made by a public officer or agent of the government who had no personal claim upon their confidence, and who sought these facts apparently to be used in a public report, many of them would undoubtedly refuse to give the information required.

In 1850, the marshals, the agents of the National Government who were appointed to take the census, visited every family; and, among other items of information, they asked for the insane and idiots in the household.

By this personal and official inquiry, made of some responsible member of every family, the marshals obtained the account of only sixteen hundred and eighty insane persons and seven hundred and ninety-one idiots, which is but little more than two-thirds of the number ascertained by this Commission.

Making all due allowance for the increase of population, and consequently of the insane and idiots, these figures undoubtedly show far less than the real amount of insanity and idiocy at that time, and render it extremely probable, that many concealed the facts that the law required them to state to the marshals.

PLAN OF THE INQUIRY—PHYSICIANS EMPLOYED.

In view of these difficulties, of making the inquiry from each family, the Commissioners sought out other plans. They considered that there are very few families that are not within the personal knowledge of some practitioner of medicine, and that therefore the whole Commonwealth is, in detail, under the eye of the medical profession; and that they, knowing the domestic condition of the whole people, were of course acquainted with all those whose minds were disordered or defective.

Accordingly the Commission determined to address every

physician in the State, asking each one to give information relative to the persons and condition of all the lunatics and idiots within his own knowledge. They sent a lithograph letter, stating the several objects of inquiry, and enclosed a printed schedule or form of return, which contained all the heads under which the answers were to be recorded. They asked for the name, sex, color, age, country of birth, whether single, married or widowed, whether lunatic or idiot, present and usual condition, whether mild, manageable, troublesome, excitable, furious or dangerous, whether subject for a hospital or not, length of disease, if periodical the number of attacks, whether curable or not, whether the remedial influences of any hospital had ever been tried for restoration, where resident if not in the town of the reporter, and whether State or town pauper, or independent.

It was supposed that these fifteen questions would elicit all the information which the Legislature required, all that science would desire, and all that could be conveniently obtained from those of whom the inquiry was made.

Although every family was presumed to come under the cognizance of some physician, as most families have one, who attends them in their sickness, yet there are some whose various members employ two or more physicians to heal them. Each of these might observe and return the same lunatic or idiot member of the family, who would thus be reported more than once. Therefore the names were asked to enable the Commissioners to correct any mistake that might arise from this double or multiplied reporting. In course of the inquiry this has happened in many instances. With a view of this liability, the several reports from the same towns have always been compared, and the error of counting the same person more than once prevented.

To save the feelings of patients or friends who would be pained if their individual cases were told abroad, and to save the physicians from any violation of implied professional confidence, a pledge was given that none but the Commission should see the names of the persons reported. And in fulfilment of this promise, after the reports were compared and corrections made for the duplications, the names were erased.

As in sixteen towns in the State there are no physicians, letters were sent to the clergymen, on the supposition that they were acquainted with the condition of all the families; and also the overseers of the poor were asked to return the paupers; and besides these, the physicians of the neighboring towns who attended the sick in these places were especially asked to return any insane and idiots who might be in the families of the towns not their own.

Besides, similar letters and schedules were sent to the Superintendents of the Lunatic Hospitals in Worcester, Taunton, Somerville and Boston, to the officers of the county receptacles for the insane in Cambridge and Ipswich, and personal inquiry was made of the masters of all the Houses of Correction and Jails in the State, and of the proprietors of all the private houses or establishments devoted to the care of the insane, asking each to make a similar return of the lunatics and idiots under his care. And in order to complete this survey, letters were sent to officers of all the hospitals in the Northern and Middle, and some of the Southern States, asking them to make returns of all the insane patients belonging to Massachusetts who were intrusted to their charge.

By this means the Commissioners believed, that they should be able to reach nearly every insane and idiotic person who belonged to Massachusetts, and to reveal the sum of mental disorder or deficiency resting upon the children, citizens and wards of this Commonwealth, more completely than they could in any other way.

These letters were sent out in July and August, and were very kindly received. The physicians generally gave the work their ready sympathy and coöperation. The leading members of the medical profession encouraged and aided it. The Councillors of the Massachusetts Medical Society voted to approve the work and the plan of its operation, and advised all the members of the society to assist in the inquiry, and lend their influence to persuade all others to do the same. The County Societies which held their meetings within the period of this survey gave it their active assistance; and officers of every other society which did not meet gave their active and earnest help to this work within their respective spheres.

The Commissioners are also especially indebted to several physicians in the various parts of the State, who were indefatigable in their coöperation. They visited their neighboring towns; they wrote to, and used their personal influence with, the tardy brethren of their vicinity; and were ready to render any aid which the Commission, from time to time, might ask of them, to persuade the slow or the unwilling to answer the inquiry made of them.

Besides these, the Commission received assistance, from the hands of gentlemen out of the profession, in several towns where aid was wanted. And in all the towns, where their evidence seemed to be needed, the selectmen and the overseers of the poor rendered free and acceptable service in the work.

In the four western counties, and also in Worcester, Essex, Norfolk, Bristol, and in Barnstable County especially, the Commission received great aid from the newspapers, whose liberal editors urged upon the physicians and others to answer this call, and make complete returns of all the lunatics and idiots within their respective spheres of observation.

It was unfortunate for the immediate success of this inquiry that it was made in July, August and September, the most sickly season, when the physicians are the most intensely occupied and burdened with the greatest anxiety in the care of acute and dangerous diseases. Notwithstanding this, a great majority answered within the time prescribed; but yet there were many whose professional labors and cares prevented their doing so as early as was desired; and some thus overlooked and forgot the letter, and needed again to be reminded.

In order to create a further and more active interest in the work, one of the Commissioners visited the districts where new influence seemed to be needed, and had personal interviews with the physicians in sixty-four towns who had, thus far, failed to make the returns.

These circulars were sent to

Physicians within the State,	.	.	.	.	.	1,556
Clergymen,	.	.	.	.	.	20
Overseers of the Poor,	.	.	.	.	.	74
Selectmen,	.	.	.	.	.	4

Other gentlemen,	5
Superintendents of Hospitals and private establishments in the State,	6
Masters of County Receptacles, Houses of Correction, Jails, and State Almshouses,	11
Superintendents of Hospitals in other States,	14
Personal inquiry made of other Masters of Houses of Correction and Jailers,	12
	1,702

The names of the physicians were taken from the catalogues of the County Societies, and from the list in Mr. Adams's State Register, as furnished to him by the town clerks. But it was ascertained that two hundred and thirty-seven of these physicians were either dead, or not in practice, or had removed away, or were unreliable. From these, then, no answers were expected, leaving thirteen hundred and nineteen who had opportunities of observation, or whose testimony was reliable, and from whom reports were therefore desired.

All of these thirteen hundred and nineteen physicians, except four, made reports directly or indirectly to the Commission. Most of them reported singly; but in many towns two or more acted in concert, and sent their facts in one letter and through one of their number.

Two regular physicians only refused to make any report, and two irregular practitioners have neglected to make returns; but the fields of observation of all these gentlemen were very carefully examined by their more willing or more intelligent neighbors, and extraordinary pains were taken to obtain collateral information from the overseers of the poor and other municipal authorities; and thus their towns were thoroughly examined, and every lunatic and idiot within their borders is presumed to be returned.

Three or four of the clergymen had removed; but others of their own profession or the town authorities answered for them; the rest made the returns.

All the overseers of the poor answered except those in four

towns; in these the selectmen were addressed, and answers obtained.

In this survey the Commission placed their first and almost exclusive reliance on the physicians in the towns where they lived, and on the clergymen and overseers of the poor; but wherever there was any apparent deficiency, they sought information from other sources. After the medical returns had been made and the survey completed, the number of pauper idiots and lunatics thus received was compared with the State Report relating to the poor, published by the Secretary of State, and including the number of idiots and insane returned by the overseers of the poor, as relieved or supported within the year, and it was discovered that in forty-five towns the numbers in the overseers' report exceeded those in the medical returns. A new correspondence was then opened with these public functionaries, and resulted in the proof that, with the exception of four or five towns, the physicians had reported all the pauper insane and idiots that existed at the moment when they made their returns.

Notwithstanding the ready coöperation of a large part of the medical profession and the efficient aid rendered from others, yet it was necessary to write again and again to many, and to visit and confer with and persuade others, in various parts of the State, so that the returns were not all received until the end of December.

RELIABLENESS OF THE REPORTS.

The facts in respect to the number and condition of the insane and idiots in Massachusetts which have been received through these channels, and which are embodied in this report, derive an unquestionable authority from the number, character and position of the witnesses who have testified concerning them. These statements are not the estimates drawn from general observation, nor are they, either totally or in part, calculations founded on some facts; but they are the evidence of fourteen hundred and fifty-one witnesses, each of whom testified to that which he knew and spoke of that which he had seen. Where two or more reported the same cases independently of each other, there was such an agreement of statements as

manifested that honest and intelligent men had observed and were speaking of the same facts. Nearly all of these witnesses are the physicians who are living in every town and in almost every neighborhood. They understand the nature of defective or diseased minds, and are competent to testify. They are in the habit of frequent and familiar intercourse with the families, and have therefore the best possible opportunities of knowing the facts that are sought.

The testimony of these practitioners of medicine is aided and corroborated by the evidence of many others who had also opportunities of observation—clergymen, overseers of the poor, selectmen of some of the towns, and others whose position enabled them to know some cases of insanity and idiocy.

This Report of the lunacy and idiocy in Massachusetts may then be considered more complete than could be derived from any other sources and through any other channels. It may be, however, that some families have moved into the State or the towns of their present residence with an insane or idiotic member, and have had no occasion to call any physician since their present settlement, and therefore none of our witnesses have had opportunity of learning their facts. Yet these cases are very few, so few as not to vitiate the general accuracy of this Report.

It may then be confidently said that there are, at least, so many insane and idiots in the Commonwealth, and that our State and people have, at least, this amount of burden of insanity and idiocy resting upon them, and that herein is a safe basis of calculation of the amount of public and private responsibility for the restoration or protection of these unfortunate people among us.

NUMBER OF INSANE.

By these means, and with great correspondence, the Commission have ascertained that there were in the autumn of 1854, in the State of Massachusetts, two thousand six hundred and thirty-two lunatics, and ten hundred and eighty-seven idiots—making a total of three thousand seven hundred and nineteen of these persons who need the care and protection of their friends or of the public for their support, restoration or custody.

Of the Lunatics,

1,522 were paupers—693 State, and 829 Town, paupers.
1,110 were supported by their own property or by their friends.
—— 2,632

2,007 were natives.
625 were foreigners.
—— 2,632

435 were curable.
2,018 were incurable.
179 not stated.
—— 2,632

1,284 were at their homes or in town or city poorhouses.
1,141 were in Hospitals.
207 were in receptacles for the insane, in Houses of Correction, Jails and State Almshouses.
—— 2,632

Of the Idiots,

670 are supported by friends.
417 are supported by public treasury.
—— 1,087

1,043 are natives.
44 are foreigners.
—— 1,087

COMPARISON WITH OTHER ENUMERATIONS.

These results differ from those obtained from other surveys made for a similar purpose on the same grounds in Massachusetts, and from the statements made of the number of the insane and idiots, and their ratio to the whole population, obtained from inquiry, estimate, calculation, conjecture, &c., in other countries.

In 1848, a committee of the Legislature, appointed to “consider the whole subject connected with insanity within the

Commonwealth," ascertained and reported the number of insane in this State to be fifteen hundred and twelve, of whom two hundred and ninety-one were able to furnish the means of their own support, and eleven hundred and fifty-six were unable to do so, and the pecuniary condition of sixty-five was not ascertained.*

In making that survey in 1848, the Commissioners addressed their letters of inquiry "to the municipal authorities of every city and town in the Commonwealth."

These public officers had direct means of knowing the number and condition of the pauper insane, and probably this part of the report was complete; but they had no other facilities of knowing the condition of those lunatics who were in private families, and supported by their own property or by their friends, than other men not in office, and could only speak of those who were within their circle of personal acquaintance. Consequently the report included only a part of the independent insane who were then actually in, or belonged to, the State.

The marshals engaged in taking the national census in 1850, discovered and reported sixteen hundred and eighty lunatics and seven hundred and ninety-one idiots—in all, two thousand four hundred and seventy-one of both classes. It is probable that many of the families refused or neglected to report to these officers the insane and idiots who were within their households.

The census of Great Britain for 1851 gives only the pauper insane and idiots and those who are within the several public and private licensed lunatic asylums, and omits all others; and the ratio of these to the whole population is given.

In 1844, the British Lunatic Commissioners, in a report of great value on the state and progress of lunacy in England and Wales, made an elaborate statement of the number of lunatics within the kingdom; but this included only the paupers and the patients in all kinds of public and private establishments for them, and those others who were not paupers,

* Senate Document No. 9, 1849, pages 6, 7.

but under commission—that is, under the guardianship of the Lord Chancellor.

This report did not “include a considerable class of insane persons of all ranks of life under the care of guardians and relations;” * and of course all those who were not paupers, and who were at their homes, or boarding with friends or in private families, were omitted.

An enumeration of the people of France was made within a few years. The facts were sought with great apparent care by the agents of the government, and the results published under its authority, aided by the counsel of men of science. Seventy pages of a folio volume are exclusively devoted to the statement of the number and condition of the insane in every department, in each of the seven years, from 1836 to 1841 inclusive. This would seem to be a perfectly reliable document; yet a careful analysis suggests some doubt as to its accuracy.

Of the eighty-six departments into which the kingdom is divided, eleven return no lunatics through all of these seven years. Sixty-five return none at their homes or boarding in private families. Some report them in round numbers in even hundreds. Others report the same unvarying number through successive years. One reports two hundred for seven successive years, and another three hundred through six years, without variation. In one, the number increases, in two years, twenty-five hundred per cent., and diminishes as much in four years more. These and many similar statements, equally improbable and unnatural, lead to the inference that they were founded upon estimate, and even conjecture, rather than on personal inquiry and actual enumeration.

In some nations, the statement of the number of the insane includes only those in the public hospitals. A writer in the *American Medical Journal* assumes this ground to determine the number of insane in some parts of Italy, several of the large cities of Europe and Cairo, and calculates the proportion of lunacy to their several people on this basis.

A census of lunacy in Belgium, apparently taken from actual

* Report of Metropolitan Commission in Lunacy for 1844, page 182.

enumeration, is published in the report of the commissioners appointed to inquire into the means of ameliorating the condition of the insane. This report is complete, and perfectly reliable as a matter of fact and as a basis of calculation.

POPULATION OF MASSACHUSETTS IN 1854.

In order to show the ratio of lunatics and idiots to the existing population, the Commissioners caused the population of each town and county to be determined by logarithmic calculations, and this is included in some of the tables of this Report.*

NUMBER OF INSANE IN TOWNS.

The reports received from the physicians, overseers of the poor, and others, have been carefully analyzed, and their facts reduced to their appropriate heads and presented in the several tables which are incorporated into this Report.

The first table shows, in regard to each town, city and county in the State, the calculated population and the number of lunatics, distinguishing the independent from the pauper, the native from the foreigner, those at home from those in hospitals, receptacles, &c., and the curable from the incurable.

* The calculation is based on the census of 1840 and that of 1850. From these the rate of increase is determined, which is supposed to continue the same from 1850 to 1854.

Several new towns have been incorporated or divided subsequent to 1840. In these one of the primary facts was lost; and they are left blank, except that in a few an especial enumeration of the inhabitants was made, which was sufficient for this purpose.

TABLE I.—LUNATICS IN MASSACHUSETTS.

BERKSHIRE COUNTY.

TOWNS.	Population, 1854.	Pecuniary Condition.		Nativity.		Prospect.			Where.		Total.
		Independent.	Pauper.	American.	Foreign.	Curable.	Incurable.	Not stated.	At home.	In hospital, &c.	
Adams, . . .	7,574	3	2	5	—	2	3	—	4	1	5
Alford, . . .	510	—	1	1	—	—	—	1	1	—	1
Becket, . . .	1,190	2	1	3	—	1	2	—	3	—	3
Cheshire, . . .	1,450	2	1	3	—	—	3	—	2	1	3
Clarksburg, . . .	390	—	1	1	—	—	1	—	—	1	1
Dalton, . . .	948	—	—	—	—	—	—	—	—	—	—
Egremont, . . .	1,003	—	—	—	—	—	—	—	—	—	—
Florida, . . .	618	3	2	5	—	3	2	—	4	1	5
Gt. Barrington, . . .	3,519	3	4	6	1	2	5	—	5	2	7
Hancock, . . .	741	1	—	1	—	—	1	—	1	—	1
Hinsdale, . . .	1,397	1	2	3	—	—	3	—	3	—	3
Lanesboro', . . .	1,267	3	—	3	—	1	1	1	3	—	3
Lee, . . .	3,604	9	—	9	—	5	4	—	9	—	9
Lenox, . . .	1,730	3	4	7	—	1	6	—	3	4	7
Monterey, . . .	682	5	—	5	—	—	1	4	5	—	5
Mt. Washington, . . .	321	1	—	1	—	—	1	—	1	—	1
New Ashford, . . .	172	—	—	—	—	—	—	—	—	—	—
New Marlboro', . . .	1,918	5	5	9	1	3	7	—	8	2	10
Otis, . . .	1,243	—	1	1	—	—	1	—	—	1	1

BERKSHIRE—CONTINUED.

TOWNS.	Population, 1854.	Pecuniary Condition.		Nativity.		Prospect.			Where.		Total.
		Independent.	Pauper.	American.	Foreign.	Curable.	Incurable.	Not stated.	At home.	In hospital, &c.	
Peru, . . .	498	1	—	1	—	—	1	—	1	—	1
Pittsfield, . .	7,025	10	9	17	2	8	10	1	14	5	19
Richmond, . .	841	3	1	4	—	1	3	—	3	1	4
Sandisfield, . .	1,730	2	2	4	—	—	4	—	4	—	4
Savoy, . . .	971	—	2	2	—	—	2	—	1	1	2
Sheffield, . .	2,971	2	3	5	—	—	5	—	3	2	5
Stockbridge, . .	1,920	1	1	2	—	—	—	2	1	1	2
Tyringham, . .	844	—	—	—	—	—	—	—	—	—	—
Washington, . .	938	2	—	2	—	1	1	—	2	—	2
W. Stockbridge, .	1,833	1	1	2	—	—	—	2	2	—	2
Williamstown, . .	2,847	6	4	8	2	—	10	—	6	4	10
Windsor, . . .	897	2	1	3	—	—	3	—	3	—	3
Totals, . . .	—	71	48	113	6	28	80	11	92	27	119

FRANKLIN COUNTY.

Ashfield, . . .	1,316	1	2	3	—	—	3	—	1	2	3
Bernardston, . .	913	2	—	2	—	—	2	—	2	—	2
Buckland, . . .	1,045	1	3	4	—	—	4	—	4	—	4
Charlemont, . .	1,182	1	4	4	1	—	5	—	3	2	5
Coleraine, . . .	1,701	1	1	2	—	1	1	—	2	—	2
Conway, . . .	2,031	1	—	1	—	—	1	—	1	—	1

FRANKLIN—CONTINUED.

TOWNS.	Population, 1854.	Pecuniary Condition.		Nativity.		Prospect.			Where.		Total.
		Independent.	Pauper.	American.	Foreign.	Curable.	Incurable.	Not stated.	At home.	In hospital' &c.	
Deerfield, . . .	2,635	5	5	10	—	3	7	—	7	3	10
Erving, . . .	521	—	—	—	—	—	—	—	—	—	—
Gill, . . .	737	1	2	3	—	1	2	—	3	—	3
Greenfield, . . .	3,009	—	2	2	—	—	2	—	—	2	2
Hawley, . . .	845	—	3	3	—	—	3	—	2	1	3
Heath, . . .	769	—	2	2	—	1	1	—	2	—	2
Leverett, . . .	980	1	4	5	—	1	4	—	5	—	5
Leyden, . . .	753	2	2	4	—	—	3	1	4	—	4
Monroe, . . .	244	1	—	1	—	1	—	—	1	—	1
Montague, . . .	1,638	1	5	6	—	1	3	2	6	—	6
New Salem, . . .	1,234	1	3	4	—	—	—	4	4	—	4
Northfield, . . .	1,817	1	1	2	—	—	2	—	1	1	2
Orange, . . .	1,790	3	—	3	—	—	3	—	3	—	3
Rowe, . . .	641	—	—	—	—	—	—	—	—	—	—
Shelburne, . . .	1,336	1	3	4	—	—	4	—	2	2	4
Shutesbury, . . .	876	4	2	6	—	—	5	1	6	—	6
Sunderland, . . .	820	1	—	1	—	—	—	1	1	—	1
Warwick, . . .	1,002	1	2	3	—	—	3	—	1	2	3
Wendell, . . .	935	1	1	2	—	—	2	—	2	—	2
Whately, . . .	1,113	6	—	5	1	1	5	—	5	1	6
Totals, . . .	—	37	47	82	2	10	65	9	68	16	84

HAMPSHIRE COUNTY.

TOWNS.	Population, 1854.	Pecuniary Condition.		Nativity.		Prospect.			Where.		Total.
		Independent.	Pauper.	American.	Foreign.	Curable.	Incurable.	Not stated.	At home.	In hospital, &c.	
Amherst, . .	3,162	6	3	9	-	1	8	-	7	2	9
Belchertown, .	2,727	3	1	4	-	-	1	3	3	1	4
Chesterfield, .	970	-	1	1	-	-	1	-	-	1	1
Cummington, .	1,147	-	3	3	-	-	3	-	2	1	3
Easthampton, .	1,723	1	1	2	-	1	-	1	2	-	2
Enfield, . .	1,060	2	1	3	-	-	3	-	3	-	3
Goshen, . .	495	1	1	2	-	-	2	-	2	-	2
Granby, . .	1,160	1	1	2	-	1	1	-	1	1	2
Greenwich, . .	844	1	4	5	-	-	3	2	5	-	5
Hadley, . .	2,061	-	3	2	1	-	3	-	1	2	3
Hatfield, . .	1,136	5	2	7	-	-	2	5	5	2	7
Middlefield, .	526	-	2	2	-	-	2	-	2	-	2
Northampton, .	6,050	11	10	17	4	2	17	2	12	9	21
Norwich, . .	758	-	1	1	-	-	1	-	1	-	1
Pelham, . .	994	1	-	1	-	1	-	-	1	-	1
Plainfield, . .	779	4	2	6	-	1	5	-	6	-	6
Prescott, . .	720	1	1	2	-	-	2	-	1	1	2
Southampton, .	1,023	2	1	3	-	-	3	-	3	-	3
South Hadley, .	3,099	1	-	1	-	1	-	-	-	1	1
Ware, . .	4,989	7	3	9	1	1	9	-	9	1	10
Westhampton, .	549	3	-	3	-	-	3	-	2	1	3
Williamsburg, .	1,639	-	2	2	-	-	2	-	2	-	2
Worthington, .	1,110	-	1	1	-	-	1	-	1	-	1
Totals, . .	-	50	44	88	6	9	72	13	71	23	94

HAMPDEN COUNTY.

TOWNS.	Population, 1854.	Pecuniary Condition.		Nativity.		Prospect.			Where.		Total.
		Independent.	Pauper.	American.	Foreign.	Curable.	Incurable.	Not stated.	At home.	In hospital, &c.	
Blandford, . . .	1,414	1	-	1	-	-	-	1	1	-	1
Brimfield, . . .	1,421	-	1	1	-	-	1	-	1	-	1
Chester, . . .	1,479	1	5	6	-	1	5	-	4	2	6
Chicopee, . . .	-	1	3	3	1	-	3	1	2	2	4
Granville, . . .	1,264	10	2	12	-	2	9	1	11	1	12
Holland, . . .	460	-	1	1	-	-	1	-	1	-	1
Holyoke, . . .	-	3	3	4	2	1	4	1	4	2	6
Longmeadow, . .	1,245	6	2	7	1	2	4	2	6	2	8
Ludlow, . . .	1,155	-	-	-	-	-	-	-	-	-	-
Monson, . . .	3,169	1	3	4	-	-	4	-	4	-	4
Montgomery, . .	305	-	-	-	-	-	-	-	-	-	-
Palmer, . . .	5,088	2	-	2	-	-	2	-	2	-	2
Russell, . . .	409	-	-	-	-	-	-	-	-	-	-
Southwick, . . .	1,084	3	2	5	-	1	4	-	4	1	5
Springfield, . .	-	16	15	23	8	9	21	1	15	16	31
Tolland, . . .	581	-	1	1	-	-	1	-	1	-	1
Wales, . . .	721	-	2	2	-	-	1	1	2	-	2
Westfield, . . .	4,475	8	4	10	2	1	8	3	9	3	12
W. Springfield, .	-	3	3	6	-	-	6	-	4	2	6
Wilbraham, . . .	2,242	2	1	3	-	-	2	1	2	1	3
Totals, . . .	-	57	48	91	14	17	76	12	73	32	105

WORCESTER COUNTY.

TOWNS.	Population, 1854.	Pecuniary Condition.		Nativity.		Prospect.			Where.		Total.
		Independent.	Pauper.	American.	Foreign.	Curable.	Incurable.	Not stated.	At home.	In hospital, &c.	
Ashburnham, .	1,972	-	3	3	-	-	3	-	3	-	3
Athol, . . .	2,368	-	4	4	-	-	4	-	2	2	4
Auburn, . . .	992	-	1	-	1	-	1	-	1	-	1
Barre, . . .	3,071	-	3	3	-	-	3	-	3	-	3
Berlin, . . .	920	2	1	3	-	-	3	-	1	2	3
Blackstone, . .	5,945	5	9	7	7	3	11	-	6	8	14
Bolton, . . .	1,296	-	1	1	-	-	1	-	-	1	1
Boylston, . . .	971	1	1	2	-	-	2	-	1	1	2
Brookfield, . .	-	5	3	8	-	-	8	-	6	2	8
Charlton, . . .	1,977	3	2	5	-	-	5	-	4	1	5
Clinton, . . .	-	-	3	-	3	-	3	-	1	2	3
Dana, . . .	911	1	-	1	-	1	-	-	1	-	1
Douglas, . . .	1,991	6	6	11	1	-	6	6	12	-	12
Dudley, . . .	1,481	2	1	3	-	1	2	-	2	1	3
Fitchburg, . . .	6,712	4	7	10	1	3	8	-	7	4	11
Gardner, . . .	1,658	4	-	4	-	3	1	-	2	2	4
Grafton, . . .	4,373	5	4	9	-	2	7	-	2	7	9
Hardwick, . . .	1,572	-	4	4	-	2	1	1	4	-	4
Harvard, . . .	1,654	7	3	9	1	3	6	1	8	2	10
Holden, . . .	1,954	2	2	4	-	-	4	-	3	1	4
Hubbardston, . .	1,841	2	1	3	-	-	3	-	3	-	3
Lancaster, . . .	-	2	2	3	1	-	4	-	2	2	4
Leicester, . . .	2,543	1	7	7	1	-	7	1	6	2	8

WORCESTER—CONTINUED.

TOWNS.	Population, 1854.	Pecuniary Condition.		Nativity.		Prospect.			Where.		Total.
		Independent.	Pauper.	American.	Foreign.	Curable.	Incurable.	Not stated.	At home.	In hospital, &c.	
Leominster, . .	3,679	17	1	18	—	2	16	—	18	—	18
Lunenburg, . .	1,240	—	8	8	—	—	8	—	8	—	8
Mendon, . .	1,420	3	2	4	1	—	5	—	3	2	5
Milford, . .	7,178	5	7	7	5	3	9	—	5	7	12
Millbury, . .	3,542	—	2	—	2	—	2	—	—	2	2
New Braintree, .	896	—	2	2	—	—	2	—	2	—	2
Northboro', . .	1,667	1	4	4	1	2	3	—	3	2	5
Northbridge, . .	2,639	2	4	6	—	—	5	1	3	3	6
North Brookfield, .	2,158	1	3	4	—	—	4	—	2	2	4
Oakham, . .	1,180	3	—	3	—	—	1	2	3	—	3
Oxford, . .	2,695	2	6	8	—	—	8	—	7	1	8
Paxton, . .	928	1	—	1	—	—	1	—	—	1	1
Petersham, . .	1,373	5	2	7	—	—	5	2	7	—	7
Phillipston, . .	769	2	1	3	—	—	3	—	2	1	3
Princeton, . .	1,307	2	1	3	—	1	2	—	1	2	3
Royalston, . .	1,500	—	1	1	—	—	—	1	1	—	1
Rutland, . .	1,208	4	—	4	—	2	2	—	4	—	4
Shrewsbury, . .	1,644	9	2	10	1	2	7	2	8	3	11
Southboro', . .	1,432	—	1	1	—	—	1	—	1	—	1
Southbridge, . .	3,222	2	2	4	—	2	1	1	3	1	4
Spencer, . .	2,565	6	1	7	—	2	5	—	5	2	7
Sterling, . .	1,872	4	3	7	—	1	6	—	5	2	7
Sturbridge, . .	2,168	5	3	8	—	1	7	—	4	4	8

WORCESTER—CONTINUED.

TOWNS.	Population, 1854.	Pecuniary Condition.		Nativity.		Prospect.			Where.		Total.
		Independent.	Pauper.	American.	Foreign.	Curable.	Incurable.	Not stated.	At home.	In hospital, &c.	
Sutton, . . .	2,690	4	2	6	—	—	6	—	3	3	6
Templeton, . . .	2,355	—	2	1	1	—	2	—	1	1	2
Upton, . . .	2,302	3	4	7	—	—	3	4	6	1	7
Uxbridge, . . .	2,644	2	4	4	2	3	3	—	4	2	6
Warren, . . .	2,020	5	1	6	—	1	5	—	4	2	6
Webster, . . .	2,921	4	1	5	—	1	4	—	5	—	5
Westboro', . . .	2,736	7	2	9	—	—	7	2	6	3	9
W. Boylston, . . .	2,042	3	3	5	1	—	6	—	3	3	6
W. Brookfield, . . .	—	1	1	2	—	—	2	—	1	1	2
Westminster, . . .	2,034	—	2	2	—	—	2	—	2	—	2
Winchendon, . . .	2,792	5	6	11	—	1	9	1	11	—	11
Worcester, . . .	23,694	13	26	19	20	7	30	2	4	35	39
Totals, . . .	—	173	178	301	50	49	275	27	225	126	351

MIDDLESEX COUNTY.

Acton, . . .	1,853	6	1	7	—	1	1	5	6	1	7
Ashby, . . .	1,193	1	1	2	—	—	2	—	1	1	2
Ashland, . . .	1,375	4	2	6	—	—	6	—	3	3	6
Bedford, . . .	994	1	—	1	—	—	1	—	—	1	1
Billerica, . . .	1,652	3	6	9	—	—	8	1	7	2	9
Boxboro', . . .	383	1	1	2	—	—	2	—	1	1	2

MIDDLESEX—CONTINUED.

TOWNS.	Population, 1884.	Pecuniary Condition.		Nativity.		Prospect.			Where.		Total.
		Independent.	Pauper.	American.	Foreign.	Curable.	Incurable.	Not stated.	At home.	In hospital, &c.	
Brighton, . . .	2,881	—	1	1	—	—	1	—	1	—	1
Burlington, . . .	560	—	1	1	—	—	1	—	1	—	1
Cambridge, . . .	19,286	11	8	12	7	2	17	—	2	17	19
Carlisle, . . .	665	—	1	1	—	—	1	—	1	—	1
Charlestown, . . .	20,238*	17	26	31	12	4	38	1	14	29	43
Chelmsford, . . .	2,282	9	3	12	—	2	10	—	7	5	12
Concord, . . .	2,468	4	2	6	—	1	5	—	4	2	6
Dracut, . . .	4,228	3	3	6	—	2	3	1	3	3	6
Dunstable, . . .	585	—	—	—	—	—	—	—	—	—	—
Framingham, . . .	5,079	2	5	7	—	1	6	—	5	2	7
Groton, . . .	2,683	3	5	7	1	1	7	—	4	4	8
Holliston, . . .	2,814	5	3	7	1	2	5	1	5	3	8
Hopkinton, . . .	3,548	—	2	2	—	—	2	—	2	—	2
Lexington, . . .	2,004	6	3	9	—	1	8	—	8	1	9
Lincoln, . . .	733	—	3	3	—	—	1	2	3	—	3
Littleton, . . .	1,012	2	1	3	—	1	2	—	2	1	3
Lowell, . . .	40,349	17	6	16	7	8	14	1	12	11	23
Malden, . . .	4,028†	7	1	8	—	1	4	3	7	1	8
Marlboro', . . .	3,365	3	2	4	1	1	3	1	4	1	5
Medford, . . .	4,424	10	1	11	—	1	10	—	4	7	11
Melrose, . . .	—	1	—	—	1	1	—	—	1	—	1
Natick, . . .	3,717	—	2	2	—	—	1	1	2	—	2
Newton, . . .	6,296	4	3	4	3	3	3	1	3	4	7

* Including most of Somerville.

† Including Melrose.

MIDDLESEX—CONTINUED.

TOWNS.	Population, 1854.	Pecuniary Condition.		Nativity.		Prospect.			Where.		Total.
		Independent.	Pauper.	American.	Foreign.	Curable.	Incurable.	Not stated.	At home.	In hospital, &c.	
North Reading, .	-	-	1	1	-	-	1	-	1	-	1
Pepperell, . .	1,833	3	3	6	-	2	4	-	6	-	6
Reading, . .	3,573*	3	4	7	-	2	5	-	6	1	7
Sherborn, . .	1,063	2	2	4	-	-	4	-	3	1	4
Shirley, . .	1,250	3	1	4	-	1	2	1	3	1	4
Somerville, . .	-	4	3	5	2	-	5	2	3	4	7
South Reading, .	2,895	1	-	1	-	-	1	-	-	1	1
Stoneham, . .	2,779	2	1	3	-	-	3	-	2	1	3
Stowe, . .	1,556	3	1	4	-	2	1	1	3	1	4
Sudbury, . .	1,645	5	-	5	-	2	3	-	4	1	5
Tewksbury, . .	1,105	1	-	1	-	1	-	-	1	-	1
Townsend, . .	1,969	3	2	5	-	2	2	1	5	-	5
Tyngsboro', . .	772	1	1	2	-	-	2	-	1	1	2
Waltham, . .	5,625	2	3	3	2	2	3	-	1	4	5
Watertown, . .	3,396	-	6	2	4	3	3	-	4	2	6
Wayland, . .	1,166	1	2	3	-	-	3	-	3	-	3
W. Cambridge, .	2,668	4	5	8	1	-	9	-	5	4	9
Westford, . .	1,660	2	1	3	-	-	2	1	3	-	3
Weston, . .	1,123	-	-	-	-	-	-	-	-	-	-
Wilmington, . .	880	1	-	1	-	1	-	-	1	-	1
Winchester, . .	-	2	-	2	-	1	1	-	-	2	2
Woburn, . .	4,423†	1	1	1	1	1	1	-	1	1	2
Totals, . .	-	164	128	249	43	53	215	24	169	123	292

* Including North Reading.

† Including a part of Winchester.

ESSEX COUNTY.

TOWNS.	Population, 1854.	Pecuniary Condition.		Nativity.		Prospect.			Where.		Total.
		Independent.	Pauper.	American.	Foreign.	Curable.	Incurable.	Not stated.	At home.	In hospital, &c.	
Amesbury, . . .	3,461	1	6	7	-	-	6	1	3	4	7
Andover, . . .	7,793	5	9	11	3	3	10	1	10	4	14
Beverly, . . .	5,678	9	15	24	-	-	16	8	18	6	24
Boxford, . . .	999	1	4	5	-	-	3	2	5	-	5
Bradford, . . .	2,798*	-	1	1	-	-	1	-	1	-	1
Danvers, . . .	9,823	7	11	15	3	6	12	-	9	9	18
Essex, . . .	1,642	4	1	5	-	-	4	1	2	3	5
Georgetown, . .	2,301	2	3	4	1	-	2	3	3	2	5
Gloucester, . .	8,448	6	11	16	1	2	15	-	13	4	17
Groveland, . . .	-	-	1	1	-	1	-	-	1	-	1
Hamilton, . . .	919	8	-	8	-	-	8	-	5	3	8
Haverhill, . . .	6,637	9	7	14	2	1	14	1	12	4	16
Ipswich, . . .	3,500	2	11	7	6	2	11	-	3	10	13
Lawrence, . . .	17,678	-	9	2	7	6	3	-	7	2	9
Lynn, . . .	16,601†	6	16	17	5	2	19	1	8	14	22
Lynnfield, . . .	2,461	-	1	1	-	-	1	-	-	1	1
Manchester, . . .	1,767	4	3	6	1	1	6	-	5	2	7
Marblehead, . .	6,421	16	9	25	-	4	21	-	17	8	25
Methuen, . . .	2,663	4	-	4	-	1	3	-	3	1	4
Middleton, . . .	914	1	2	3	-	-	3	-	2	1	3
Nahant, . . .	266	-	-	-	-	-	-	-	-	-	-
Newbury, . . .	4,710†	-	1	-	1	-	1	-	-	1	1
Newburyport, . .	10,750†	18	6	20	4	5	18	1	13	11	24

* Including Groveland. † Including Swampscott.

‡ A part of Newbury was set off to Newburyport, including, by estimate, about 2,200 people. These should be included in Newburyport.

ESSEX—CONTINUED.

TOWNS.	Population, 1854.	Pecuniary Condition.		Nativity.		Prospect.			Where.		Total.
		Independent.	Pauper.	American.	Foreign.	Curable.	Incurable.	Not stated.	At home.	In hospital, &c.	
Rockport, . . .	3,563	1	—	1	—	—	—	1	1	—	1
Rowley, . . .	1,028	1	—	1	—	—	1	—	—	1	1
Salem, . . .	22,805	25	30	46	9	5	48	2	22	33	55
Salisbury, . . .	3,257	3	1	4	—	—	4	—	2	2	4
Saugus, . . .	1,782	5	4	7	2	—	8	1	4	5	9
Swampscott, . . .	—	—	—	—	—	—	—	—	—	—	—
Topsfield, . . .	1,218	1	5	6	—	1	5	—	5	1	6
Wenham, . . .	1,124	2	—	2	—	—	2	—	2	—	2
W. Newbury, . . .	1,827	1	—	1	—	—	1	—	—	1	1
Totals, . . .	—	142	167	264	45	40	246	23	176	133	309

SUFFOLK COUNTY.

Boston, . . .	167,248	105	337	196	246	80	356	6	22	420	442
Chelsea, . . .	12,151	5	7	10	2	5	4	3	5	7	12
Totals, . . .	—	110	344	206	248	85	360	9	27	427	454

NORFOLK COUNTY.

Bellingham, . . .	1,384	4	2	5	1	4	2	—	5	1	6
Braintree, . . .	3,364	13	8	20	1	1	17	3	19	2	21
Brookline, . . .	3,212	10	2	11	1	3	9	—	9	3	12

NORFOLK—CONTINUED.

TOWNS.	Population, 1854.	Pecuniary Condition.		Nativity.		Prospect.			Where.		Total.
		Independent.	Pauper.	American.	Foreign.	Curable.	Incurable.	Not stated.	At home.	In hospital, &c.	
Canton, . . .	2,287	6	3	8	1	1	5	3	7	2	9
Cohasset, . . .	1,913	6	3	9	—	2	7	—	6	3	9
Dedham, . . .	5,017	12	4	13	3	5	11	—	8	8	16
Dorchester, . . .	9,700	12	12	19	5	4	18	2	11	13	24
Dover, . . .	682	1	—	1	—	—	1	—	—	1	1
Foxboro', . . .	2,180	2	5	6	1	2	5	—	4	3	7
Franklin, . . .	1,860	2	1	3	—	—	3	—	3	—	3
Medfield, . . .	1,001	2	4	6	—	—	6	—	3	3	6
Medway, . . .	3,142	2	1	3	—	—	3	—	3	—	3
Milton, . . .	2,434	6	1	7	—	—	7	—	4	3	7
Needham, . . .	2,163	3	2	4	1	1	4	—	2	3	5
Quincy, . . .	5,803	5	8	9	4	3	10	—	3	10	13
Randolph, . . .	5,544	5	2	6	1	—	7	—	4	3	7
Roxbury, . . .	25478*	17	27	24	20	11	33	—	2	42	44
Sharon, . . .	1,150	1	1	2	—	—	2	—	2	—	2
Stoughton, . . .	4,249	3	5	5	3	—	7	1	3	5	8
Walpole, . . .	2,168	4	—	4	—	2	2	—	4	—	4
West Roxbury, . . .	—	3	1	3	1	4	—	—	1	3	4
Weymouth, . . .	6,206	9	8	16	1	5	11	1	9	8	17
Wrentham, . . .	3,087	7	4	9	2	3	8	—	5	6	11
Totals, . . .	—	131	104	193	46	51	178	10	117	122	239

* Including West Roxbury.

BRISTOL COUNTY.

TOWNS.	Population, 1854.	Pecuniary Condition.		Nativity.		Prospect.			Where.		Total.
		Independent.	Pauper.	American.	Foreign.	Curable.	Incurable.	Not stated.	At home.	In hospital, &c.	
Attleboro', . .	4,475	1	5	5	1	2	1	3	3	3	6
Berkley, . .	917	2	2	4	—	2	2	—	2	2	4
Dartmouth, . .	3,766	2	2	4	—	—	4	—	2	2	4
Dighton, . .	1,760	—	2	2	—	—	1	1	2	—	2
Easton, . .	2,451	5	3	6	2	2	6	—	6	2	8
Fairhaven, . .	4,454	5	5	10	—	6	4	—	7	3	10
Fall River, . .	14,279	8	9	10	7	4	10	3	7	10	17
Freetown, . .	1,556	2	1	3	—	—	1	2	3	—	3
Mansfield, . .	1,984	3	3	5	1	2	4	—	5	1	6
New Bedford, . .	18,597	13	14	25	2	4	19	4	16	11	27
Norton, . .	2,165	4	—	4	—	—	4	—	4	—	4
Pawtucket, . .	4,660	2	2	4	—	—	4	—	4	—	4
Raynham, . .	1,635	1	2	3	—	—	3	—	2	1	3
Rehoboth, . .	2,079	—	—	—	—	—	—	—	—	—	—
Seekonk, . .	2,350	2	2	4	—	2	2	—	3	1	4
Somerset, . .	1,237	2	1	3	—	1	2	—	—	3	3
Swanzey, . .	1,583	3	—	3	—	1	2	—	3	—	3
Taunton, . .	11,826	12	19	25	6	8	23	—	16	15	31
Westport, . .	2,785	5	7	12	—	4	8	—	10	2	12
Totals, . .	—	72	79	132	19	38	100	13	95	56	151

PLYMOUTH COUNTY.

TOWNS.	Population, 1854.	Pecuniary Condition.		Nativity.		Prospect.			Where.		Total.
		Independent.	Pauper.	American.	Foreign.	Curable.	Incurable.	Not stated.	At home.	In hospital, &c.	
Abington, . . .	6,421	3	3	6	-	1	4	1	5	1	6
Bridgewater, . .	3,108	3	8	6	5	3	7	1	3	8	11
Carver, . . .	1,272	3	2	5	-	1	4	-	5	-	5
Duxbury, . . .	2,633	3	7	10	-	2	7	1	6	4	10
E. Bridgewater, .	2,831	1	4	4	1	-	5	-	5	-	5
Halifax, . . .	805	-	-	-	-	-	-	-	-	-	-
Hanover, . . .	1,636	1	-	1	-	-	1	-	1	-	1
Hanson, . . .	1,296	4	-	4	-	2	2	-	3	1	4
Hingham, . . .	4,160	3	15	16	2	1	16	1	15	3	18
Hull, . . .	262	-	-	-	-	-	-	-	-	-	-
Kingston, . . .	1,656	2	3	5	-	-	5	-	1	4	5
Lakeville, . . .	1,105	1	2	3	-	-	2	1	3	-	3
Marion, . . .	-	1	-	1	-	1	-	-	1	-	1
Marshfield, . . .	1,868	3	2	5	-	1	4	-	3	2	5
Middleboro', . .	4,335	7	5	12	-	4	8	-	11	1	12
N. Bridgewater, .	4,640	1	-	1	-	-	-	1	1	-	1
Pembroke, . . .	1,443	-	3	3	-	-	3	-	3	-	3
Plymouth, . . .	6,350	6	15	21	-	2	18	1	5	16	21
Plympton, . . .	967	2	1	3	-	-	-	3	3	-	3
Rochester, . . .	3,786*	5	5	10	-	-	10	-	6	4	10
Scituate, . . .	2,156	3	-	3	-	2	1	-	3	-	3
South Scituate, .	1,776	-	3	3	-	-	3	-	3	-	3

* Including Marion.

PLYMOUTH—CONTINUED.

TOWNS.	Population, 1854.	Pecuniary Condition.		Nativity.		Prospect.			Where.		Total.
		Independent.	Pauper.	American.	Foreign.	Curable.	Incurable.	Not stated.	At home.	In hospital, &c.	
Wareham, . . .	3,837	3	—	3	—	—	3	—	3	—	3
W. Bridgewater, . .	1,559	2	4	6	—	1	3	2	5	1	6
Totals, . . .	—	57	82	131	8	21	106	12	94	45	139

BARNSTABLE COUNTY.

Barnstable, . . .	5,164	8	9	17	—	6	9	2	12	5	17
Brewster, . . .	1,526	1	—	1	—	1	—	—	1	—	1
Chatham, . . .	2,482	1	2	3	—	—	3	—	1	2	3
Dennis, . . .	3,392	1	3	4	—	1	3	—	3	1	4
Eastham, . . .	805	1	—	1	—	—	1	—	1	—	1
Falmouth, . . .	2,634	2	3	5	—	—	5	—	4	1	5
Harwich, . . .	3,399	5	4	9	—	5	1	3	8	1	9
Orleans, . . .	1,800	2	5	7	—	—	6	1	7	—	7
Provincetown, . .	3,701	2	—	2	—	1	1	—	1	1	2
Sandwich, . . .	4,658	2	6	6	2	—	5	3	3	5	8
Truro, . . .	2,106	1	1	2	—	—	2	—	1	1	2
Wellfleet, . . .	2,425	4	3	7	—	2	3	2	6	1	7
Yarmouth, . . .	2,611	1	10	11	—	2	9	—	11	—	11
Totals, . . .	—	31	46	75	2	18	48	11	59	18	77

NANTUCKET COUNTY.

TOWNS.	Population, 1854.	Pecuniary Condition.		Nativity.		Prospect.			Where.		Total.
		Independent.	Pauper.	American.	Foreign.	Curable.	Incurable.	Not stated.	At home.	In hospital, &c.	
Nantucket, . .	8,238	3	9	10	2	1	10	1	3	9	12

DUKES COUNTY.

Chilmark, . .	766	1	-	1	-	-	1	-	1	-	1
Edgartown, . .	2,102	3	8	11	-	3	8	-	8	3	11
Tisbury, . .	1,930	4	3	6	1	2	5	-	6	1	7
Totals, . .	-	8	11	18	1	5	14	-	15	4	19

This table shows the number and distribution of the insane in the towns of Massachusetts, and that some are to be found almost everywhere, as only nineteen small towns are exempt from them.

This table does not include many in Receptacles, Prisons, &c., who are referred to, and belong to no town.

The condition and prospect of the lunatics may be found from the following table.

TABLE II.—LUNATICS.

COUNTIES.	SEX.		CONDITION.*				PROSPECT.			Total.	Subject for hospital.
	Male.	Female.	Mild—manageable.	Troublesome—excitable	Furious—dangerous.	Not stated.	Curable.	Incurable.	Not stated.		
Berkshire, . . .	63	56	52	51	11	5	28	80	11	119	69
Franklin, . . .	42	42	52	23	8	1	10	65	9	84	44
Hampshire, . . .	46	48	49	33	6	6	9	72	13	94	41
Hampden, . . .	42	63	50	45	7	3	17	76	12	105	59
Worcester, . . .	168	183	152	143	39	17	50	275	26	351	216
Middlesex, . . .	184	173	174	125	46	12	56	277	24	357	214
Essex, . . .	191	186	141	187	45	4	43	311	23	377	167
Suffolk, . . .	182	276	186	237	28	7	87	362	9	458	446
Norfolk, . . .	122	119	147	73	18	3	52	178	11	241	183
Bristol, . . .	82	76	88	50	20	—	35	108	15	158	105
Plymouth, . . .	69	70	78	53	7	1	21	106	12	139	82
Barnstable, . . .	31	47	42	18	14	4	18	49	11	78	42
Nantucket, . . .	4	8	6	5	1	—	1	10	1	12	11
Dukes, . . .	10	9	7	8	4	—	5	14	—	19	16
Not stated, . . .	18	22	14	16	9	1	3	35	2	40	17
Totals, . . .	1254	1378	1238	1067	263	64	435	2018	179	2632	1713

* The physicians and other reporters were requested to state, in respect to each patient, whether he was mild, manageable, excitable, troublesome, furious or dangerous. These are condensed, in this table, into three classes, which will sufficiently show their condition and liability.

This table exhibits the precise amount and condition of the burden of insanity, and shows where it lies. This includes all that live in, or belong to, the several counties—both those at home and those who are in the hospitals, receptacles, houses of correction, jails, and towns or State Almshouses. It includes both the independent and the pauper—the native and the foreign insane. Several in the hospitals, State Almshouses, and State Prisons have no home in any county. These are in a separate column under the head—*not stated*.

The third column includes those who are quiet and harmless, who can ordinarily be kept at their homes and be watched and guided by their friends. If their disorders are not recent, or if they have had a fair trial of remedial measures, they need not be removed from their homes or the poorhouse.

The fourth column includes those who, perhaps, are usually quiet and harmless, but are uncertain and variable, and may be excited by many of the common events of life, and become troublesome and unmanageable. When managed with due discretion many of them are peaceable and create no trouble; but, wanting power of self-control, they are easily thrown off their balance, and then cause disturbance. In hospitals they are quiet and comfortable, and while there, they seem to those who are not familiar with the nature of their disease to hardly need the confinement and discipline of such an institution. Some lunatics of this class are subjected to many and variable plans of treatment. Their friends and families, finding that they cannot manage them at all times at home, and becoming weary of their ineffectual attempts to control them in their waywardness and excitability, send them to some hospital for their own relief as well as for the good of the patients. Under the judicious discipline and soothing influences of the institution, where every thing is adapted to meet their peculiarities, and from the even tenor of life they lead there, they become calm, and seem to have regained the power of self-control, and to be sufficiently well to enjoy the comforts and bear the trials of home. They are taken away, again become excited, and again returned to the hospital, to be soothed and calmed, and again carried home, with the same result and the same alternation of experiments.

The fifth column includes those who were returned by the

physicians as violent, unmanageable, furious or dangerous. Most of them are confined in some way or other, in hospitals, or in prisons, or in cages, and are "manifestly dangerous to the peace and safety of the community to be at large."

The seventh and eighth columns show the prospects of the insane.

The eleventh column shows the number of those who, in the opinion of the reporters, were subjects for a hospital—those who, either on account of their dangerous or troublesome condition, or liability to uncontrollable excitement, should be confined for the good of their friends or of the public, or who, on account of the recency of their malady and their probable curability, should be submitted to the remedial influences of a hospital for their restoration.

The facts in this column are in almost all cases given exactly as found in the original records; but as, in a few instances, those who made the returns seem to understand the purpose of a hospital to be merely custodial, and reported some mild cases, which were of recent origin, and perhaps curable, certainly not incurable, as not fit subjects for such an institution and as a few others, probably thinking the objects of the hospital were curative merely, returned some old and incurable cases, which were furious or dangerous, as not fit subjects for hospital treatment, the record of all these is changed, and they are included under this head in the tables presented.

Of course, then, this column includes all the third class, and most of the second, and should contain all those of the first, whose diseases are recent, and susceptible of improvement or removal by the curative measures to be found in a hospital.

PECUNIARY CONDITION OF LUNATICS.

As a matter of political economy, and in an investigation made by order of the State, it is of the first consequence to determine the amount of this burden that is borne by the property of the families and friends of the sufferers, and of that which falls upon the public. This inquiry, therefore, was made, and the returns distinguished the independent from the pauper lunatics, and among the latter those who were sup-

ported by the State from those who were supported by the cities and towns.

Of the two thousand six hundred and thirty-two lunatics, eleven hundred and ten are independent, or supported by their own property, or by that of their friends; and fifteen hundred and twenty-two are paupers, of whom eight hundred and twenty-nine are supported by the cities and towns, and six hundred and ninety-three are supported by the State. Of the independent lunatics, three hundred and eighty-seven are in hospitals, seven in prisons or in receptacles connected with them, and seven hundred and sixteen at home.

Of the pauper lunatics, nine hundred and fifty-four are in hospitals or places for healing or custody, and five hundred and sixty-eight at home or in almshouses.

INDEPENDENT LUNATICS.

The independent lunatics are mostly natives, very few are foreigners, and a majority are at their homes, as is shown in the following tables:—

TABLE III.—INDEPENDENT LUNATICS.

COUNTIES.	AT HOME.						IN HOSPITAL, &c.					
	CONDITION.				Total.	Subject for hospital.	CONDITION.				Total.	Subject for hospital.
	Mild—manageable.	Excitable—troublesome.	Furious—dangerous.	Not stated.			Mild—manageable.	Excitable—troublesome.	Furious—dangerous.	Not stated.		
Berkshire, .	38	18	1	5	62	30	3	5	1	—	9	8
Franklin, .	26	9	—	1	36	14	1	—	—	—	1	1
Hampshire, .	31	8	—	1	40	8	4	5	1	—	10	10
Hampden, .	30	12	—	3	45	21	1	10	1	—	12	11
Worcester, .	76	42	1	7	126	57	5	29	12	1	47	47
Middlesex, .	54	25	4	7	90	52	27	36	11	—	74	73
Essex, .	47	27	5	2	81	27	15	34	11	1	61	61
Suffolk, .	9	4	3	3	19	9	35	50	3	3	91	90
Norfolk, .	59	23	4	1	87	40	22	22	4	1	49	49
Bristol, .	34	16	4	—	54	25	9	9	—	—	18	18
Plymouth, .	27	15	—	1	43	23	4	8	1	—	13	13
Barnstable, .	12	6	2	3	23	11	1	3	4	—	8	8
Nantucket, .	2	—	—	—	2	1	—	1	—	—	1	1
Dukes, .	2	4	2	—	8	5	—	—	—	—	—	—
Totals, .	447	209	26	34	716	323	127	212	49	6	394	390

TABLE IV.—INDEPENDENT LUNATICS.

COUNTIES.	CONDITION.				Total.	Subject for hospital.
	Mild—manageable.	Excitable—troublesome	Furious—dangerous.	Not stated.		
Berkshire, . . .	41	23	2	5	71	38
Franklin, . . .	27	9	—	1	37	15
Hampshire, . . .	35	13	1	1	50	18
Hampden, . . .	31	22	1	3	57	32
Worcester, . . .	81	71	13	8	173	104
Middlesex, . . .	81	61	15	7	164	125
Essex, . . .	62	61	16	3	142	88
Suffolk, . . .	44	54	6	6	110	99
Norfolk, . . .	81	45	8	2	136	89
Bristol, . . .	43	25	4	—	72	43
Plymouth, . . .	31	23	1	1	56	36
Barnstable, . . .	13	9	6	3	31	19
Nantucket, . . .	2	1	—	—	3	2
Dukes, . . .	2	4	2	—	8	5
Totals, . . .	574	421	75	40	1,110	713

These tables show that, of the independent lunatics, twenty-six who were furious, and two hundred and nine excitable and troublesome, and three hundred and twenty-three who should be in hospital, were kept at their homes, and that all of the three hundred and ninety-four but four, who were in hospitals, were proper subjects for their care.

PAUPERS.

Pauperism has extensive and intimate connection with lunacy; and herein this disease offers the most important point of interest to the State and to the political economist; for the greater part of the burden of supporting it falls upon the public treasury.

There were one thousand one hundred and ten independent lunatics, and one thousand five hundred and twenty-two pauper lunatics, who were maintained by the town or the State. The condition and distribution of the latter are shown in Tables V., VI., VII. and VIII.

In these, as in the subsequent tables, the same, or some of the same, patients are included, to show various facts and illustrate various principles.

TABLE V.—PAUPER LUNATICS AT HOME.

COUNTIES.	AMERICAN.						FOREIGN.							
	CONDITION.				Total.	Subject for hospital.	NATION.		CONDITION.				Total.	Subject for hospital.
	Mild—manageable.	Excitable—troublesome.	Furious—dangerous.	Not stated.			Irish.	Others.	Mild—manageable.	Excitable—troublesome.	Furious—dangerous.	Not stated.		
Berkshire, . . .	9	16	4	—	29	14	1	—	1	—	—	—	1	—
Franklin, . . .	21	6	5	—	32	14	—	—	—	—	—	—	—	—
Hampshire, . . .	12	13	1	5	31	10	—	—	—	—	—	—	—	—
Hampden, . . .	15	8	2	—	25	6	2	1	1	2	—	—	3	1
Worcester, . . .	59	23	5	9	96	30	2	1	2	1	—	—	3	3
Middlesex, . . .	42	17	11	3	73	37	4	2	2	3	1	—	6	4
Essex, . . .	48	32	6	—	86	19	6	3	3	4	1	1	9	7
Suffolk, . . .	4	1	—	—	5	4	3	—	1	2	—	—	3	3
Norfolk, . . .	16	7	6	1	30	20	—	—	—	—	—	—	—	—
Bristol, . . .	20	9	10	—	39	16	2	—	—	1	1	—	2	2
Plymouth, . . .	32	15	2	—	49	15	1	1	1	1	—	—	2	—
Barnstable, . . .	22	7	6	1	36	13	—	—	—	—	—	—	—	—
Nantucket, . . .	—	—	1	—	1	1	—	—	—	—	—	—	—	—
Dukes, . . .	3	2	2	—	7	7	—	—	—	—	—	—	—	—
Totals, . . .	303	156	61	19	539	206	21	8	11	14	3	1	29	20

TABLE VI.—PAUPER LUNATICS IN HOSPITAL, &c.

COUNTIES.	AMERICAN.						FOREIGN.							
	CONDITION.				Total.	Subject for hospital.	NATION.		CONDITION.				Total.	Subject for hospital.
	Mild—manageable.	Excitable—troublesome.	Furious—dangerous.	Not stated.			Irish.	Others.	Mild—manageable.	Excitable—troublesome.	Furious—dangerous.	Not stated.		
Berkshire, . . .	1	9	3	—	13	12	3	2	—	3	2	—	5	5
Franklin, . . .	3	8	3	—	14	14	1	—	1	—	—	—	1	1
Hampshire, . . .	1	4	3	—	8	8	2	3	1	3	1	—	5	5
Hampden, . . .	2	7	1	—	10	10	9	1	1	6	3	—	10	10
Worcester, . . .	5	22	10	—	37	37	39	3	5	26	11	—	42	42
Middlesex, . . .	14	17	5	—	36	21	71	7	35	27	14	2	78	27
Essex,	18	39	5	—	62	20	48	30	11	50	17	—	78	33
Suffolk,	51	45	7	—	103	103	213	24	86	135	15	1	237	237
Norfolk,	22	9	3	—	34	33	32	9	28	12	1	—	41	41
Bristol,	20	8	2	—	30	29	15	—	5	7	3	—	15	15
Plymouth, . . .	12	11	4	—	27	27	5	—	2	3	—	—	5	5
Barnstable, . . .	5	2	2	—	9	8	2	—	2	—	—	—	2	2
Nantucket, . . .	2	4	—	—	6	6	1	1	2	—	—	—	2	2
Dukes,	2	2	—	—	4	4	—	—	—	—	—	—	—	—
State Almshouses, .	3	3	3	—	9	3	19	12	11	14	5	1	31	14
Totals,	161	190	51	—	402	335	460	92	190	286	72	4	552	439

TABLE VII.—PAUPER LUNATICS

At Home, and in Hospitals, Receptacles, &c.

COUNTIES.	AMERICAN.						FOREIGN.							
	CONDITION.				Total.	Subject for hospital.	NATION.		CONDITION.				Total.	Subject for hospital.
	Mild—manageable.	Excitable—troublesome	Furious—dangerous.	Not stated.			Irish.	Others.	Mild—manageable.	Excitable—troublesome	Furious—dangerous.	Not stated.		
Berkshire, . . .	10	25	7	—	42	26	4	2	1	3	2	—	6	5
Franklin, . . .	24	14	8	—	46	28	1	—	1	—	—	—	1	1
Hampshire, . . .	13	17	4	5	39	18	2	3	1	3	1	—	5	5
Hampden, . . .	17	15	3	—	35	16	11	2	2	8	3	—	13	11
Worcester, . . .	64	45	15	9	133	67	41	4	7	27	11	—	45	45
Middlesex, . . .	56	34	16	3	109	58	75	9	37	30	15	2	84	31
Essex, . . .	66	71	11	—	148	39	54	33	14	54	18	1	87	40
Suffolk, . . .	55	46	7	—	108	107	216	24	87	137	15	1	240	240
Norfolk, . . .	38	16	9	1	64	53	32	9	28	12	1	—	41	41
Bristol, . . .	40	17	12	—	69	45	17	—	5	8	4	—	17	17
Plymouth, . . .	44	26	6	—	76	42	6	1	3	4	—	—	7	5
Barnstable, . . .	27	9	8	1	45	21	2	—	2	—	—	—	2	2
Nantucket, . . .	2	4	1	—	7	7	1	1	2	—	—	—	2	2
Dukes, . . .	5	4	2	—	11	11	—	—	—	—	—	—	—	—
State Almshouses, . . .	3	3	3	—	9	3	19	12	11	14	5	1	31	14
Totals, . . .	464	346	112	19	941	541	481	100	201	300	75	5	581	459

TABLE VIII.—PAUPER LUNATICS

Of all Nations, at Home and in Hospitals, &c.

COUNTIES.	CONDITION.				Total.	Subject for hospital.
	Mild—manageable.	Excitable—troublesome	Furious—dangerous.	Not stated.		
Berkshire,	11	28	9	—	48	31
Franklin,	25	14	8	—	47	29
Hampshire,	14	20	5	5	44	23
Hampden,	19	23	6	—	48	27
Worcester,	71	72	26	9	178	112
Middlesex,	93	64	31	5	193	89
Essex,	80	125	29	1	235	79
Suffolk,	142	183	22	1	348	347
Norfolk,	66	28	10	1	105	94
Bristol,	45	25	16	—	86	62
Plymouth,	47	30	6	—	83	47
Barnstable,	29	9	8	1	47	23
Nantucket,	4	4	1	—	9	9
Dukes,	5	4	2	—	11	11
State Almshouses,	14	17	8	1	40	17
Totals,	665	646	187	24	1,522	1,000

These are all the pauper lunatics in, or belonging to, Massachusetts. Those who, by owning property, paying taxes, and by sufficient inhabitancy or heirship, have gained or inherited a local residence, are supported by the towns and cities. The others are supported by the State.

STATE PAUPERS.

The state paupers include most of the foreigners who are strangers in this land, and some from other States.

The returns from the house of correction in New Bedford state that the eight lunatics and idiots in that prison were supported by the county. All other paupers are stated to be supported by the Commonwealth or the towns. The printed report of the Secretary of State concerning the jails and houses of correction states that the lunatic in Barnstable jail was also supported by the county. Nevertheless, all of these nine are included among the State paupers in the tables of this Report.

Table IX. shows the number, and condition, and prospect of the State paupers, lunatics and idiots. The last are included here, though not elsewhere, for the convenience of presenting these classes of facts together.

TABLE IX.—STATE PAUPERS.

COUNTIES.	Lunatics.	Idiots.	CONDITION.			PROSPECT.		Native.	Foreign.
			Mild—manageable.	Excitable—troublesome.	Furious—dangerous.	Curable.	Incurable.		
Berkshire, . .	9	2	2	6	3	1	10	6	5
Franklin, . .	4	3	6	—	1	—	7	6	1
Hampshire, . .	6	—	1	4	1	1	5	5	1
Hampden, . .	15	4	6	10	3	3	16	6	13
Worcester, . .	51	1	8	29	15	6	46	8	44
Middlesex, . .	98	7	52	35	18	9	96	20	85
Essex, . . .	116	1	22	74	21	16	101	31	86
Suffolk, . . .	268	—	98	144	26	35	233	35	233
Norfolk, . . .	49	—	32	14	3	16	33	9	40
Bristol, . . .	18	—	6	7	5	8	10	5	13
Plymouth, . .	11	1	3	8	1	4	8	5	7
Barnstable, . .	4	—	3	—	1	—	4	2	2
Nantucket, . .	3	—	2	1	—	—	3	1	2
Dukes, . . .	1	—	—	1	—	—	1	1	—
State Almshouses, .	40	25	27	29	9	3	62	24	41
Totals, . . .	693	44	268	362	107	102	635	164	573

Of the whole seven hundred and thirty-seven State paupers, almost four-fifths, or five hundred and seventy-three, are foreigners, and only one hundred and sixty-four natives. Out of the whole five hundred and eighty-one foreign pauper lunatics, about one-fifteenth gained a residence in some town or city so as to become town paupers.

There is manifestly a much larger ratio of the insane among the poor, and especially among those who are paupers, than among the independent and more prosperous classes.

NATURE OF POVERTY.

In this connection it is worth while to look somewhat at the nature of poverty, its origin, and its relation to man and to society. It is usually considered as a single outward circumstance—the absence of worldly goods; but this want is a mere incident in this condition—only one of its manifestations. Poverty is an inward principle, enrooted deeply within the man, and running through all his elements; it reaches his body, his health, his intellect, and his moral powers, as well as his estate. In one or other of these elements it may predominate, and in that alone he may seem to be poor; but it usually involves more than one of the elements, often the whole. Hence we find that, among those whom the world calls poor, there is less vital force, a lower tone of life, more ill health, more weakness, more early death, a diminished longevity. There are also less self-respect, ambition and hope, more idocy and insanity, and more crime, than among the independent.

The preponderance of mental defect and disease among the poor is unquestionably shown by the comparison of the number of lunatics and idiots in the two classes. None could for a moment suppose that the total of these classes, the independent and the pauper, are in this ratio.

The whole number of permanent and temporary paupers who were relieved or supported from the public treasury in Massachusetts, during the last year, was 23,125. At the same time the calculated population of the State was 1,124,676, of whom 1,102,551 were independent and self-supporting. These are in the ratio of one to forty-seven, whereas the lunatics are in the ratio of 72.9 independent to 100 paupers. Comparing these ratios, we find that the pauper class furnishes, in ratio of

its numbers, sixty-four times as many cases of insanity as the independent class.

A similar law of distribution prevails in England and Wales. The pauper lunatics are stated to be 16,821, and those of the independent classes amount to somewhat over 8,000,* making the ratio of the pauper to the independent insane about two to one. The ratio of the pauper to the independent classes in the whole population of the kingdom was about as one to twenty, showing the proportion of lunacy among the poor to be about forty times as great as that among those who were not supported by public charity. Whatever reasonable allowance may be made for the defect in the report of the independent lunatics, it is very plain that the ratio of insanity among the paupers is very much larger than that among the self-sustaining class.

This is not only a demonstrable fact in Massachusetts and Great Britain, and probably elsewhere, but it proceeds out of a principle which is fixed in the law of our being—that poverty is not a single fact of an empty purse, but involves in various degrees the whole man, and presents as many facts as there are elements of our nature that can be depreciated or perverted. Insanity is, then, a part and parcel of poverty; and wherever that involves any considerable number of persons, this disease is manifested.

It needs no philosophy to show that some, perhaps many, lunatics, by their disease lose their power of self-sustenance, and are thereby removed from the independent to the pauper class. The laboring but self-supporting poor, whose daily and monthly toil yields barely sufficient for their nourishment, gather no store and gain no capital to rest upon when production is suspended. Of course, when they cease to be producers, they become dependent on others for their support; and this is the more inevitable when that cause is sickness, which cuts off the supply, and creates the necessity of a greater expenditure. In these families the income of the day is only sufficient for its ordinary support, and will bear no more burden. Any increase, then, of expense, must diminish the comfort or the sustenance which was before deemed necessary, or make a demand upon their friends or the public for support.

* Report of Commissioners in Lunacy, 1844, p. 7.

When the poor become thus sick and dependent, although friends may, in some instances, be able and willing to step in and meet this expense, yet unfortunately they, too, are generally poor, and the public treasury is the only and the necessary resort for help; and especially when any one becomes insane, the town or the State necessarily assumes the burden. Moreover, as this disease, more than others, is lasting, it would more certainly exhaust any little gathered store of the poor and the power and the patience of friends; and then, if the lunatic is not at once thrown upon the public, he must ultimately reach that end.

Besides all this, the difficulty of keeping a lunatic in the dwellings and families of the poor is great and insurmountable. They have no spare room to keep him, and no surplus strength or help to attend upon him, for all of these are appropriated to the irresistible wants of the household from day to day. For this and the preceding reason, any subordinate member of a poor family becoming insane must be sent to the poorhouse or the hospital, to be supported and cared for by the public treasury, and thus become a pauper, at least through the period of the insanity, while yet the rest of the family support themselves. It necessarily follows, that some lunatics are paupers while their families are yet independent. Therefore, in determining the ratio of lunatics to their respective constituent classes, it is not a safe method to divide the whole number of the paupers, sane and insane, by the number of lunatics among them, because all these who have just been described as coming from self-supporting, although poor families, must be assumed to represent those who are not paupers and are not included in the pauper class.*

Nevertheless, even if all the self-sustaining poor were included with the paupers in the calculation, there will unquestionably be found a much greater ratio of lunatics among them than among the classes more favored in respect to outward estate.

A careful examination of the causes of poverty and lunacy, and of the character and condition and health of the poor,

* The Report of the Paupers of Massachusetts for the year ending November 1, 1854, published by the Secretary of State, shows that nine hundred and twenty-five of those relieved or supported became paupers by reason of insanity or idiocy.

would lead to the inference that there would be an excess of lunacy among them.

CONNECTION OF PAUPERISM WITH INSANITY.

It may be supposed, from what has been already said, that much of poverty has a common origin with insanity—both of them grow out of and represent internal mental character, or physical condition, as well as external circumstances.

Men of unbalanced mind and uncertain judgment do not see the true nature and relation of things, and they manifest this in the management of their common affairs. They do not adapt the means which they possess or use to the ends which they desire to produce. Hence they are unsuccessful in life; their plans of obtaining subsistence for themselves or their families, or of accumulating property, often fail; and they are consequently poor, and often paupers.

This unbalanced and ill-regulated mind, and these wayward or loose habits of thought, are among the common causes of insanity.

The weak mind cannot grasp any complicated design in affairs, nor combine means to produce ends, nor lay and carry out plans of business; the unstable mind changes its purposes, and does not carry out its plans, however well laid. Both of these fail of securing worldly prosperity, and often bring on poverty and pauperism, and they also often produce insanity. People of this class falter beneath the struggles and trials of life, and disappointments bear them down. Their minds become more and more unbalanced and irregular, and at length disordered.

Likewise some physical causes have their doubly destructive influence upon both the estate and the mind.

Intemperance in stimulating drinks and all sorts of dissipation disturb and exhaust the brain, and affect its power of correct and ready action; and hence the mind becomes wayward, its operations uncertain and unfitted for the business of life. Hence follow derangements in the affairs of the world, and ill success and poverty. Hence, too, follow disorders of the nervous system and insanity, which, according to hospital records, find their most common origin in the exciting and exhausting effects of alcohol, especially among the poor.

Whatever depreciates the vital energies lowers the tone of the muscles, and diminishes the physical force, and lessens thereby the power of labor and of production; it also lowers the tone of the brain and the capacity of self-management. In this state the cerebral organ struggles, and may be deranged; consequently we find in the hospital records that ill health is one of the most commonly assigned causes of insanity. It has its first depressing effect on the energy of physical action and the soundness of the judgment in worldly affairs, and next on the power and discipline of the mental faculties.

PAUPER AND INDEPENDENT—PROSPECT.

Among the paupers, eighty-six per cent. are shown to be incurable; while among those of the independent class, a smaller proportion, seventy-five per cent., are returned as beyond hope of restoration. It is not to be supposed that pecuniary pauperism is in itself more destructive to the vital forces which would overcome disease and restore the balance of mental action when the brain is disordered—but the cause of the incurableness and permanence of their mental derangement lies behind, and is anterior to, their outward poverty. The permanence of the disease is often the cause of destitution. They are both frequently traceable to the same source; for an imperfectly organized brain and feeble mental constitution not only carry with them the inherent elements of poverty and insanity, but they have insufficient recuperative power to regain even their original health when deranged, and therefore their disorder remains.

In some cases, the family of an insane patient, although independent, are unable to pay for the expenses of his support at a hospital. They have a becoming self-respect which will not permit them to ask for aid from the public, and yet they are too poor to furnish the means of restoration themselves; consequently the lunatic is neglected, and his malady suffered to become chronic and hopeless. His family maintain him at home until both their means and his chance of recovery are exhausted; and then he is sent to the poorhouse, and at once swells the list of incurable paupers.

In other cases, the families of the poor and those of small estates make extraordinary exertions, and support an insane

member at the hospital as long as the disorder seems to be curable; but when it becomes fixed and past remedy their strength gives out and their courage fails, their pride is overcome, and then they allow their relative to become a public charge. In these cases, the incurability alone is the cause of the pauperism.

FOREIGN ELEMENT.

The results of this lunatic inquiry reveal the great number of foreigners among our insane; and this is the more remarkably seen in the public institutions appropriated to the guardianship and the care of those afflicted with this malady.

The following table shows the numbers of the native and the foreign lunatics of the different classes, and in different situations, in the several counties and in the State:—

TABLE X.—LUNATICS IN MASSACHUSETTS.

Native and Foreign.

COUNTIES.	Independent		Pauper.		Both Classes		At Home.		In Hospital, &c.	
	Native.	Foreign.	Native.	Foreign.	Native.	Foreign.	Native.	Foreign.	Native.	Foreign.
Berkshire, . . .	71	—	42	6	113	6	91	1	22	5
Franklin, . . .	36	1	46	1	82	2	68	—	14	2
Hampshire, . . .	49	1	39	5	88	6	70	1	18	5
Hampden, . . .	56	1	35	13	91	14	70	3	21	11
Worcester, . . .	168	5	133	45	301	50	219	6	82	44
Middlesex, . . .	155	9	109	84	264	93	157	12	107	81
Essex, . . .	139	3	148	87	287	90	165	11	122	79
Suffolk, . . .	98	12	108	240	206	252	17	10	189	242
Norfolk, . . .	130	6	64	41	194	47	113	4	81	43
Bristol, . . .	67	5	69	17	136	22	89	6	47	16
Plymouth, . . .	56	—	76	7	132	7	92	2	40	5
Barnstable, . . .	31	—	45	2	76	2	59	—	17	2
Nantucket, . . .	3	—	7	2	10	2	3	—	7	2
Dukes, . . .	7	1	11	—	18	1	14	1	4	—
State Almshouses, . .	—	—	9	31	9	31	—	—	9	31
Totals, . . .	1066	44	941	581	2007	625	1227	57	780	568

Here is a large number of foreign lunatics within the State, and in the hospitals and places of public custody; and these, unquestionably, bear a larger ratio to the sane population of their own class than the native lunatics.

There are not the means of calculating the approximate number of the foreigners in Massachusetts as is obtained for the whole population of the State. If the same data, the census of 1840 and that of 1850, are assumed, 34,818 foreigners at the former and 164,448 at the latter period, and the calculations made, founded on the increase between these two periods, the result will indicate a number of people at the present time that will be extremely improbable and unworthy of belief.

But, taking the number of the foreigners ascertained to be here in 1850, adding to these the arrivals in the four subsequent years, according to the registers of the Commissioner of Alien Passengers, and making a deduction for those who passed beyond the State and who have died between 1850 and 1854, we have then the probable foreign population in Massachusetts of 230,000 in 1854. Subtracting these from the calculated number of the total population of Massachusetts in 1854, we have the native population of 894,676. Dividing these respectively by the ascertained numbers of the insane shows that the native insane were one in four hundred and forty-five of the total native population, and the foreign insane were one in three hundred and sixty-eight of the whole number of aliens in the State. There is, then, a larger proportion of the foreigners than of the natives who are lunatics.

It would seem from this, either that our foreign population are more prone to insanity, or their habits and trials, their experiences and privations, and the circumstances which surround them, and the climate of this country, are more unfavorable to their mental health than to that of the natives.

It is worth while to analyze this state of things, and see how far this excess of lunacy among the foreigners is due to any peculiarities in them, and how far any circumstances and conditions which are common both to them and to those who were born in the United States.

FOREIGN POVERTY.

The most observable fact among the foreign lunatics is, that they have a very great preponderance of paupers.

The following table shows this distribution of the alien lunatics, independent and pauper, in the several counties, and also their sanitary condition, prospect and situation:—

TABLE XI.—FOREIGN LUNATICS.

COUNTIES.	Pecun'y Condit'n		Total.	CONDITION.				PROSPECT.			SITUATION.			
	Independent.	Pauper.		Mild—manageable.	Excitable—troublesome.	Furious—dangerous.	Not stated.	Curable.	Incurable.	Not stated.	At home.	In hospital.	In receptacles and prisons.	In state almshouses.
Berkshire, . . .	—	6	6	1	3	2	—	1	5	—	1	5	—	—
Franklin, . . .	1	1	2	2	—	—	—	—	2	—	—	2	—	—
Hampshire, . . .	1	5	6	2	3	1	—	2	4	—	1	5	—	—
Hampden, . . .	1	13	14	2	9	3	—	2	12	—	3	11	—	—
Worcester, . . .	5	45	50	10	28	12	—	8	41	1	6	44	—	—
Middlesex, . . .	9	84	93	41	35	15	2	14	78	1	12	31	50	—
Essex, . . .	3	87	90	16	55	18	1	16	73	1	11	34	45	—
Suffolk, . . .	12	240	252	93	141	17	1	39	213	—	10	238	4	—
Norfolk, . . .	6	41	47	31	13	3	—	16	29	2	4	42	1	—
Bristol, . . .	5	17	22	8	10	4	—	11	11	—	6	13	3	—
Plymouth, . . .	—	7	7	3	4	—	—	1	6	—	2	5	—	—
Barnstable, . . .	—	2	2	2	—	—	—	—	2	—	—	2	—	—
Nantucket, . . .	—	2	2	2	—	—	—	—	2	—	—	2	—	—
Dukes, . . .	1	—	1	—	1	—	—	—	1	—	1	—	—	—
State Almshouses, . . .	—	31	31	11	13	6	1	2	27	2	—	—	—	31
Totals, . . .	44	581	625	224	315	81	5	112	506	7	57	434	103	31

It is a noticeable fact, that most of the foreign lunatics, viz., 93 per cent., are paupers. It is also noticeable that only 6 per cent. of these foreign pauper lunatics are supported by the towns and cities; while 94 per cent. are State paupers. The State treasury, then, supports 87 per cent. of all the foreign lunatics who are in Massachusetts.

The proportion of native insane who are dependent is much smaller, being fifty-seven per cent. of all.

Among all the paupers, the natives, 13,454, who were relieved and supported in 1854, were as one in sixty-six of the whole native population; the foreign, 9,671, were as one in twenty-five of the whole foreign population.

These show that a much larger proportion of the aliens are dependent, or below the level of self-sustenance; and it is extremely probable that the proportion of those who barely support themselves when in health—that is, the poor—is much greater than even this. This is corroborated by the universal observation, that in most of the towns many, and in the eastern part of the State most, of the day laborers are Irish; and on the other hand, very few of the foreigners belong to the prosperous classes. Few of them have any capital, most are struggling with poverty and find some difficulty, and many find great difficulty in supplying their wants. It may be safely said, then, that most of the foreigners in Massachusetts are poor.

The greater liability of the poor and the struggling classes to become insane seems to be especially manifested among these strangers dwelling with us; and as a larger proportion of them are poor, they must, therefore, have a larger proportion of lunatics to their whole number than the Americans.

Besides these principles, which apply to the poor as a general law, there is good ground for supposing that the habits and condition and character of the Irish poor in this country operate more unfavorably upon their mental health, and hence produce a larger number of the insane in ratio of their numbers than is found among the native poor. Being in a strange land and among strange men and things, meeting with customs and surrounded by circumstances widely different from all their previous experience, ignorant of the precise state of affairs here, and wanting education and flexibility by which

they could adapt themselves to their new and unwonted position, they necessarily form many impracticable purposes, and endeavor to accomplish them by unfitting means. Of course disappointment frequently follows their plans. Their lives are filled with doubt, and harrowing anxiety troubles them, and they are involved in frequent mental, and probably physical, suffering.

The Irish laborers have less sensibility and fewer wants to be gratified than the Americans, and yet they more commonly fail to supply them. They have also a greater irritability; they are more readily disturbed when they find themselves at variance with the circumstances about them, and less easily reconciled to difficulties they cannot overcome.

Unquestionably much of their insanity is due to their intemperance, to which the Irish seem to be peculiarly prone, and much to that exaltation which comes from increased prosperity.

Mr. Chadwick, the Secretary of the Poor Law Commission and of the Board of Health of England, in explanation of the apparent excess of lunacy among the Irish in the United States, attributes it to the sudden prosperity and means of indulgence which they find here beyond that which they left at home. He says: "If we were to take the poorest and the worst paid and the worst educated English, bred up in single-roomed hovels, with the pig for a companion, and suddenly give them three or four times the wages they had ever seen or dreamed of getting, and at the same time reduce the price of gin or whiskey and all stimulants to one-third the price which had formerly kept such physical excitements out of their reach, I should be very confident of finding a disproportionately large class of cases of lunacy amongst them." *

There is no evidence that insanity is more prevalent in Ireland than in England or Scotland, or even in the United States among the natives. We are informed, by the best authority on these subjects in Great Britain, that they have a large Irish population in that island, who go there as they come here, to seek for labor in the lowest capacity. They congregate in the cities, and live in the most unhealthy districts,

* Letter to the Commission.

in narrow lanes and dense courts, in small and unventilated apartments, and even in the many cellars of Liverpool, Manchester, Glasgow, &c. They undergo great privations and suffering, and are much subject to fevers, dysentery, and other diseases incident to bad air and meagre sustenance; but there is no ground for suspicion that in that country they have more lunacy than the natives.

Among the natives, three hundred and twenty-three are stated to be curable, and one thousand five hundred and twelve to be incurable; and among the foreigners, there were one hundred and twelve whose cases presented a hope of restoration, while five hundred and six seemed to be destined to incurable lunacy. This might lead to the inference that insanity in the alien and in the native American was equally remediable. But it must be remembered that our incurable lunatics are, in large proportion, old and long-established cases, many of whom have been deranged five, ten, thirty, and even fifty years. Those of more than ten years' standing constitute no small part.

The foreign population are of comparatively recent introduction into this country; there were only 9,620 in 1830; 34,818 in 1840; and 164,448 in 1850; and probably 230,000 in 1854. Unless, therefore, there were some lunatics brought over from Europe, who, at most, were so extremely few that they can hardly be assumed as a part of the elements of this calculation, they would naturally have fewer of the old cases, and of course fewer of the incurables, than the natives.

Moreover, it is an undeniable fact that the foreigners, as a whole, have the best and the first advantage of our public institutions for the cure or custody of the insane.

TABLE XII.—SITUATION AND NATIVITY OF
FOREIGN LUNATICS.

PRESENT SITUATION.	WHERE BORN.													Total.
	Ireland.	British Provinces.	Great Britain.	Germany.	France.	Spain.	Holland.	Italy.	Sweden.	Austria.	Greece.	Egypt.	Unknown.	
Worcester Hospital,	110	3	13	4	-	-	-	2	1	-	-	-	-	133
Taunton “ .	93	-	5	8	1	-	-	-	-	-	-	-	-	107
Boston, “ .	164	7	7	3	-	-	-	-	-	1	-	-	-	2 184
McLean “ .	3	1	3	1	-	-	-	-	-	-	-	-	-	8
Ipswich Receptacle,	26	2	6	3	4	-	2	-	1	-	-	1	-	45
Cambridge, “ .	42	1	3	-	-	-	-	-	-	-	1	-	-	47
Concord Jail, . .	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Boston “ . . .	1	-	-	-	-	-	-	-	-	-	-	-	-	1
Boston House of Cor.	3	-	-	-	-	-	-	-	-	-	-	-	-	3
Dedham, “ . .	1	-	-	-	-	-	-	-	-	-	-	-	-	1
N. Bedford, “ .	3	-	-	-	-	-	-	-	-	-	-	-	-	3
Bridgewater State } Almshouse, . . }	8	-	-	1	-	-	-	-	-	-	-	-	5	14
Monson State Alms- } house, . . . }	-	-	1	1	-	1	-	-	-	-	-	-	-	3
Tewksbury State } Almshouse, . . }	11	-	2	1	-	-	-	-	-	-	-	-	-	14
At home—Pauper, .	21	2	5	1	-	-	-	-	-	-	-	-	-	29
At home—Independ’t	23	1	3	-	1	-	-	-	-	-	-	-	-	28
State Prison, . .	2	-	-	-	-	-	-	-	-	-	-	-	-	2
Brattleboro’ Hospital,	1	-	1	-	-	-	-	-	-	-	-	-	-	2
Totals, . . .	512	17	49	23	6	1	2	2	3	1	1	1	7	625

FOREIGN LUNATICS IN HOSPITALS OF MASSACHUSETTS.

Among the foreign lunatics, a little more than a third of the independent class are in any hospital; but almost the whole of the foreign paupers are in some public establishment for their restoration or protection. 71.9 per cent. are in the curative hospitals, 17.7 per cent. in the custodial receptacles and prisons, and 5.3 per cent. in the State Almshouses, and most of those who are in the custodial institutions and State Almshouses have had a fair trial of the remedial measures of the public hospitals before they were sent to their present abodes.

Among the American lunatics, only 35.4 per cent. of the independent class, and 42.7 per cent. of the paupers, and 38.8 per cent. of all were in these establishments, and only 35 per cent. of the whole were in the curative hospitals. Of all the insane, eight hundred and twenty-four of the natives and only sixteen of the foreigners have never had the benefit of such an institution for the cure of their malady.

It is manifest, then, that the foreigners have enjoyed and are now enjoying the blessings of our hospitals to a greater degree than has been allowed to our own children in proportion to their numbers.

This might be expected from the relation of the alien to the State, which is the provider of these institutions. Nearly the whole of the foreign lunatics, that is, 93 per cent. are paupers; and as but few of these have gained any local residence, they are mostly wards of the State. And if they are not originally paupers, but independent, or members of independent families, while in health, yet, as their friends cannot or will not provide for them when deranged, they are thrown at once upon the public treasury for support, and sent to the hospital as early as possible. In doing this, the friends incur no responsibility of further burden. On the other hand, they are relieved of that which is already on them, for they are thereby saved from the expense of supporting the patient, and consequently expend less when he is in the hospital than when he is at home.

The Commonwealth owns the hospitals, and, of course, takes its wards at once to those houses which it has in possession; and if they cannot be restored, it still retains a part in these

institutions, and provides for the transfer of the rest to the County Receptacles and the Houses of Correction, and recently to the State Almshouses, and in one or other of these places it still maintains them. There is, then, no hesitation, no room for doubt, on the part of the friends of a foreign pauper lunatic, in regard to removing him from home to the hospital, and no difficulty in his being received.

But the native lunatic is not so unhesitatingly and readily removed from his home to the public institution.

If he belongs to the independent class, there are the objections of both affection and economy. Many friends hesitate and doubt whether they will send a beloved relative away in the time of his sickness, when he seems to need their sympathy and care more than ever. Many of them cling to him, and are willing to make any sacrifice and try every domestic means and experiment before they can consent to part with him and consign him to the care of strangers.

Beside these, there are the motives of economy, which influence the friends in the choice of means of providing for those under their charge whose minds are diseased. The payment of the expenses of a patient in the hospital, in money, is a burden not easily borne by a large portion of our farmers, mechanics and professional men, although they may have sufficient income for sustenance and for the enjoyment of every comfort at their homes. These families, therefore, are induced to wait before they consent to assume this burden of boarding their lunatic member abroad, until the necessity of removal becomes too great to be resisted. But too often, as the returns show, these motives of affection or economy prevail effectually, and the patient is kept at home so long that his disease is suffered to become permanent and incurable.

The same motives of economy weigh with the municipal authorities in regard to the pauper lunatics under their charge. As they can keep them at their poorhouses at a less cost than at the hospitals, some are fearful of incurring the additional expense, and retain their patients, as long as possible, at their homes; some others never send them to a hospital; and in either case the disease becomes incurable.

Thus, while those who have the charge of the native lunatics, the friends and the overseers of the poor, are generally required to meet and overcome the obstacle of increase of expense in sending their patients to a proper place for cure or custody, and therefore find strong motives for delay or entire neglect of this measure, the friends of the foreigner find a relief of a burden and a diminution of expense by adopting this measure and sending their patients to be cured.

The same economical reason that induces the friends and guardians of a foreign lunatic to provide the best means for the healing of his disease, or for his protection and comfort in the State hospitals, operates on the contrary to close them against the American, who is suffering from the same malady and has the same wants. So the State, while it offers a bounty to the foreign population and families for sending their lunatics to its hospitals, levies a tax upon the native population and families for doing the same.

We consequently find that, while 36 per cent. of the American lunatics were sent to the Worcester Hospital within three months after their supposed attack, 70 per cent. of the foreign lunatics were sent within the same period; and while 43 per cent. of the natives were not sent until their disease had been established a year or more, only 11 per cent. of the aliens were kept away as long.

In those protracted cases, where the best hospital measures are tried for the native patient and fail, and the disease becomes permanent, the resources or the courage of his friends and guardians are often exhausted; and, being unable or unwilling to bear the burden of maintaining him away from home or from the town poorhouse merely for the sake of custody, they take him back to their private dwellings or to the almshouses, where he remains, if possible, through the remainder of his days.

But the alien has no such home to fall back upon. His relations cannot receive him. Or if he be a pauper, he is not subject to the charge of the town, but to that of the State. He has, therefore, no poorhouse to return to, and must remain in the only places which the Commonwealth has provided for its wards—that is, the State hospitals, receptacles, &c.

Seeing, then, that the State necessarily makes the first use of its own dwellings, the public hospitals and receptacles, for its own wards, who are mostly foreign, and retains the incurables there permanently because it has no other home for them—seeing, also, that the independent and town pauper lunatic can be admitted only on condition of paying the cost, which keeps many out, and takes others away if they are not restored,—the natural tendency is to fill the hospitals at Worcester, Taunton and Boston, and the receptacles of Middlesex and Essex, with a great disproportion of foreign inmates, while their advantages are enjoyed in a comparatively small degree by the natives.

Thus, while our bountiful Commonwealth apparently provides hospitals liberally for its own people, and has, in terms, offered them to all within its borders who need them, the law and the custom, and the irresistible force of circumstances, have given these first to the children of another land. Whatever may have been the design and the theory, the practical operation of our system is, to give up our hospital accommodations for permanent residence without measure to almost the whole of the lunatic strangers, while these blessings are offered with a sparing economy to a little more than a third of our own children who are in a similar situation.

The propriety and expediency of this generous provision for the alien lunatics will not be questioned here, for not one of these thus provided for should be neglected. Indeed, it is the great honor of our Commonwealth that it has built—not monuments of glory—but these institutions for the relief of the suffering of even the humblest of the strangers that come among us. That which we have done in this way is well done; but then there is another duty superadded to this—many think it should take precedence—of providing for the cure and the protection of our own sons and daughters when bereft of reason, and of placing the means within the reach and the motives of those who stand to them as guardians in their illness, so that these may be practically enjoyed by them in as great a degree as they are by the aliens; for surely “these ought we to have done, and not to leave the others undone.”

PROSPECT OF THE INSANE—INCURABILITY AND CURABILITY.

The evidence that comes from our own and many other hospitals shows that there are manifold disorders of the brain, producing perversion of mental and moral action in numberless forms, classed under the general term of insanity. These are usually grave diseases; and yet they are among the most curable of maladies of their severity, provided they are taken in season and the proper remedies applied and continued. In recent cases, the recoveries amount to the proportion of 75 to 90 per cent. of all that are submitted to the restorative process. Yet it is an equally well-established fact that these disorders of the brain tend to fix themselves permanently in the organization, and that they become more and more difficult to be removed with the lapse of time. Although three-fourths to nine-tenths may be healed if taken within a year after the first manifestation of the disorder, yet if this measure be delayed another year, and the diseases are from one to two years' standing, the cures would probably be less than half of that proportion, even with the same restorative means. Another and a third year added to the disease diminishes the prospect of cure, and in a still greater ratio than the second; and a fourth still more. The fifth reduces it so low as to seem to be nothing. Then hope has no visible ground to rest upon; and if it still remain, it is rather founded on desire and affection than on any established principles of pathological science. After this period, insanity is usually deemed to be incurable; nevertheless there are few and occasional recoveries; but these are so rare and uncertain, and have such a doubtful connection with the means and appliances used for such cases, that they seem to be rather the offspring of chance than the results of rational calculation and treatment.

Notwithstanding the very great probability of recovery in the early stages of insanity, approaching nearer to a certainty than the cure of fevers, dysenteries, pneumonia, or other severe diseases, which are never neglected, and notwithstanding the almost certain incurability of the malady if allowed to pass over several years, there are found in the State eight hundred and forty lunatics who have never been in any hospital, and probably have never enjoyed the recognized means of recovery.

Some of these have been deranged more than thirty years, some forty, and some fifty years, and of course their diseases began and were probably fixed beyond power or even hope of removal before they had a chance of obtaining relief in the hospital. Yet a great proportion of these old cases date no farther back than 1833, when that institution was opened and offered to all. These, as well as the other chronic cases, have mostly passed beyond the power of man to restore them. They are deemed to be incurable, and remain standing and abiding monuments of the neglect of the State to provide the means of health, and place them within the reach or the comprehension of the friends and guardians who had immediate charge of them, or of the neglect of those friends and guardians to avail themselves of these opportunities of restoration when they were offered to them.

The physicians were asked to state whether the patients were supposed to be curable or incurable. This is done in a large part of the cases; and the following tables show how these were distributed in the several counties:—

TABLE XIII.—PROSPECT OF LUNATICS AT HOME.

COUNTIES.	NATIVE.				FOREIGN.				ALL NATIONS.			
	PROSPECT.			Total.	PROSPECT.			Total.	PROSPECT.			Total.
	Curable.	Incurable.	Not stated.		Curable.	Incurable.	Not stated.		Curable.	Incurable.	Not stated.	
Berkshire, . . .	26	55	10	91	—	1	—	1	26	56	10	92
Franklin, . . .	9	50	9	68	—	—	—	—	9	50	9	68
Hampshire, . . .	6	51	13	70	—	1	—	1	6	52	13	71
Hampden, . . .	10	48	12	70	1	2	—	3	11	50	12	73
Worcester, . . .	28	169	22	219	—	6	—	6	28	175	22	225
Middlesex, . . .	23	113	21	157	6	5	1	12	29	118	22	169
Essex, . . .	12	132	21	165	7	3	1	11	19	135	22	176
Suffolk, . . .	5	6	6	17	7	3	—	10	12	9	6	27
Norfolk, . . .	21	84	8	113	1	1	2	4	22	85	10	117
Bristol, . . .	10	64	15	89	2	4	—	6	12	68	15	95
Plymouth, . . .	12	68	12	92	—	2	—	2	12	70	12	94
Barnstable, . . .	14	34	11	59	—	—	—	—	14	34	11	59
Nantucket, . . .	—	2	1	3	—	—	—	—	—	2	1	3
Dukes, . . .	5	9	—	14	—	1	—	1	5	10	—	15
Totals, . . .	181	885	161	1227	24	29	4	57	205	914	165	1284

TABLE XIV.—PROSPECT OF LUNATICS

In Hospitals, Receptacles, Prisons and State Almshouses.

COUNTIES.	AMERICAN.				FOREIGN.				ALL NATIONS.			
	PROSPECT.			Total.	PROSPECT.			Total.	PROSPECT.			Total.
	Curable.	Incurable.	Not stated.		Curable.	Incurable.	Not stated.		Curable.	Incurable.	Not stated.	
Berkshire, . . .	1	20	1	22	1	4	—	5	2	24	1	27
Franklin, . . .	1	13	—	14	—	2	—	2	1	15	—	16
Hampshire, . . .	1	17	—	18	2	3	—	5	3	20	—	23
Hampden, . . .	5	16	—	21	1	10	—	11	6	26	—	32
Worcester, . . .	14	65	3	82	8	35	1	44	22	100	4	126
Middlesex, . . .	19	86	2	107	8	73	—	81	27	159	2	188
Essex, . . .	15	106	1	122	9	70	—	79	24	176	1	201
Suffolk, . . .	43	143	3	189	32	210	—	242	75	353	3	431
Norfolk, . . .	15	65	1	81	15	28	—	43	30	93	1	124
Bristol, . . .	14	33	—	47	9	7	—	16	23	40	—	63
Plymouth, . . .	8	32	—	40	1	4	—	5	9	36	—	45
Barnstable, . . .	4	13	—	17	—	2	—	2	4	15	—	19
Nantucket, . . .	1	6	—	7	—	2	—	2	1	8	—	9
Dukes, . . .	—	4	—	4	—	—	—	—	—	4	—	4
State Almshouses, . . .	1	8	—	9	2	27	2	31	3	35	2	40
Totals, . . .	142	627	11	780	88	477	3	568	230	1104	14	1348

TABLE XV.—PROSPECT OF ALL THE LUNATICS
IN MASSACHUSETTS.

COUNTIES.	NATIVE.				FOREIGN.				ALL NATIONS.			
	PROSPECT.			Total.	PROSPECT.			Total.	PROSPECT.			Total.
	Curable.	Incurable.	Not stated.		Curable.	Incurable.	Not stated.		Curable.	Incurable.	Not stated.	
Berkshire, . . .	27	75	11	113	1	5	—	6	28	80	11	119
Franklin, . . .	10	63	9	82	—	2	—	2	10	65	9	84
Hampshire, . . .	7	68	13	88	2	4	—	6	9	72	13	94
Hampden, . . .	15	64	12	91	2	12	—	14	17	76	12	105
Worcester, . . .	42	234	25	301	8	41	1	50	50	275	26	351
Middlesex, . . .	42	199	23	264	14	78	1	93	56	277	24	357
Essex, . . .	27	238	22	287	16	73	1	90	43	311	23	377
Suffolk, . . .	48	149	9	206	39	213	—	252	87	362	9	458
Norfolk, . . .	36	149	9	194	16	29	2	47	52	178	11	241
Bristol, . . .	24	97	15	136	11	11	—	22	35	108	15	158
Plymouth, . . .	20	100	12	132	1	6	—	7	21	106	12	139
Barnstable, . . .	18	47	11	76	—	2	—	2	18	49	11	78
Nantucket, . . .	1	8	1	10	—	2	—	2	1	10	1	12
Dukes, . . .	5	13	—	18	—	1	—	1	5	14	—	19
State Almshouses,	1	8	—	9	2	27	2	31	3	35	2	40
Totals, . . .	323	1512	172	2007	112	506	7	625	435	2018	179	2632

TABLE XVI—PROSPECTS OF LUNATICS IN CLASSES.

			CURABLE.				INCURABLE.				
			At home.	In hospital.	In receptacles, jails, &c.	Total.	At home.	In hospital.	In receptacles, jails, &c.	Total.	Ratio of all.
Independ't.	{	Native, . . .	137	84	2	223	454	274	6	734	76
		Foreign, . . .	13	4	—	17	12	10	—	22	56
		Totals, . . .	150	88	2	240	466	284	6	756	75
Pauper.	{	Native, . . .	44	50	6	100	431	288	59	778	88
		Foreign, . . .	11	76	8	95	17	344	123	484	83
		Totals, . . .	55	126	14	195	448	632	182	1,262	86
Both Classes.	{	Native, . . .	181	134	8	323	885	562	65	1,152	82
		Foreign, . . .	24	80	8	112	29	354	123	506	82
		Totals, . . .	205	214	16	435	914	916	188	2,018	82

There is a greater proportion of the incurable in the hospitals, receptacles and prisons, than at home, being in the ratio of 81.89 per cent. to 71.18 per cent. among the whole. But in the lunatic hospitals this ratio is only 70 per cent.; while in the receptacles, prisons and State almshouses, it was 91.8 per cent.

SOME CASES OF INSANITY PRIMARILY INCURABLE.

It is not to be assumed that all of those now at their homes, who are stated to be incurable, could have been restored if they had been allowed to enjoy the remedial measures and influences offered in a hospital or elsewhere, nor that the incurables now in hospitals would have been cured if they had been sent there in the early stages of their disease; because the opposing fact is also known, that some of the former have been in such institutions, and some of the latter were submitted to their treatment within a few weeks or months after their disorder came upon them.

There is a diversity in those diseases of the brain by which insanity is produced; they differ in their origin and in their manifestation, in the effect they have upon, or the changes they produce in, the physical organ of the mind, and consequently in their permanence. Some, in their very beginning, produce such changes in the brain as to destroy all power of returning to its healthy condition. Of course these never recover; and any one becoming insane from these causes is primarily and forever incurable.

The experience of hospitals testifies to this doctrine: Wherever they have discriminated and classified their cases according to their origin, and determined the result of the treatment of each class, they show that there is a difference in the curability of the diseases that arise from various causes. Including all of these classes of cases submitted to its care, the printed reports of the Hospital in Worcester show that 72 per cent. of those which were supposed to be produced by religious excitement and emotions, 70 per cent. of those from ill health, 15 per cent. of those from epilepsy, and only 11 per cent. of those which were caused by the lowest sensuality, were restored. These results are corroborated by the experience of the Ohio Hospital at Columbus. Thus, notwithstanding their best remedial influences were applied to all of them with equal faithfulness and energy and with equal promptness, while nearly three-fourths of one class were restored, nearly nine-tenths of another class permanently resisted all these efforts, and remained uncured and incurable.

Besides the incurability of some cases of lunacy inherent in their very origin, there are also other and subsidiary influences that afterwards intervene to prevent the possibility of restoration, however judiciously and perseveringly it may be sought.

Even supposing, then, that every case of lunacy was, in its beginning, submitted to the best remedial measures that human skill has yet devised, there would still be some that baffle all effort and remain unhealed, and there must be a surplus of cases to be supported in their disease during their earthly lives.

As every year adds to the number of the insane, and will do so until we lead more perfect lives, and learn, by a better self-administration, to avoid the causes of this disease, and as,

in the present state of science a portion of them will fail of being restored, there will be an annual surplus to be added to the list of incurables. This process has been going on in Massachusetts for years, until there are two thousand and eighteen of those who cannot enjoy the light of reason again on earth. But with all this unavoidable addition to their numbers, they need not amount to the great proportion—more than three-fourths of the whole—that we now have among us.

A part of the two thousand and eighteen incurables necessarily become so from the nature of their malady. But another, and perhaps a larger, part become so from the want of early means of restoration.

MALES AND FEMALES.

There were twelve hundred and fifty-nine males and thirteen hundred and seventy-three females among the insane of this State. These were in proportion to the whole calculated population of their respective sexes—one male lunatic in four hundred and forty-two, and one female lunatic in four hundred and thirteen, being a small excess of the latter. Among the natives, this ratio to the population is nearly the same, being one in every four hundred and forty-four males, and one in every four hundred and forty-three females.

There is, however, a marked difference in the sexes among the foreigners, there being two hundred and seventy-eight males, or one in four hundred and thirty-five, and three hundred and forty-seven females, or one in three hundred and twenty-six of their sexes respectively.

A larger proportion of the males are supported by the towns; but a considerably larger proportion of the females are State paupers, which is due to the excess of foreign female lunatics. A larger proportion of the females than of the males are in the curative hospitals; but a much larger proportion of the males are in the receptacles and prisons.

The present condition of both sexes is nearly the same, and the prospects are shown to be exactly alike, there being the same proportion of each who are curable and who are incurable, as is shown in the last line of table XVII.

The excess of females among the lunatics of Massachusetts is owing to accidental circumstances, and in a great measure

to the number of foreigners. But insanity is not universally, nor even generally, distributed in this proportion among the sexes. The reports of two hundred and fifty hospitals in America and Europe show that, during the various periods of their existence, they received sixty-four thousand seven hundred and eighty-six male, and sixty thousand two hundred and forty-two female, patients.

The following table shows the distribution of various classes of the insane among the sexes in Massachusetts:—

TABLE XVII.—SEXES.

	MALES.						FEMALES.					
	Total.	CONDITION.			PROSPECT.		Total.	CONDITION.			PROSPECT.	
		Mild—manageable.	Excitable—troublesome.	Furious—dangerous.	Curable.	Incurable.		Mild—manageable.	Excitable—troublesome.	Furious—dangerous.	Curable.	Incurable.
Native, . . .	981	503	331	94	147	777	1026	511	362	73	178	752
Irish, . . .	201	77	92	21	28	167	311	105	157	43	43	228
British, . . .	40	15	12	6	4	28	26	9	11	3	1	15
German, . . .	20	7	12	1	1	19	3	2	—	—	1	—
Other Foreign,	17	3	10	—	1	14	7	3	1	1	2	4
Total Foreign,	278	102	126	28	34	228	347	119	169	47	47	247
Independent, .	525	295	186	26	107	362	585	278	221	36	128	391
Town Paupers,	420	229	136	52	46	359	409	201	162	33	36	285
State Paupers,	314	114	149	43	45	268	379	120	192	58	55	319
Total Paupers,	734	343	285	95	91	627	788	321	354	91	91	604
At Home, . .	602	383	161	53	102	437	682	415	226	42	106	508
In Hospitals, .	522	220	241	56	85	434	619	200	305	82	109	413
In Receptacles,	92	32	58	2	2	90	54	19	31	4	3	51
In Prisons, .	16	8	3	5	7	9	5	2	2	1	1	4
State Almsh'ses	18	7	8	3	—	18	22	8	9	5	3	19
Ratio, . . .	1000	530	371	99	152	848	1000	512	391	95	152	848

IDIOTS.

The main object of the Legislature in ordering this inquiry was, to ascertain the number and condition of the insane, in order to determine the amount and kind of the responsibility which rests upon the State or the people for their restoration or protection, or for the safety of the community. The preliminary Memorial of the Trustees of the Worcester Hospital and the Report of the Committee of Charitable Institutions, to whom the matter was referred, and who proposed this Resolve, seem to have this object exclusively in view.

Nevertheless, as the Resolve specified idiots among the subjects of inquiry, the Commission included them in their circulars, and answers were obtained to these questions through the same channels—the physicians and others who reported the insane.

And although in this connection all information in regard to idiots will have no other importance than to supply statistical information in respect to one of the most humiliating infirmities of the human race, and may lead to no immediate measures for their relief or the relief of the State, yet, as it shows the extent and kind of one of the burdens resting upon the people, and as a matter of future reference, the facts respecting idiocy are presented here in detail.

DISTINCTION BETWEEN DEMENTED AND IDIOT.

In making this inquiry, the witnesses were especially requested to regard the scientific and recognized distinction between lunatics and idiots, and cautioned against the commonly received idea, that the term *idiocy* should be applied to all who are deprived of mental power. An idiot is one who was originally destitute of mind, or in whom the mental faculties have not been developed. Those who have once had the use of their mental faculties, but have lost them through the process of disease, are not idiots, but demented, deprived of mind, which has once been enjoyed. This is a very common result of insanity; and a large portion of lunatics whose disease is protracted, and some in the earlier stages of their malady, fall into this condition; then they present similar manifestations of those of idiots, and by many are classed among them.

Nevertheless, these demented patients are sometimes called lunatics, and sometimes idiots, by those who look exclusively at their present condition, and not at their history. From this looseness of interpretation, there is a great variety in the classification of those who report these facts, some including more, and some less, of the demented among the insane or the idiots.

In taking the census of the United States in 1850, the marshals differed very widely in their interpretation of this matter; and hence the tables of the insane and idiots show a corresponding difference in the proportion of these two classes in the several States. There are stated to be in Rhode Island forty-two idiots, in Massachusetts forty-six, in New York sixty-three, in Virginia one hundred and fifty-seven, in Tennessee one hundred and seventy-eight, and in Alabama two hundred and six, for every one hundred lunatics within these States respectively. And there are all degrees of difference between these extremes in the other States. In some of the newer States the difference is much greater than this, which may be owing, in part at least, to the fact that the immigrants did not carry their idiots with them, while their lunatics may have become diseased since their removal.

Idiots, if they belong to independent families, are usually kept at home; and if paupers, in the almshouses. Sixty-one of these are violent and dangerous, and need the confinement and guardianship of a hospital for the public security at least.

From the report of the physicians the following table is prepared, showing the distribution, sex, nativity, pecuniary condition and age of the idiots in the State:—

TABLE XVIII.—IDIOTS IN TOWNS.

Pecuniary Condition and Age.

BERKSHIRE COUNTY.

TOWNS.	SEX.		INDEPENDENT.			PAUPER.		
	Male.	Female.	Under Sixteen.	Sixteen and over.	Subject for hospital.	Under Sixteen.	Sixteen and over.	Subject for hospital.
Adams,	6	2	2	3	-	1	2	3
Alford,	-	2	-	2	-	-	-	-
Becket,	2	1	-	-	-	-	3	-
Cheshire,	2	3	-	1	-	-	4	-
Clarksburg,	-	-	-	-	-	-	-	-
Dalton,	-	-	-	-	-	-	-	-
Egremont,	1	-	-	1	-	-	-	-
Florida,	-	-	-	-	-	-	-	-
Great Barrington,	1	3	1	1	-	-	2	1
Hancock,	-	-	-	-	-	-	-	-
Hinsdale,	-	2	-	2	-	-	-	-
Lanesboro',	2	-	-	2	-	-	-	-
Lee,	-	2	-	2	-	-	-	-
Lenox,	1	-	-	-	-	-	1	1
Monterey,	2	-	-	2	-	-	-	-
Mount Washington,	4	-	1	3	-	-	-	-
New Ashford,	-	-	-	-	-	-	-	-

BERKSHIRE—CONTINUED.

TOWNS.	SEX.		INDEPENDENT.			PAUPER.		
	Male.	Female.	Under Sixteen.	Sixteen and over.	Subject for hospital.	Under Sixteen.	Sixteen and over.	Subject for hospital.
New Marlboro', . . .	-	1	1	-	-	-	-	-
Otis,	-	-	-	-	-	-	-	-
Peru,	-	-	-	-	-	-	-	-
Pittsfield, . . .	3	4	-	4	-	1	2	1
Richmond, . . .	-	1	1	-	-	-	-	-
Sandisfield, . . .	5	2	4	1	-	1	1	-
Savoy,	-	-	-	-	-	-	-	-
Sheffield, . . .	3	3	1	2	-	-	3	-
Stockbridge, . . .	4	1	1	-	1	1	3	1
Tyringham, . . .	-	2	-	-	-	1	1	-
Washington, . . .	-	-	-	-	-	-	-	-
West Stockbridge, . .	3	-	-	2	-	1	-	-
Williamstown, . . .	4	1	-	5	2	-	-	-
Windsor,	-	1	-	-	-	-	1	-

FRANKLIN COUNTY.

Ashfield,	1	-	-	-	-	-	1	-
Bernardston, . . .	2	1	-	2	-	-	1	-
Buckland,	-	-	-	-	-	-	-	-
Charlemont, . . .	-	-	-	-	-	-	-	-
Coleraine,	2	-	-	1	-	-	1	-

FRANKLIN—CONTINUED.

TOWNS.	SEX.		INDEPENDENT.			PAUPER.		
	Male.	Female.	Under Sixteen.	Sixteen and over.	Subject for hospital.	Under Sixteen.	Sixteen and over.	Subject for hospital.
Conway, . . .	1	2	2	1	—	—	—	—
Deerfield, . . .	1	6	2	4	1	—	1	—
Erving, . . .	—	—	—	—	—	—	—	—
Gill, . . .	—	3	1	1	—	—	1	—
Greenfield, . . .	—	—	—	—	—	—	—	—
Hawley, . . .	2	1	—	2	—	—	1	—
Heath, . . .	2	2	—	—	—	—	4	—
Leverett, . . .	1	—	—	1	—	—	—	—
Leyden, . . .	2	1	—	—	—	1	2	—
Monson, . . .	—	—	—	—	—	—	—	—
Montague, . . .	2	1	1	2	—	—	—	—
New Salem, . . .	1	4	1	2	—	—	1	—
Northfield, . . .	4	1	2	2	—	1	—	—
Orange, . . .	5	2	—	7	—	—	—	—
Rowe, . . .	—	—	—	—	—	—	—	—
Shelburne, . . .	—	—	—	—	—	—	—	—
Shutesbury, . . .	1	1	—	—	—	1	1	1
Sunderland, . . .	—	—	—	—	—	—	—	—
Warwick, . . .	—	2	—	1	—	—	1	—
Wendell, . . .	—	—	—	—	—	—	—	—
Whately, . . .	—	—	—	—	—	—	—	—

HAMPSHIRE COUNTY.

TOWNS.	SEX.		INDEPENDENT.			PAUPER.		
	Male.	Female.	Under Sixteen.	Sixteen and over.	Subject for hospital.	Under Sixteen.	Sixteen and over.	Subject for hospital.
Amherst, . . .	1	2	-	-	-	-	3	-
Belchertown, . . .	2	2	1	3	-	-	-	-
Chesterfield, . . .	2	-	-	-	-	-	2	-
Cummington, . . .	-	-	-	-	-	-	-	-
Easthampton, . . .	2	1	-	2	-	-	1	-
Enfield, . . .	5	1	-	2	1	-	2	-
Goshen, . . .	-	-	-	-	-	-	-	-
Granby, . . .	-	-	-	-	-	-	-	-
Greenwich, . . .	3	2	-	4	-	-	1	-
Hadley, . . .	3	4	-	7	-	-	-	-
Hatfield, . . .	-	1	-	1	-	-	-	-
Middlefield, . . .	-	-	-	-	-	-	-	-
Northampton, . . .	2	2	1	3	1	-	-	-
Norwich, . . .	-	-	-	-	-	-	-	-
Pelham, . . .	1	-	-	-	-	1	-	1
Plainfield, . . .	1	2	-	3	-	-	-	-
Prescott, . . .	-	-	-	-	-	-	-	-
Southampton, . . .	1	1	-	1	-	-	1	-
South Hadley, . . .	2	1	2	1	-	-	-	-
Ware, . . .	2	-	-	1	-	-	1	1
Westhampton, . . .	-	-	-	-	-	-	-	-
Williamsburg, . . .	-	-	-	-	-	-	-	-
Worthington, . . .	1	-	-	-	-	-	1	-

HAMPDEN COUNTY.

TOWNS.	SEX.		INDEPENDENT.			PAUPER.		
	Male.	Female.	Under Sixteen.	Sixteen and over.	Subject for hospital.	Under Sixteen.	Sixteen and over.	Subject for hospital.
Blandford, . . .	5	1	1	4	-	1	-	-
Brimfield, . . .	2	-	-	-	-	1	-	-
Chester, . . .	2	2	-	2	-	1	1	1
Chicopee, . . .	1	1	2	-	-	-	-	-
Granville, . . .	-	-	-	-	-	-	-	-
Holland, . . .	-	-	-	-	-	-	-	-
Holyoke, . . .	-	-	-	-	-	-	-	-
Longmeadow, . .	1	2	-	-	-	-	3	-
Ludlow, . . .	1	-	1	-	-	-	-	-
Monson, . . .	2	1	-	1	-	1	1	-
Montgomery, . .	-	-	-	-	-	-	-	-
Palmer, . . .	-	1	1	-	-	-	-	-
Russell, . . .	-	-	-	-	-	-	-	-
Southwick, . . .	-	1	1	-	-	-	-	-
Springfield, . .	6	1	1	6	-	-	-	-
Tolland, . . .	-	1	-	-	-	-	1	-
Wales, . . .	1	-	1	-	-	-	-	-
Westfield, . . .	-	-	-	-	-	-	-	-
West Springfield, .	3	-	-	1	-	-	2	-
Wilbraham, . . .	2	-	-	2	-	-	-	-

WORCESTER COUNTY.

TOWNS.	SEX.		INDEPENDENT.			PAUPER.		
	Male.	Female.	Under Sixteen.	Sixteen and over.	Subject for hospital.	Under Sixteen.	Sixteen and over.	Subject for hospital.
Ashburnham, . . .	2	2	1	2	-	-	1	-
Athol,	2	3	2	3	-	-	-	-
Auburn,	1	-	-	1	-	-	-	-
Barre,	3	3	1	1	-	1	3	-
Berlin,	-	-	-	-	-	-	-	-
Blackstone, . . .	4	1	1	2	1	-	2	-
Bolton,	5	1	-	3	-	-	-	-
Boylston,	-	1	-	-	-	1	-	-
Brookfield, . . .	3	3	-	2	-	-	4	-
Charlton,	2	-	-	1	-	-	1	1
Clinton,	1	1	-	-	-	-	2	-
Dana,	1	4	1	2	-	-	2	-
Douglas,	7	3	1	6	-	1	2	-
Dudley,	-	1	-	-	-	-	1	-
Fitchburg,	-	1	-	-	-	-	1	-
Gardner,	-	4	1	2	-	-	1	1
Grafton,	1	1	2	1	2	-	-	-
Hardwick,	2	3	-	2	-	-	3	-
Harvard,	2	3	-	2	-	-	3	-
Holden,	2	1	1	-	-	-	2	-
Hubbardston, . . .	3	4	5	1	-	-	1	-
Lancaster,	3	1	1	1	-	-	2	-
Leicester,	3	-	2	1	-	-	-	-

WORCESTER—CONTINUED.

TOWNS.	SEX.		INDEPENDENT.			PAUPER.		
	Male.	Female.	Under Sixteen.	Sixteen and over.	Subject for hospital.	Under Sixteen.	Sixteen and over.	Subject for hospital.
Leominster, . . .	1	3	—	2	—	—	2	—
Lunenburg, . . .	4	—	—	2	—	—	2	—
Mendon, . . .	1	3	2	1	—	—	1	—
Milford, . . .	—	2	—	2	—	—	—	—
Millbury, . . .	—	—	—	—	—	—	—	—
New Braintree, . . .	—	—	—	—	—	—	—	—
Northboro', . . .	1	1	—	1	—	—	1	1
Northbridge, . . .	4	—	—	4	—	—	—	—
North Brookfield, . . .	1	2	—	3	—	—	—	—
Oakham, . . .	3	—	1	2	—	—	—	—
Oxford, . . .	1	6	—	4	—	—	3	—
Paxton, . . .	—	1	—	—	—	—	1	—
Petersham, . . .	5	7	1	4	—	—	1	—
Phillipston, . . .	1	3	—	4	—	—	—	—
Princeton, . . .	—	—	—	—	—	—	—	—
Royalston, . . .	1	3	—	3	—	—	1	—
Rutland, . . .	1	2	—	2	—	—	1	—
Shrewsbury, . . .	4	3	—	3	—	1	1	—
Southboro', . . .	—	5	—	2	—	—	3	—
Southbridge, . . .	5	4	4	5	—	—	—	—
Spencer, . . .	6	—	1	5	—	—	—	—
Sterling, . . .	1	1	—	—	—	—	2	—
Sturbridge, . . .	—	5	—	2	—	1	2	—

WORCESTER—CONTINUED.

TOWNS.	SEX.		INDEPENDENT.			PAUPER.		
	Male.	Female.	Under Sixteen.	Sixteen and over.	Subject for hospital.	Under Sixteen.	Sixteen and over.	Subject for hospital.
Sutton,	3	3	-	2	-	-	4	-
Templeton, . . .	2	3	-	2	-	-	3	-
Upton,	-	-	-	-	-	-	-	-
Uxbridge,	5	-	3	1	-	-	1	-
Warren,	5	-	3	2	-	-	-	-
Webster,	-	4	-	-	-	-	4	-
Westboro', . . .	2	1	-	-	-	2	1	-
West Boylston, . .	-	-	-	-	-	-	-	-
West Brookfield, .	-	2	-	1	1	-	-	-
Westminster, . . .	1	2	1	-	-	-	2	-
Winchendon, . . .	1	1	1	-	-	1	-	-
Worcester,	5	4	4	2	-	1	2	1

MIDDLESEX COUNTY.

Acton,	-	-	-	-	-	-	-	-
Ashby,	-	-	-	-	-	-	-	-
Ashland,	-	-	-	-	-	-	-	-
Bedford,	-	-	-	-	-	-	-	-
Billerica,	2	-	-	2	-	-	-	-
Boxboro',	-	-	-	-	-	-	-	-
Brighton,	-	-	-	-	-	-	-	-

MIDDLESEX—CONTINUED.

TOWNS.	SEX.		INDEPENDENT.			PAUPER.		
	Male.	Female.	Under Sixteen.	Sixteen and over.	Subject for hospital.	Under Sixteen.	Sixteen and over.	Subject for hospital.
Burlington, . . .	1	—	—	1	—	—	—	—
Cambridge, . . .	5	1	3	3	—	—	—	—
Carlisle, . . .	—	—	—	—	—	—	—	—
Charlestown, . . .	2	1	1	1	—	—	1	—
Chelmsford, . . .	3	3	—	2	—	—	4	—
Concord, . . .	—	—	—	—	—	—	—	—
Dracut, . . .	2	4	—	1	—	—	5	—
Dunstable, . . .	—	—	—	—	—	—	—	—
Framingham, . . .	—	1	—	—	—	—	1	—
Groton, . . .	3	3	—	5	—	—	1	—
Holliston, . . .	4	2	2	3	—	—	—	—
Hopkinton, . . .	2	2	—	1	—	—	3	—
Lexington, . . .	4	1	—	4	1	—	1	—
Lincoln, . . .	1	—	—	1	—	—	—	—
Littleton, . . .	—	—	—	—	—	—	—	—
Lowell, . . .	1	3	4	—	—	—	—	—
Malden, . . .	3	—	1	2	—	—	—	—
Marlboro', . . .	1	—	—	—	—	—	1	—
Medford, . . .	10	4	4	10	1	—	—	—
Melrose, . . .	3	—	—	1	—	—	2	1
Natick, . . .	1	—	—	1	—	—	—	—
Newton, . . .	1	—	—	—	—	—	—	—
North Reading, . . .	—	—	—	—	—	—	—	—

MIDDLESEX—CONTINUED.

TOWNS.	SEX.		INDEPENDENT.			PAUPER.		
	Male.	Female.	Under Sixteen.	Sixteen and over.	Subject for hospital.	Under Sixteen.	Sixteen and over.	Subject for hospital.
Pepperell, . . .	1	1	-	1	-	-	1	-
Reading, . . .	1	1	-	1	-	-	1	-
Sherborn, . . .	5	4	-	7	-	-	2	-
Shirley, . . .	5	-	1	2	-	-	2	-
Somerville, . . .	-	-	-	-	-	-	-	-
South Reading, . . .	1	-	-	1	-	-	-	-
Stoneham, . . .	-	-	-	-	-	-	-	-
Stowe, . . .	-	-	-	-	-	-	-	-
Sudbury, . . .	3	3	1	2	-	-	3	-
Tewksbury, . . .	-	1	-	-	-	-	1	-
Townsend, . . .	2	1	1	-	-	-	2	-
Tyngsboro', . . .	-	-	-	-	-	-	-	-
Waltham, . . .	3	-	1	1	-	-	1	-
Watertown, . . .	1	-	-	1	1	-	-	-
Wayland, . . .	-	2	1	1	-	-	-	-
West Cambridge, . . .	1	1	-	2	-	-	-	-
Westford, . . .	3	-	2	1	-	-	-	-
Weston, . . .	-	1	1	-	-	-	-	-
Wilmington, . . .	1	-	-	1	-	-	-	-
Winchester, . . .	-	1	-	1	-	-	-	-
Woburn, . . .	4	4	1	3	-	-	4	-

ESSEX COUNTY.

TOWNS.	SEX.		INDEPENDENT.			PAUPER.		
	Male.	Female.	Under Sixteen.	Sixteen and over.	Subject for hospital.	Under Sixteen.	Sixteen and over.	Subject for hospital.
Amesbury, . . .	2	3	-	2	-	-	3	-
Andover, . . .	3	-	-	1	1	-	2	-
Beverly, . . .	10	2	4	6	1	1	1	1
Boxford, . . .	-	1	-	-	-	-	1	-
Bradford, . . .	1	-	-	-	-	-	1	-
Danvers, . . .	2	6	2	1	-	1	4	-
Essex, . . .	1	-	-	1	-	-	-	-
Georgetown, . . .	-	-	-	-	-	-	-	-
Gloucester, . . .	9	2	4	4	1	-	3	-
Groveland, . . .	2	-	1	1	1	-	-	-
Hamilton, . . .	1	-	-	-	-	-	1	-
Haverhill, . . .	3	1	-	1	-	-	3	-
Ipswich, . . .	5	2	2	4	1	-	1	1
Lawrence, . . .	-	1	-	-	-	-	1	1
Lynn, . . .	-	-	-	-	-	-	-	-
Lynnfield, . . .	-	-	-	-	-	-	-	-
Manchester, . . .	3	1	-	3	-	-	1	-
Marblehead, . . .	-	1	-	-	-	-	1	-
Methuen, . . .	2	1	1	1	-	-	1	-
Middleton, . . .	-	1	-	1	-	-	-	-
Nahant, . . .	-	-	-	-	-	-	-	-
Newbury, . . .	-	-	-	-	-	-	-	-
Newburyport, . . .	2	2	-	4	-	-	-	-

ESSEX—CONTINUED.

TOWNS.	SEX.		INDEPENDENT.			PAUPER.		
	Male.	Female.	Under Sixteen.	Sixteen and over.	Subject for hospital.	Under Sixteen.	Sixteen and over.	Subject for hospital.
Rockport, . . .	4	2	1	—	—	—	5	—
Rowley, . . .	2	1	—	2	—	—	1	—
Salem, . . .	11	8	—	6	1	2	11	—
Salisbury, . . .	6	1	—	2	—	—	5	—
Saugus, . . .	—	—	—	—	—	—	—	—
Swampscott, . . .	—	—	—	—	—	—	—	—
Topsfield, . . .	2	2	—	2	—	—	2	—
Wenham, . . .	1	—	1	—	—	—	—	—
West Newbury, . . .	4	6	1	5	—	—	4	—

SUFFOLK COUNTY.

Boston, . . .	15	6	4	2	1	9	6	—
Chelsea, . . .	4	—	1	1	—	1	1	—

NORFOLK COUNTY.

Bellingham, . . .	1	—	—	—	—	—	1	—
Braintree, . . .	2	1	—	2	—	—	1	1
Brookline, . . .	—	1	1	—	—	—	—	—
Canton, . . .	1	3	3	—	—	—	1	—
Cohasset, . . .	1	—	—	1	1	—	—	—

NORFOLK—CONTINUED.

TOWNS.	SEX.		INDEPENDENT.			PAUPER.		
	Male.	Female.	Under Sixteen.	Sixteen and over.	Subject for hospital.	Under Sixteen.	Sixteen and over.	Subject for hospital.
Dedham, . . .	-	2	2	-	-	-	-	-
Dorchester, . . .	1	1	-	1	-	-	1	-
Dover, . . .	1	-	-	1	-	-	-	-
Foxboro', . . .	-	-	-	-	-	-	-	-
Franklin, . . .	1	1	1	1	-	-	-	-
Medfield, . . .	1	1	-	-	-	-	-	-
Medway, . . .	1	1	-	1	1	-	1	-
Milton, . . .	1	-	-	1	1	-	-	-
Needham, . . .	-	-	-	-	-	-	-	-
Quincy, . . .	2	2	2	2	-	-	-	-
Randolph, . . .	3	2	-	5	-	-	-	-
Roxbury, . . .	2	2	3	1	-	-	-	-
Sharon, . . .	1	-	-	1	-	-	-	-
Stoughton, . . .	2	-	1	-	-	-	-	-
Walpole, . . .	2	1	1	1	-	-	1	-
West Roxbury, . . .	1	-	-	1	-	-	-	-
Weymouth, . . .	14	9	9	7	-	-	6	-
Wrentham, . . .	3	2	2	1	-	-	2	-

BRISTOL COUNTY.

Attleboro', . . .	1	-	-	1	1	-	-	-
Berkley, . . .	5	3	-	4	-	-	4	-

BISTOL—CONTINUED.

TOWNS.	SEX.		INDEPENDENT.			PAUPER.		
	Male.	Female.	Under Sixteen.	Sixteen and over.	Subject for hospital.	Under Sixteen.	Sixteen and over.	Subject for hospital.
Dartmouth, . . .	6	2	2	4	1	-	2	-
Dighton, . . .	4	1	2	3	1	-	-	-
Easton, . . .	8	2	1	7	1	1	1	-
Fairhaven, . . .	5	5	2	7	1	-	1	-
Fall River, . . .	-	1	-	1	-	-	-	-
Freetown, . . .	1	3	1	2	1	-	1	-
Mansfield, . . .	5	5	4	4	-	-	2	-
New Bedford, . . .	8	8	8	3	-	1	4	-
Norton, . . .	-	-	-	-	-	-	-	-
Pawtucket, . . .	2	-	-	1	-	-	1	-
Raynham, . . .	-	1	1	-	-	-	-	-
Rehoboth, . . .	-	1	-	-	-	-	1	-
Seekonk, . . .	1	-	-	-	-	-	1	-
Somerset, . . .	2	-	-	-	-	-	-	-
Swanzy, . . .	2	2	-	4	-	-	-	-
Taunton, . . .	7	2	1	5	-	-	3	-
Westport, . . .	4	4	1	5	-	-	2	-

PLYMOUTH COUNTY.

Abington, . . .	2	2	2	2	-	-	-	-
Bridgewater, . . .	-	1	-	-	-	-	1	1
Carver, . . .	4	1	-	4	-	-	1	-

PLYMOUTH—CONTINUED.

TOWNS.	SEX.		INDEPENDENT.			PAUPER.		
	Male.	Female.	Under Sixteen.	Sixteen and over.	Subject for hospital.	Under Sixteen.	Sixteen and over.	Subject for hospital.
Duxbury, . . .	1	5	—	3	2	—	2	—
East Bridgewater, . .	—	—	—	—	—	—	—	—
Halifax, . . .	—	—	—	—	—	—	—	—
Hanover, . . .	—	—	—	—	—	—	—	—
Hanson, . . .	—	1	—	—	—	—	1	—
Hingham, . . .	2	—	—	—	—	1	1	1
Kingston, . . .	2	2	2	1	—	—	1	—
Lakeville, . . .	1	—	1	—	—	—	—	—
Marion, . . .	—	1	—	—	—	—	1	—
Marshfield, . . .	2	—	—	2	—	—	—	—
Middleboro', . . .	4	4	2	5	—	—	1	—
North Bridgewater, .	—	—	—	—	—	—	—	—
Pembroke, . . .	5	2	—	2	—	—	5	—
Plymouth, . . .	2	2	1	—	—	—	3	1
Plympton, . . .	1	2	—	1	—	—	2	—
Rochester, . . .	2	7	1	5	1	—	3	—
Scituate, . . .	—	1	—	1	—	—	—	—
South Scituate, . .	5	2	—	7	—	—	—	—
Wareham, . . .	1	2	—	—	—	—	3	—
West Bridgewater, .	—	—	—	—	—	—	—	—

BARNSTABLE COUNTY.

TOWNS.	SEX.		INDEPENDENT.			PAUPER.		
	Male.	Female.	Under Sixteen.	Sixteen and over.	Subject for hospital.	Under Sixteen.	Sixteen and over.	Subject for hospital.
Barnstable, . . .	10	15	-	17	1	-	8	-
Brewster, . . .	1	-	1	-	-	-	-	-
Chatham, . . .	1	-	-	-	-	-	1	-
Dennis, . . .	1	2	-	-	-	1	2	-
Eastham, . . .	-	2	-	-	-	-	2	-
Falmouth, . . .	1	1	-	2	-	-	-	-
Harwich, . . .	5	3	1	7	-	-	-	-
Orleans, . . .	4	4	-	5	-	-	3	-
Provincetown, . . .	1	-	-	-	-	-	1	-
Sandwich, . . .	4	4	3	2	-	-	3	-
Truro, . . .	6	2	3	2	-	-	3	-
Wellfleet, . . .	3	-	1	2	-	-	-	-
Yarmouth, . . .	1	1	-	-	-	1	1	1

NANTUCKET COUNTY.

Nantucket, . . .	2	10	2	7	-	-	3	-
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DUKES COUNTY.

Chilmark, . . .	1	-	-	1	-	-	-	-
Edgartown, . . .	5	-	-	5	-	-	-	-
Tisbury, . . .	2	3	-	3	-	-	2	-

TABLE XIX.—NATIVE IDIOTS IN COUNTIES.

Social Position, Age, and Residence.

COUNTIES.	INDEPENDENT.					PAUPER.				
	AGE.			Total.	Subject for hospital.	AGE.			Total.	Subject for hospital.
	Under Sixteen.	Sixteen and over.	Not stated.			Under Sixteen.	Sixteen and over.	Not stated.		
Berkshire, . . .	6	34	—	40	3	7	26	—	33	6
Franklin, . . .	8	26	2	36	1	3	15	—	18	—
Hampshire, . . .	3	28	1	32	2	1	12	1	14	2
Hampden, . . .	6	15	1	22	—	6	8	—	14	—
Worcester, . . .	41	96	3	140	4	10	61	8	79	4
Middlesex, . . .	21	60	1	82	3	6	31	1	38	1
Essex, . . .	17	44	1	62	5	4	50	7	61	3
Suffolk, . . .	5	3	—	8	1	10	3	—	13	1
Norfolk, . . .	23	25	4	52	3	4	16	—	20	1
Bristol, . . .	21	47	2	70	6	3	27	—	30	2
Plymouth, . . .	8	32	1	41	3	3	25	—	28	2
Barnstable, . . .	9	37	—	46	1	2	24	—	26	1
Nantucket, . . .	2	7	—	9	—	—	3	—	3	—
Dukes, . . .	—	9	—	9	—	—	2	—	2	—
Monson State Almshouse,	—	—	—	—	—	3	7	—	10	—
Tewksbury S. “	—	—	—	—	—	1	—	1	2	—
Bridgewater S. “	—	—	—	—	—	2	1	—	3	—
Totals, . . .	170	463	16	651	32	65	311	18	394	23

TABLE XX.—NATIVE IDIOTS OF ALL CLASSES.

Age and Residence.

COUNTIES.	AGE.			Total.	Subject for hospital.
	Under sixteen.	Sixteen and over.	Not stated.		
Berkshire,	13	60	—	73	9
Franklin,	11	41	2	54	1
Hampshire,	4	40	2	46	4
Hampden,	12	23	1	36	—
Worcester,	51	157	11	219	8
Middlesex,	27	91	2	120	4
Essex,	21	94	8	123	8
Suffolk,	15	6	—	21	2
Norfolk,	27	41	4	72	4
Bristol,	24	74	2	100	8
Plymouth,	11	57	1	69	5
Barnstable,	11	61	—	72	2
Nantucket,	2	10	—	12	—
Dukes,	—	11	—	11	—
State Almshouses,	6	8	1	15	—
Totals,	235	774	34	1,043	55

TABLE XXI.—FOREIGN IDIOTS.

Social Position, Age, and Residence.

COUNTIES.	SEX.		INDEPENDENT.		PAUPER.		BOTH CLASSES.	
	Male.	Female.	Age.		Age.		Age.	
			Under Sixteen.	Sixteen and over.	Under Sixteen.	Sixteen and over.	Under Sixteen.	Sixteen and over.
Berkshire, . . .	1	—	1	—	—	—	1	—
Franklin, . . .	—	—	—	—	—	—	—	—
Hampshire, . . .	1	—	1	—	—	—	1	—
Hampden, . . .	—	2	1	—	1	—	2	—
Worcester, . . .	6	—	4	1	—	1	4	2
Middlesex, . . .	3	6	4	—	1	4	5	4
Essex, . . .	2	1	—	2	—	1	—	3
Suffolk, . . .	3	2	1	—	4	—	5	—
Norfolk, . . .	1	2	2	1	—	—	2	1
Bristol, . . .	2	—	1	1	—	—	1	1
Plymouth, . . .	—	2	—	—	1	1	1	1
Barnstable, . . .	—	—	—	—	—	—	—	—
Nantucket, . . .	—	—	—	—	—	—	—	—
Dukes, . . .	—	—	—	—	—	—	—	—
State Almshouses, .	5	5	—	—	3	7	3	7
Totals, . . .	24	20	15	5	10	14	25	19

Of the total of those referred to in the preceding table, (forty-four,) six are violent and should be confined in a hospital.

It is a noticeable fact, that a larger proportion of the idiots than of the lunatics are of the independent or self-sustaining classes; 61 per cent. of idiots, and only 42 per cent. of the lunatics, are supported by their friends or their own estates.

There were only forty-four idiots found in the State who were born in foreign lands and brought to live in Massachusetts, and twenty of these were of the independent class, and only twenty-four were paupers; and ten of these paupers were children under sixteen years of age, and probably were brought with their parents, who were naturally unwilling to leave them behind. Only fourteen of these paupers were over sixteen years old. And these are all that could by any means be supposed to be sent to this country from poorhouses abroad to be supported by public charity here; and there is no ground for suspicion that any of these were sent here for this purpose.

The idiots bear a much larger proportion to the lunatics among the natives than among the foreigners, being in the ratio of fifty-one native and seven foreign idiots for one hundred lunatics in each class respectively.

Although the foreign constitute so small a proportion of all the idiots in Massachusetts, and although the idiots constitute so small a proportion of the foreigners whose minds are defective or deranged, there is probably a large proportion of these native idiots who are children of foreigners, though born in this country.

The whole of the idiots, both native and foreign, independent and pauper, are shown in table XXII.

TABLE XXII.—IDIOTS OF ALL NATIONS.

Sex, Age, and Residence.

COUNTIES.	SEX.		AGE.			Subject for hospital.
	Male.	Female.	Under Sixteen.	Sixteen and over.	Not stated.	
Berkshire,	39	35	14	60	—	9
Franklin,	27	27	11	41	2	1
Hampshire,	28	19	5	40	2	4
Hampden,	28	10	14	23	1	1
Worcester,	116	109	55	159	11	9
Middlesex,	85	50	32	101	2	4
Essex,	79	47	21	97	8	10
Suffolk,	14	6	14	6	—	2
Norfolk,	43	32	29	42	4	4
Bristol,	65	37	25	75	2	9
Plymouth,	37	34	12	58	1	6
Barnstable,	38	34	11	61	—	2
Nantucket,	2	10	2	10	—	—
Dukes,	8	3	—	11	—	—
State Almshouses,	13	12	9	15	1	—
Totals,	622	465	254	799	34	61

The two hundred and fifty-four under sixteen years of age are presumed to be capable of improvement by the training now offered by the State in the Idiot School, and are proper candidates for that institution. It is not to be assumed that those who are over this age have passed the period of improvement, but that, unless the means of education have been applied in the earlier years, it becomes of little avail afterwards; and therefore the Massachusetts school very properly limits its candidates to those within the age above specified.

COLORED INSANE AND IDIOTS.

There were found nine colored lunatics and ten colored idiots within the State; these were distributed through the counties as in the following table:—

TABLE XXIII.—COLORED LUNATICS AND IDIOTS.

COUNTIES.	Lunatics.	Idiots.	COUNTIES.	Lunatics.	Idiots.
Berkshire, . . .	1	—	Suffolk, . . .	—	1
Franklin, . . .	—	1	Norfolk, . . .	—	1
Hampshire, . . .	1	2	Plymouth, . . .	3	—
Hampden, . . .	—	2	Barnstable, . . .	—	1
Middlesex, . . .	1	1	Nantucket, . . .	1	—
Essex, . . .	2	1	Totals, . . .	9	10

RATIO OF LUNATICS AND IDIOTS TO POPULATION.

It is a matter of interest to know the proportion of persons of diseased or defective minds to the whole population, both for the sake of determining as nearly as possible, by such a calculation, the general liability of the people to become insane or idiotic, and the degree of responsibility for their support. It is also desirable to have these data as grounds of comparison of the several counties with each other, and the State with other States or countries.

TABLE XXIV.—RATIO OF LUNATICS AND
IDIOTS TO POPULATION.

COUNTIES.	Calculated Population.	NUMBER.			RATIO TO POPULATION.		
		Lunatics.	Idiots.	Both.	Lunatics—one in	Idiots—one in	Both—one in
Berkshire, . . .	53,123	119	74	193	446	717	275
Franklin, . . .	31,735	84	54	138	377	587	229
Hampshire, . . .	37,872	94	47	141	402	805	268
Hampden, . . .	58,208	105	38	143	554	1,531	407
Worcester, . . .	148,421	351	225	576	422	659	258
Middlesex, . . .	190,462	357	135	492	533	1,410	287
Essex, . . .	149,486	377	126	503	306	1,186	297
Suffolk, . . .	170,351	458	20	478	371	8,517	356
Norfolk, . . .	92,400	241	75	316	383	1,232	292
Bristol, . . .	83,741	158	102	260	530	820	322
Plymouth, . . .	59,416	139	71	210	427	836	282
Barnstable, . . .	36,427	78	72	150	467	505	242
Nantucket, . . .	8,238	12	12	24	686	686	343
Dukes, . . .	4,796	19	11	30	252	436	159
State Almshouses, .	—	40	25	65	—	—	—
Massachusetts, .	1,124,676	2,632	1,087	3,719	427	1,034	302

There is, then, one lunatic among every four hundred and twenty-seven, and one idiot among every one thousand and thirty-four, and one of either of these classes among every three hundred and two of the people of Massachusetts.

Regarding the nativity of the people and patients,—among the natives, the lunatics were one in four hundred and forty-six, and the idiots one in eight hundred and eighty-nine, and one of both in two hundred and ninety-five of the Americans. And among the foreigners, the lunatics were one in three hundred and eighty-four, and the idiots one in seven thousand nine hundred and thirty-one, and one of both in three hundred and sixty-seven of the strangers. Among the colored population, the lunatics were one in one thousand and twenty-five, the idiots one in nine hundred and twenty-two, and both classes one in four hundred and eighty-five of this race.

This is the measure and the kind of burden of lunacy and idiocy resting upon the State of Massachusetts. We have two thousand six hundred and thirty-two lunatics, and one thousand and eighty-seven idiots, and three thousand seven hundred and nineteen of both. Of the lunatics, two thousand and seven are natives, and six hundred and twenty-five are foreigners; one thousand one hundred and ten are independent, or supported by their own or their friends' income or capital; one thousand five hundred and twenty-two are paupers; and of these, eight hundred and twenty-nine are supported by the cities or towns to which they belong, and six hundred and ninety-three by the State. Four hundred and thirty-five are supposed to be curable, or at least there is no evidence that they cannot be restored; two thousand and eighteen are supposed to be incurable, and these must be supported for life.

In whatever way we look at them, these lunatics are a burden upon the Commonwealth. The curable during their limited period of disease, and the incurable during the remainder of their lives, not only cease to produce, but they must eat the bread they do not earn, and consume the substance they do not create, receiving their sustenance from the treasury of the Commonwealth or of some of its towns, or from the income or capital of some of its members.

There is no escape from this position. Whatever and

wherever these lunatics may be, whether native or foreign, independent or pauper, curable or incurable, the Commonwealth is not only deprived of that amount which by their earnings in health they contributed to its income, but more is now needed for their support than when they were able to earn it.

There being, then, no question whether the State and its people will bear this burden and support these lunatics, still the question may be asked, whether the weight may not be diminished in part and sustained in part with more ease to the Commonwealth, and to the towns, and to the friends of the patients.

It has already been stated (page 69) that insanity, if not cured in its early stages, becomes more and more difficult to be removed, and, in course of a longer or shorter period, varying mostly from two to five years, becomes fixed and incurable. Then the patient is to be supported for life. On the other hand, if the disease be submitted to proper remedial measures, three-fourths or nine-tenths may be restored, and this proportion of the patients made again self-supporting members of society.

The time required for the cure of different patients, in different forms or degrees of disease, varies from a few months in most cases to a few years in extreme cases.*

The question, then, in regard to the curable cases, which constitute three-fourths or nine-tenths of all when attacked, is between the effort and the expenditure needed for their support and the restorative means during the healing process through a few months, or their support during their lives. Between the cost of supporting for a few months and that of supporting for life, no private economist, and certainly no political economist or statesman, should hesitate.

The cost of restoring a lunatic to health, and enjoyment, and power of self-sustenance, and of contributing to the support of his family, and also of bearing his part of the burden of the State, is limited, and easily paid in money; the gain is unmeasured. But the cost of lifelong lunacy, distressing and

* The reports of five American hospitals show that the average time required for the recovery of the patients who had been deranged less than one year, was about five and a half months, and for all patients a little less than seven months. See Appendix, A.

oppressive to the friends who have the patient in charge, is immeasurable, and not to be paid in money.

Humanity would admit of no choice between these ; and the State, which is the guardian of the weak and the friendless, should surely not entertain a moment's doubt as to which it should choose.

NECESSITY OF UNUSUAL MEANS FOR THE CURE OF INSANITY.

As the disordered stomach cannot ordinarily bear the common food that others in health enjoy and digest, but needs some change of diet in order to be restored, so the deranged mind is generally troubled by the common ideas and thoughts which it found agreeable when in health, and cannot regain its former tone unless a different set of ideas is presented to it. The associates and the scenes of home, the common affairs of the family, and neighborhood and business amidst which the mind became disturbed, furnish most of the ideas and suggest most of the thoughts to those who are among them ; and therefore, if an insane person is to be relieved of the thoughts and ideas that troubled him, and have a change in his mental action, he must be removed from his home and friends, and have a change in his associates and in the objects of his attention and interest.

Men of disordered mind, when they need a change of air or scene, cannot go to a hotel, a boarding-house, or even a friend's private house, as those can who are merely invalids in body. They require more caution, forbearance and oversight, and many of them are annoying to those who are about them. They must, therefore, go to houses, places, or people devoted to their care and prepared to give them the needful attention and watchfulness.

INTEREST OF THE COMMONWEALTH IN, AND ITS RESPONSIBILITY FOR, THE PROPER CARE OF THE INSANE.

In this matter the Commonwealth and its cities and towns have more than a general interest ; and this, if not immediate and visible, is sure and unavoidable. Insanity arrests production ; the lunatic ceases to be a self-supporter, and is thrown upon his own estate, or upon his friends, or upon the public, for sustenance. For the town or the state is the responsible

indorser for every man who becomes insane, to pay the expenses of his sickness, however long it may be; and if the friends fail of this payment in any stage of the malady, the general treasury necessarily assumes and bears the remaining responsibility.

This liability of the state and towns to be called upon to support the insane is very great. It is precisely in proportion to the number of people who are living without capital upon their daily or yearly income, or whose property may become exhausted by life-enduring insanity. It has been found to be a most expensive responsibility for the towns and the state. Within the last year they supported nine hundred and twenty-five insane and idiotic persons, who would have sustained themselves if their diseased or defective minds had not deprived them of the power to do so.

It is, then, worthy of careful attention to see whether this burden of insane pauperism may not be anticipated and prevented, partially at least, if not entirely.

In regard to other forms or sources of pauperism the law exercises a wise forecast, and allows the municipal authorities to anticipate and prevent any threatening burden upon the public, by stopping the very fountain whence it may issue. "When any person by excessive drinking, gaming, idleness or debauchery of any kind shall so spend, waste or lessen his estate as to expose himself or his family to want or suffering, or to expose the town to charge or expense for the support of himself or his family," the selectmen of the towns can place him under guardianship for the care and custody of his person and the management of his estate, so that thereby his family may be saved from want and the town from charge on his account.*

The boards of health are authorized to interfere with the condition of unsatisfactory dwellings and grounds, and to cleanse and put them in order, and thus prevent the spread and continuance of disease.

The law requires the municipal authorities to look up and force truant and vagabond children into school, to prevent their growing up in ignorance and becoming burdens upon the

* Rev. Stat. chap. 79, sect. 11.

State, or less able to contribute to the support of the Commonwealth.

In these cases the principle is clearly recognized, that the body politic shall be empowered and required to assume a responsibility and a burden of care or expense in regard to individuals, in the first instance, in order that they may not otherwise become a greater burden of care and of cost.

COST OF INSANE PAUPERISM.

The management of the insane presents a wider and richer field for the same foresight, the same liberal economy, that spends a little now to save much in the future. Taking the cost of maintaining those who are in hospitals, receptacles, &c., at the average price, \$2.08 per week, paid by the town or state for them, and supposing the expense of supporting the others in the poorhouses and at home to be no more than the average cost of supporting all the other paupers in the various almshouses in the cities and towns, \$1.48 per week, the whole cost of insane pauperism, that is, of supporting the fifteen hundred and twenty-two pauper lunatics in Massachusetts, is more than one hundred and forty-six thousand dollars (\$146,897) a year.

It is impossible to determine from the reports, how many of the nine hundred and twenty-five paupers who have been thrown upon the public for support, by disordered or defective mind, were lunatics, and how many were idiots; but if they are in the proportion of the whole number of these classes who are paupers, six hundred and seventy-two are of the former class; and their support, being the proportion of the whole, amounts to more than seventy-two thousand dollars (\$72,683) a year, as the tax which the State pays for pauperism which is directly caused by insanity.

INCREASE OF INSANE PAUPERISM MAY BE PREVENTED.

It is, then, worth the consideration of the Legislature to see whether some action may not be taken to prevent the constant accession of paupers from this cause, by requiring the towns to take early measures for the cure of their pauper lunatics who are curable, and also of all others who, though independent,

yet, by reason of their lunacy, are likely to become chargeable to the public treasury.

In England the law requires that recent cases of insanity be promptly transferred from the workhouse to some curative hospital. It prohibits "the detention in any workhouse of any dangerous lunatic, insane person or idiot, for a longer period than fourteen days," and declares that "every person wilfully detaining in any workhouse any such lunatic, insane person or idiot, for more than fourteen days, shall be deemed guilty of a misdemeanor."*

"The detention of any curable lunatic in a workhouse is highly objectionable, on the score both of humanity and economy."†

In order to secure for every new patient an opportunity of restoration, if possible, the law also provides that, after an asylum shall be established for any county or borough, "no pauper, who shall have *lately* become lunatic, shall be received or lodged or detained in any house or place other than a county or borough lunatic asylum, or public hospital, or licensed house, for a longer period than shall be requisite for obtaining an order for his removal to such asylum."‡ Not trusting to the thoughtfulness of friends, and looking solely to the good of the patient, the law still further says: "Constables, as well as relieving officers and overseers, are directed to give information on oath to justices of *any* lunatics who shall not be under proper care and control, or shall be cruelly treated or neglected by the persons having charge of them;" and "justices are empowered to order such to be removed to an asylum, hospital or licensed house."§

Moreover, in order to "furnish a safeguard against neglect and abuse in case of chargeable lunatics who are kept in workhouses, and such as are residing with relatives and friends, and who have not the advantage of the supervision and care provided in the regular lunatic establishments," the benevolent law of England directs the "medical officer of each workhouse, once in three months, to visit all the pauper lunatics detained in it, and after personal examination, to insert their names,

* Report of Commissioners in Lunacy, 1847, p. 241. † Ibid. p. 242. ‡ Ibid. p. 245. § Report, 1854, p. 6.

together with a variety of particulars, as to their age, sex and condition, in a list in the form set forth in the schedule, with a declaration under his hand attached to it that the persons enumerated are properly taken care of and fit to be at large, and to transmit such list to the office of the commissioners in lunacy."*

Besides all the motives of humanity, and the hope of restoring lost men to themselves and to society, Massachusetts may take example of the older nation in her wise care of her insane children, and prevent their becoming chargeable to the public treasury from any neglect of the best means for their restoration to mental health.

But for this purpose it will be first necessary that sufficient hospitals be provided, and that they be placed within the reach, the means and the motives of the people, and that both the overseers of the poor and the friends of the patients be induced or required to send all recent cases of insanity to them.

The public hospitals, and some private establishments adapted to the purpose, offer the only home in which most lunatics can be comfortably managed and properly treated. In these they are separated from the scenes and companions, the interests and the suggestions of thought, that were burdensome at home, and sometimes causes of mental disturbance, and interfered with the curative process.

NUMBER OF LUNATICS AND IDIOTS TO BE PROVIDED FOR.

Although there are two thousand six hundred and thirty-two lunatics in the State, it is not to be supposed that all of these need to be removed from their homes, or can derive any benefit from the curative or custodial means offered in the hospitals or elsewhere. Many of them have not only been so long deranged as to be past restoration, but they are mild and harmless, and can be kept as well at their homes or in the town poorhouse as in a public institution. These constitute about nine hundred, for whom nothing more is required.

But there are one thousand seven hundred and thirteen (table II., page 39) reported by the physicians who should

* Report of Commissioners in Lunacy, 1847, p. 277-8.

enjoy the advantages of a hospital, either for their healing or for their protection, or for the safety of the public.

These include all the recent cases which present any prospect of restoration, and are deemed curable, or at least not incurable, and also all the violent and furious cases, and most of the excitable and troublesome lunatics; they include even some of the mild but incurable cases whose disposition to wander and become vagabonds makes them, if not dangerous, at least troublesome, and sources of anxiety to their friends, and renders a more strict guardianship necessary than would be obtained at home. To these one thousand seven hundred and thirteen lunatics there should be added the sixty-one violent and dangerous idiots who need the same restraints—making one thousand seven hundred and seventy-four for whom the accommodations or the restoring powers of a hospital should be provided.

Having thus ascertained how much was wanted for the insane in the State, the next step was to learn, how far this want is already supplied.

EXAMINATION OF HOSPITALS AND PRISONS.

In obedience to the requirements of the Legislature, the Commission examined every public establishment within the Commonwealth where the insane are or may be confined under the sanction of the law, including the four lunatic hospitals, the receptacles for the insane, the houses of correction, all the jails except that at Provincetown, the State prison and the State almshouses, and also two private establishments where the insane are received and treated. The Commission visited some and corresponded with all the hospitals in the other Northern and the Middle States, where it is supposed that any lunatics belonging to Massachusetts might be.

The following table shows the number of Massachusetts patients in each of these hospitals.

TABLE XXV.—LUNATICS

Belonging to Massachusetts in Hospitals.

HOSPITALS.	SEX.		NATIVE.			FOREIGN.			ALL NATIONS.		
	Male.	Female.	Curable.	Incurable.	Total.	Curable.	Incurable.	Total.	Curable.	Incurable.	Total.
Worcester, . . .	175	189	27	204	231	28	105	133	55	309	364
Taunton, . . .	118	134	32	113	145	35	72	107	67	185	252
Boston, . . .	107	155	9	67	76	14	172	186	23	239	262
McLean, . . .	70	83	39	106	145	2	6	8	41	112	153
Pepperell, . . .	6	13	8	11	19	—	—	—	8	11	19
Brattleboro', Vt., .	33	21	1	51	52	—	2	2	1	53	54
Providence, R. I., .	7	18	7	18	25	—	—	—	7	18	25
Hartford, Ct., . .	3	3	3	3	6	—	—	—	3	3	6
Concord, N. H., . .	1	3	—	4	4	—	—	—	—	4	4
Augusta, Me., . . .	2	—	1	1	2	—	—	—	1	1	2
Totals, . . .	522	619	127	578	705	79	357	436	206	935	1141

HOSPITAL AT WORCESTER.

The Hospital at Worcester has accommodations for three hundred and twenty-seven patients, besides the solitary and strong-rooms, or cells, which are designed for an occasional, and not a permanent, use ; but when the house is crowded, as it is now, and as it has been excessively for several years, the officers feel compelled to make constant use of some or all of these strong-rooms. Although this institution contains now three hundred and sixty-four, and did contain five hundred and sixty-seven, previous to the opening of the Hospital at Taunton, yet, regarding the best good of the patients, three hundred and twenty-seven is the utmost that can be received.

This Hospital was planned and the greater part built before most of the modern improvements were made in institutions for the insane, and the subsequent additions have been built in style and form corresponding to the original structure.

HOSPITAL AT TAUNTON.

The Hospital at Taunton was finished in the spring of 1854; and the trustees, on receiving it from the hands of the building commission, immediately altered the structure by removing the solitary strong-rooms, and adding others more advantageous to the purposes of the institution. In other respects the Hospital would be improved and rendered more available by alteration and arrangement according to the modern improvements; yet such changes would be very difficult and costly, and therefore inexpedient at the present time.

This Hospital was intended for two hundred and fifty patients; but the pressure for admission has compelled it to receive two hundred and fifty-six.

HOSPITAL AT BOSTON.

The Hospital at South Boston was built in conformity with the law of 1836, requiring the counties to provide apartments in the Houses of Correction for the idiots and insane not furiously mad, and in accordance with some other legislation for this especial purpose. It is placed between the House of Correction and House of Industry, with a very limited extent of grounds, insufficient for the purposes of the establishment, and affording little or no room or opportunity for labor or recreation abroad.

The house is crowded, having two hundred and sixty-seven patients, with only rooms for two hundred, and no spare rooms for workshops or gatherings of the patients for any other purpose.

In view of this crowded state of this establishment, the city government is agitating the question of building a new Hospital on a more ample and commodious site, where all the accommodations and conveniences for the patients may be offered to them.

MCLEAN ASYLUM.

The McLean Asylum was projected before the construction of lunatic hospitals had attracted much attention, and it has grown by the addition of parts from time to time until it has arrived at its present capacity. The form and condition of the site and local circumstances have been necessarily regarded in the arrangements of the several wings and parts of the establishment, so that the form and construction of the building, as it is now, are very different from what they would be were it planned and built according to the ideas of the present time. It is built on a peninsula, where their grounds must be limited, and therefore cannot be made so useful to the establishment and to the patients who reside there as is desirable. Nevertheless, with its abundant and appropriate provisions for the comfort and management of the patients, and with the various convenient and graceful means of occupation and amusement, it affords an excellent and desirable home for two hundred patients; and to this its numbers are limited.

This institution is open to all patients whose friends may apply for their admission and can afford to pay the necessary cost. Its high character and reputation for successful management through nearly forty years, and its elegant accommodations, render it especially attractive to the wealthy, and draw many from abroad. There were forty-seven patients from other States.

There are private establishments at Pepperell and Dorchester. These can accommodate about forty patients, and have now twenty-five belonging to Massachusetts.

These are all the Hospitals within this State.

The following table shows the proper accommodations in each, and the number of Massachusetts patients now resident in them:—

TABLE XXVI.—HOSPITAL ACCOMMODATIONS AND MASSACHUSETTS PATIENTS RESIDENT.

HOSPITALS.	Accommodations for	Massachusetts patients resi- dent.
Worcester,	327	364
Taunton,	250	256
McLean,	200	153
Boston,	200	267
Pepperell, &c.,	40	19
Totals,	1,017	1,059

All our own public institutions are more than full. That at Worcester has thirty-seven, that at Taunton six, and that at Boston sixty-seven more than they can well accommodate. The officers of the McLean Asylum, for want of room, reject a large number of those who ask for admission; but the State Hospitals and that at Boston are obliged to receive all that are sent to them through the courts, who supply them with the great majority of their patients.

LUNATIC RECEPTACLES CONNECTED WITH HOUSES OF CORRECTION.

The law of 1836, Supplement to Revised Statutes, page 4, chapter 223, requires,—

SECT. 1. "That there shall be within the precincts of the House of Correction, in each county in this Commonwealth, a suitable and convenient apartment or receptacle for idiots and lunatics or insane persons not furiously mad, to be confined therein as hereinafter provided."

SECT. 2. "When it shall be made to appear, on application made in writing to any two justices of the peace, one of whom shall be of the quorum, or any police court, that any person being within the jurisdiction of such justices or courts is an idiot or lunatic not furiously mad, the said justices or courts

are hereby authorized to order the confinement of such persons in the receptacle provided for the purpose."

Only three counties, Suffolk, Middlesex and Essex, have complied with the requirements of this law and made this provision for their insane.

The Boston Hospital, already described, meets the condition of this law.

IPSWICH RECEPTACLE.

The receptacle for lunatics at Ipswich, in Essex County, is connected with the House of Correction, and under the same roof; yet it is entirely separated from the prison by the centre building, which contains the dwelling of the superintendent and family, the offices connected with the establishment, and by the kitchen and eating-room for the patients. A closed brick wall, also, prevents all access from one to the other. The yards are at the opposite ends of the building; that of the prison is surrounded by a high brick wall, and that of the lunatics by a high fence, so that no communication can take place between them.

The lunatic department is a single wing, three stories high, besides the basement.

The internal arrangements of the several stories are similar to those usually found in the wings of lunatic hospitals. There is a hall in each, sixty-three feet long, twelve feet wide, and ten feet high, running the entire length, with lodging-rooms on each side. These rooms are ten feet long and six feet wide, and of the same height as the hall. There is a large window at the end of each hall, and a smaller one in each lodging-room, all with iron sashes, and glazed with seven by nine glass.

The doors are all thick and heavy, and fastened with strong locks.

Besides these rooms, there are several strong-rooms or cells in the basement story for the excited and furious patients. These have grated windows like those of a prison, and some of them are provided with strong shutters, to prevent the violent inmates from breaking the glass, and to furnish more effectual security against any attempts to escape. There are also very heavy doors, which are secured with bolts and locks, to resist the destructive efforts of the furious.

Besides these means of security there are provided hand straps, mittens, muffs, &c., to restrain those who need them; and these are occasionally used.

There are eighteen rooms in each story, and also, bathing-rooms, and water-closets sufficient for each sex in the building.

The whole is warmed by hot-air furnaces in the basement, and imperfectly ventilated by Emerson's apparatus. There is an aperture for the passage of air from the lodging-rooms to the halls, and the air ducts open from the halls to the ventilators.

There are yards or airing courts for the patients contiguous to the building, and also several acres of land connected with the establishment, on which some of the men work in the summer. Some of the women are employed in the kitchen and in doing some of the other work about the establishment.

There were forty-nine male patients in two of these halls, and nineteen females in the other.

As there were only thirty-six lodging-rooms in the male wards, and two of these were occupied by the attendants, it was necessary that fifteen of these rooms, only six feet by ten, should receive two lodgers each; and in the female ward it was necessary that two rooms should do the same.

Throughout the whole establishment neatness and order prevail.

There were three attendants to take the charge of those sixty-eight patients, one in each hall.

All these patients were orderly and quiet at the time of visitation. Although the whole forty-nine male patients were then crowded into one hall, on account of the temporary cleaning of the other, yet there was no disorder, no apparent discontent. They were mostly old cases, and demented. Yet there were some whose diseases were not of very long standing, and were probably susceptible of restoration under proper remedial influences.

EAST CAMBRIDGE RECEPTACLE.

The county commissioners of Middlesex have provided apartments at East Cambridge for their lunatics within the precincts of, and connected with, the House of Correction.

The whole establishment consists of the Jail, the House of Correction proper, the workshop, the kitchen, the store-house, and the receptacles for the insane, which are all in and around the small yard or open ground in several separate buildings. The convicts march across this yard between their prison-house and the workshop several times a day.

There are two houses for the insane, one for each sex, both thirty feet by forty. They are on opposite sides of the yard, and unconnected with the other buildings of the establishment. The house for the males is two stories high, and that for the females is three stories. In each of these stories there is a middle hall, about eight feet wide, running through the whole length of the building, with rooms for sleeping on each side. There are seventeen of these small lodging-rooms in the house for males, and twenty-six in that for females. The attics are also occupied as dormitories.

These buildings are heated by steam, and ventilated by a system depending on the movement of the external air. The warmth was satisfactory; but in the main building the means of ventilation were "insufficient to prevent disagreeable smells pervading the whole building." *

There is an airing court connected with the females' building, about sixty feet in length and forty in width, surrounded by a high wall. A smaller airing court is connected with the males' building, and similarly guarded against the escape of the inmates.

The building for females is near to the street, and they are subject to the observation of, and conversation with, the passers by; and the noise of the patients, especially of the excited ones, can be heard abroad.

Both of these buildings are very much crowded. In two halls, forty feet by eight or ten, there were thirty-five male patients during the day, and at night they were as uncomfortably situated. Twelve of them sleep in the attic, "which is lighted by a single window in each end, and high enough to stand upright in the middle, and sloping to the eaves," * the beds being under the low roof, with no supply of air. The other twenty-one occupy the few small sleeping-rooms below,

* Letter to the Commission from Hon. John S. Keyes, Sheriff of Middlesex.

and in many of them two were obliged to sleep. "The basement story or cellar is used for an eating-room." *

The building occupied by females, having three stories, has more room, yet not enough for the thirty-five patients. Six of these occupy the attic, and the other twenty-nine sleep in the small bed-rooms arranged on the sides of the halls in the other stories.

This establishment is under the charge of the master of the House of Correction, who has the superintendence of a very large number of convicts, with all the responsibility for their security, labor and board, and has therefore as much to do in the management of the affairs and inmates of the prison as should be required of one officer. He, of course, must delegate the care of the insane to an under officer, or principal attendant for each sex. Such persons, male and female, are employed to oversee each building and the inmates, but all their assistants are convicts. Most of these assistant attendants were sent to the House of Correction for intemperance, and probably are selected as the best in the whole convict population of the prison for the care of lunatics.

Except walking in these small yards, there is no opportunity of obtaining any exercise in the open air in the mild and clear weather, and none at all when storms or cold prevent their going abroad. Within the house there are no means of employment or occupation, labor or amusement. The patients have nothing to do but lounge listlessly about the yard without or the halls within the house.

This receptacle is provided with the means of restraining and confining the excited and furious in strong-rooms and with mittens, straps, &c. Most of the patients of both sexes are natives of other countries, and incurable. About half are mild and harmless—"not furiously mad," as described in the law. Nearly as many are excitable and troublesome; some are turbulent, some furious, and some very noisy.

In the female building one patient was vociferating so loudly that she was heard in the street, and was offensive to the people who were passing by.

* Mr. Sheriff Keyes' Letter.

HOUSES OF CORRECTION AND JAILS.

The Commission visited and examined all the other Houses of Correction and all the Jails in the State excepting that at Provincetown, and ascertained the extent and the kind of accommodations which were provided in them for the idiots and insane not furiously mad, in conformity with the law of 1836.

LENOX PRISON.

In Lenox, the Jail and House of Correction for Berkshire County were in one building—a prison of the modern form, one within another, with ranges of small cells side by side for the convicts. But there is another apartment, about twelve or fifteen feet square, with a range of cells on one side opening into it. These cells are small, like those in the principal prison, and made strong with iron doors and all the means of security from escape.

Until recently, there have been three lunatics confined in these cells for about twelve or fifteen years. They were separated from the convicts, no others being confined in these cells or in this room. They had no means of exercise, no occupation, and were always retained in their cells, except that one at a time, when peaceable, was allowed to be in the larger room, but they went no farther.

These three lunatics have recently been removed to the Hospital at Worcester.

These cells were not originally prepared for the lunatics, but for debtors and for female prisoners.

There were no lunatics there at the time of the visit.

SPRINGFIELD PRISON.

This single prison includes both the House of Correction and the Jail for Hampden County. This is arranged in the modern form, one prison within another, with the galleries and small cells side by side contiguously, and no other room or place for confinement or lodgment of those committed to this establishment.

There is no workshop; but the area in front of the cells and between the inner prison and the outer walls is appropriated for this purpose. There were no lunatics in the prison at the

time of the visit, nor had there been any since the present master of the house commenced his administration.

But if any one should be committed to this prison, he must be confined in one of these stone-walled, iron-grated cells, by the side of those containing convicts, during the night when they are not at work, and he must be before them, and can see them at any time while they are at work during the day.

NORTHAMPTON PRISON.

This is a new, spacious establishment, including both Jail and House of Correction for Hampshire county under one roof. The whole is built on the latest improved plan. On one side of the inner prison are galleries running in front of ranges of small cells for close confinement. This is called the House of Correction, and is appropriated for the convicts. On the other side are ranges of larger rooms, ten or eleven feet square, but equally strong, with stone walls, and iron-grated doors. This is called the Jail, and is used to confine those who are accused of crime, but not yet tried or sentenced.

There is no special provision made for lunatics, and no place to keep them, except in the rooms provided for the accused or the convicted prisoner.

There were no lunatics at this House of Correction at the time of the visit, but there had recently been four committed to its charge. One was found in the streets at Ware, noisy and troublesome. He was supposed to be a recent case, although his history could not be ascertained. After a detention of four months, becoming very difficult to be managed, this patient was removed to Worcester. Another, who was sent there for similar reasons by the magistrates, was afterwards also sent to Worcester. Both of these were supposed to be dangerous to the public peace and safety, and were confined in the House of Correction for the public security, and not for their own good.

GREENFIELD JAIL.

This is the only prison in Franklin County. It is a small building of the old fashion, with a few stone rooms, sufficiently large, but dark, cold and cheerless. This is the Jail exclusively. There being no House of Correction, an arrangement is made

with the authorities of Hampshire to receive into the prison at Northampton such convicts as should in their county be sentenced to confinement and labor.

There are no suitable apartments provided for lunatics; and if they are sent to the House of Correction by the justices or other authorities, they must be confined in this common jail, or sent to the House of Correction at Northampton.

There are now no lunatics confined in this prison, and there has been but one since the present jailer has had charge of it. There was a female lunatic within the year confined for some months, awaiting trial on the charge of homicide. She was acquitted on the ground of insanity, and sent to the State Hospital at Worcester.

WORCESTER PRISON.

The House of Correction at Worcester is of the modern form, with galleries and ranges of cells, but with no especial accommodations for the insane. There are none now in this prison; but some months ago, and for some time previously, nine lunatics were confined there. Having no other place for them, the lower range of cells on one side of the prison, was given up to them.

CONCORD JAIL.

The Jail for Middlesex County, at Concord, is one of the oldest prisons in the State. It is a heavy stone building of the old form, with large and separated rooms, all with stone floors, heavily grated windows looking abroad, and very strong doors. Here are two lunatics confined, and have been for eighteen years. They occupy the lower rooms in the building; and one of them, on account of his noisy disposition, was put in a back or inner room, which was formerly the dungeon for the confinement of the most refractory convicts. It is now lighted in some degree, though it is yet the most uncomfortable room in the jail.

These lunatics are both State paupers. One is colored, and supposed to be an American, and the other is a Swede. Both are usually mild. The negro has generally been allowed to go about the village at will, and has spent much of his time in day labor, sawing wood, &c., for the people in the vicinity.

At other times he is very troublesome; and now for several months he has been very noisy, disturbing the neighborhood with his outcries. The Swede is "generally quite harmless, and to some extent useful in and about the jail, attending church regularly, and more foolish" (demented) "than insane, unless aroused to anger by some provocation." *

LOWELL JAIL.

This is the third jail in Middlesex; it is a small building, with an inner prison, with the galleries and ranges of small contiguous cells, and no other rooms. There are no lunatics confined there, nor have there been any, except for temporary security while waiting to be transferred to Cambridge. But when they are there they are placed in these cells by the side of those occupied by the criminals. During the visit these prisoners were very noisy, talking loudly; the sound of their voices was distinctly heard even in the neighboring office of the jailer, and would unavoidably reach and disturb the lunatics if confined with them.

LAWRENCE PRISON.

The Lawrence Prison is new, just completed by the county of Essex, after the best model of the time. It contains a House of Correction and Jail in the same building. The cells are large, eight feet square, arranged along the galleries for the security of criminals, but there are no apartments for the insane. There have as yet been no lunatics admitted here even for a temporary lodgment.

NEWBURYPORT JAIL.

This is one of the old prisons of Essex. It is built with entries and large rooms to contain one or more prisoners. One lunatic is now confined there, and he has been an inmate of that jail for many years. He is harmless, and allowed to go about the prison and the house at will, and to ride abroad, and makes himself useful to the jailer by carrying food to prisoners, &c. He is a native of Newburyport, and was, until lately, a man of property, but is now supported by the city. His room in the jail, like the others, is

* Letter to the Commission from Hon. John S. Keyes, Sheriff of Middlesex.

guarded with grates, a thick oaken door, and very heavy bolts. Yet the door stands open and he is free to move abroad. His room is comfortably furnished, and he prefers to stay there. He has been at the Hospital in Worcester; but, being incurable, his friends prefer to have him at the jail, where he is contented and very kindly treated, and where they can easily visit him.

SALEM JAIL.

The old Essex Jail in Salem is like that in Newburyport; but it contains no lunatics, nor have any been received there, except, perhaps, for temporary custody while waiting to be transferred to Ipswich.

BOSTON JAIL.

The new Jail at Boston has no place for the insane in the main part. But in the lockup there are several rooms in which prisoners under the excitement of delirium tremens, and vagabond or turbulent and troublesome lunatics are confined while waiting for their friends to come for them, or to be transferred to the Hospital at South Boston. These are often found strolling in the streets, or disturbing the peace in some houses, and are brought here by the police for safe keeping and for the adjudication of the courts. For this purpose there was one female lunatic here who was found strolling in the streets in the night. Her room was sufficiently comfortable for her short detention.

BOSTON HOUSE OF CORRECTION.

In the House of Correction at South Boston there is a very comfortable Hospital, where every thing is provided for the criminal patients that their disease can require and their position admit. Here were three insane convicts, who had become deranged since they had been in prison. They are under the immediate charge of Dr. Walker, the Physician of the Lunatic Hospital, and receive all the appropriate treatment they need. Whenever the criminal lunatics can be better treated in the Lunatic Hospital they are removed to that place, where they enjoy all the advantages that are given to any other patients in that institution.

DEDHAM PRISON.

This Prison, for Norfolk County, is of the modern form, and embraces both the Jail and House of Correction in one building. The cells are all small and alike along the galleries, and looking into the areas.

There are no apartments provided for lunatics, no place for them, except in the narrow and strong cells by the side of the criminals.

There are three lunatics in this prison. One from Dover was committed by the magistrates under the law of 1836. He is boarded here by his friends, from his own substance, for custody. He was clothed in the party-colored garments worn by the convicts of the prison.

Another, a colored female, more idiotic than lunatic, who set fire to a barn many years ago, as she is supposed to be a dangerous person to be at large, she has been detained here ever since. She is mild, and apparently harmless, but the jailer thinks still unsafe to be abroad.

Another, an Irishman, confined for crime, became insane in prison, and is supposed to be dangerous and unsafe to be at large.

TAUNTON JAIL.

The old Bristol Jail in Taunton is of the old form, with large and very strong rooms of stone, built to resist violent efforts for escape. There are no lunatics in this prison, nor have there been any, except for temporary lodgment while waiting to be sent to the House of Correction in New Bedford.

NEW BEDFORD PRISON.

In New Bedford the Jail and the House of Correction for Bristol are in one establishment. There are several buildings around one yard, and are of both the old and the modern form, for the confinement of criminals. But there is no especial provision for the insane.

There were eight lunatics in this prison. One was constantly furious. Another, who had recently been there, could not be clothed. Some were excitable, others were quiet and easily managed. One was a recent and curable case.

These are confined in various rooms, as seems to be for their advantage and the convenience of the administration of the

prison. One was in a cell five feet wide. Some of these are in a room appropriated for a hospital where others were sick.

This room, like the others, is strong, with grated windows, and thick bolted doors. It was crowded and uncomfortable, and very unfit for the insane. The beds in this hospital were in boxes or bunks, one above another, as in soldiers' barracks.

The whole aspect of the place was miserable, gloomy and forbidding, especially to persons of diseased mind.

PLYMOUTH PRISON.

In Plymouth the House of Correction and Jail were both in one establishment and one yard, though separate buildings. The Jail is of the old form, with entries and large rooms. The House of Correction is modern, with galleries and small cells within the outer walls.

There is no provision for the insane, and no place for them, except in the strong and grated rooms of the Jail, or in the narrow cells of the House of Correction.

One lunatic is confined there. He is a man of property, but violent and dangerous at home and in his own neighborhood; and even here he is very troublesome, and sometimes unmanageable. At the time of the visit he was mild and at work in the field or garden. His room was in the Jail.

BARNSTABLE JAIL.

The Prison in Barnstable is one small building, and is called both House of Correction and Jail. It is of stone, and has a few large rooms, and no cells, and no proper apartments for the insane.

There was an insane man confined in this prison at the time of the visit. He was generally mild and manageable. Yet he was easily disturbed, and might be excited suddenly, and without apparent cause. He was sometimes even furious, and was therefore unsafe to be at large, though unfit to be in prison.

NANTUCKET JAIL.

In Nantucket there is no House of Correction, and only a wooden Jail. There were four rooms in this building, furnished as comfortably as the dwellings of the laboring poor, and having more the appearance of a private dwelling than of a prison. There were no insane persons at the time of the visit,

and there had been none confined in the Jail within the memory of the jailer who has had charge of it for many years.

EDGARTOWN JAIL.

In Edgartown the Prison for Dukes County is an extremely small stone building, with four rooms, nine feet square. One end is called the Jail and the other the House of Correction. There are no rooms for the insane, nor were any insane or any other inmates in this prison.

STATE PRISON.

In the State Prison at Charlestown there is a very comfortable and commodious hospital, with good and airy rooms for the sick, where they can have all the facilities for attention that their cases demand and their condition admits.

Three of the convicts are now insane. They are mild and at work, their delusions not preventing their attending to the labors required of them under the watchful care of the officers.

The lunatics in this prison are under the care of the physician of the establishment, and when occasion calls for it, they are examined by a commission of high character, and if need be, transferred to one of the State Lunatic Hospitals.

The Jail at Provincetown, in Barnstable County, was not examined.

It appears, then, from these personal examinations and this review, that there are Houses of Correction in only ten of the fourteen counties, that in Essex there are two, and in the other four counties there are only Jails. Besides these, there are seven other Jails in the counties of Middlesex, Essex, Suffolk, Bristol and Barnstable, making eleven Houses of Correction and eleven separate Jails within this Commonwealth, besides the State Prison at Charlestown.

Except at Boston and Ipswich, there are no suitable apartments provided "for the idiots and the insane persons not furiously mad" in connection with any of the Houses of Correction in the State; nor are any provisions whatever made, under the law of 1836, except in Suffolk, Essex and Middlesex. Yet lunatics who are not convicts are found in seven of these prisons, and they have been or may be, under the law of 1836, confined in any or all of the others, notwithstanding their entire unfitness for such purposes.

TABLE XXVII.—LUNATICS

In Receptacles, Prisons, &c.

	SEX.		NATIVITY.		CONDITION.				Convicts.	Sent from hospital at Worcester.	
	Male.	Female.	American.	Foreign.	Mild—manageable.	Excitable—troublesome.	Furious—dangerous.	Not stated.			
RECEPTACLES.											
Ipswich, . . .	64	22	41	45	22	63	1	—	8	9	
Cambridge, . . .	28	32	13	47	29	24	5	2	—	7	
Totals, . . .	92	54	54	92	51	87	6	2	—	16	
HOUSES OF CORRECTION.											
Boston, . . .	2	1	—	3	—	3	—	—	3	—	
Dedham, . . .	2	1	2	1	—	1	2	—	2	1	
New Bedford, . . .	3	3	3	3	4	1	1	—	—	3	
Plymouth, . . .	1	—	1	—	—	—	1	—	—	—	
JAILS.											
Concord, . . .	2	—	1	1	1	—	1	—	—	2	
Newburyport, . . .	1	—	1	—	1	—	—	—	—	1	
Boston, . . .	1	—	—	1	—	—	1	—	—	—	
Barnstable, . . .	1	—	1	—	1	—	—	—	—	—	
State Prison, . . .	3	—	1	2	3	—	—	—	3	—	
Total Jails & Prisons,	16	5	10	11	10	5	6	—	8	7	
Total of all, . . .	108	59	64	103	61	92	12	2	16	23	

STATE ALMSHOUSES.

The Commissioners visited and examined the State Alms-houses at Monson, Tewksbury and Bridgewater, in reference to their means of accommodating the insane and their fitness for the residence of these patients. These establishments were originally intended exclusively for paupers that were presumed to be sound in mind at least. It was, therefore, no part of the plan of the architect to provide for the insane. In the external and internal arrangements and structure of the buildings there are none of the means or conveniences for them. The houses are principally divided into large wards, capable of accommodating about fifty paupers in each, and are all needed for the sane. The large dormitories are also appropriated to the same classes.

Underneath one of the wings of these houses is a basement story, which is sunk five feet below the surface of the ground. There are four rooms in this subterranean place. One of these rooms has a stove and is made comfortably warm. By the side of this is another room which is used for bathing and has tubs and a tank, which is usually filled with water and is sufficiently large for many boys to bathe and even swim in, at the same time.

One of the other two rooms by the side of the warmed room is fitted with cells for the use of the males. The other on the opposite corner from the heated room is fitted with cells for the females. These cells are narrow like those of prisons. They are made strong with plank partitions. Some of the doors are made of plank bars, and others of iron bars, fixed in a heavy frame-work of wood. They all are secured with heavy prison locks or iron bolts.

These cells are all dimly and indirectly lighted, and at best are dark and gloomy. There are no means whatever for ventilation except by opening the windows of the area in front of some of these lock-ups, and at the side of the others. There are no means of warming except by what heat may chance to pass from the stove-room through the door into the passage way, around these cells.

In the coldest weather of the winter, the water was frozen so that it could not be used in the bathing-room, which is by

the side of, and contiguous to, the stove-room. The room which contains the cells for the females still colder, as it is farther from the fire, and touches only upon the corner of that which is heated.

These cells were provided for the punishment of the disobedient and refractory paupers, who sometimes need discipline.

Besides the cells, which are in all these establishments, there are in Monson "five cells in a building recently erected, which are more pleasant and healthy." *

These are all the means of separating the lunatics from the rest of the household. Ordinarily they are kept in the wards with the other paupers; but when they are excited, or are troubled by, or troublesome to, the other inmates, so that it is requisite to remove them, the only resort is to send them to these cells, for there are no other rooms to which they can be sent.

The number and condition of the insane and idiots in each of these establishments is shown in the following table:—

TABLE XXVIII.—LUNATICS AND IDIOTS. †

In State Almshouses.

LOCATION.	SEX.		NATIVITY.		CONDITION.			Total.
	Male.	Female.	American.	Foreign.	Mild — manageable.	Excitable — troublesome.	Furious — dangerous.	
Monson,	4	2	3	3	3	3	—	6
Tewksbury, . . .	7	12	5	14	5	7	7	19
Bridgewater, . . .	7	8	1	14	6	8	1	15
Totals,	18	22	9	31	14	18	8	40

* Letter of Dr. S. D. Brooks, Superintendent of the Monson Almshouse, to the Commission.

† These were the numbers in October, 1854, when the returns were made. Since that time many have been removed from Ipswich and East Cambridge receptacles, and some from the hospitals to these almshouses, so that there are now (April, 1855) about a hundred at Bridgewater, and in the others the numbers are increased.

Of the forty reported, eight are stated to be furious or dangerous, eighteen excitable and troublesome, and only fourteen, about one-third, are always mild and proper members of the general household.

SUMMARY OF ACCOMMODATIONS FOR THE INSANE.

These Hospitals, Receptacles, Prisons and State Almshouses are all the places in the Commonwealth where lunatics can be accommodated or confined, except at their homes in private dwellings, or in the city and town poorhouses.

Suitable accommodations are provided in the four hospitals and in the private establishments for one thousand and seventeen of the curable and the incurable patients who need custody or separation from home. Good custodial accommodations are provided at Ipswich for sixty-nine of the old, incurable and mild patients. Means of confinement are provided at Cambridge for sixty of the same.

Sufficient provision is made for the criminal lunatics now in the State Prison and in the Boston House of Correction. In all the establishments in the State provision of various kinds is made for eleven hundred and forty-six patients.

As the McLean and the private asylums are open to patients of every State, and as there are always some who prefer to send their insane friends to distant places, it is probable that these will always receive some, perhaps as many as they now do, from abroad. For similar reasons, and on account of the greater convenience of access to some parts of the Commonwealth, it is probable that as many will be sent from Massachusetts to the hospitals in the neighboring States, making those that come into the State about equal to those who go out.

FURTHER WANTS OF THE INSANE.

The returns received show that, in the opinion of the physicians and hospital superintendents and others, there were one thousand seven hundred and thirteen insane persons and sixty-one idiots who should enjoy the advantages of, or be confined in, some hospital or other; six hundred and ten of these are at their homes or in poorhouses; add to these one hundred and nine, the excess of patients in the hospitals at

Worcester, Taunton and Boston, and we have seven hundred and nineteen who now need, but have not, these advantages. Now, it is not to be supposed that the relations and the overseers, the friends and the guardians, would send all, or nearly all, their patients to a hospital, however excellent its accommodations, and however accessible it might be to them. It is not, therefore, deemed advisable that the State or the people should make provision for so many in addition to that which is already made. But it is well known that there are many whose friends and guardians desire them to be admitted ; but who cannot be received for want of room. Three of the public hospitals are crowded with more than they can accommodate ; and the McLean Asylum would be, if, like the other hospitals, it were obliged to receive all who were sent to it, or for whom application is made. Many of our patients now in the asylums in Brattleboro', Providence, Concord and Hartford, are sent there on account of the difficulty of getting into the hospitals at home, and the greater facilities of doing so abroad. But these institutions, which have hitherto invited patients from this and other States in order to fill their vacant wards, are now becoming filled with those of their own States, and receive strangers with more hesitation. This difficulty will necessarily increase ; and those institutions which are created by, and belong to, their respective States, will, of course, be compelled to confine their admissions to their own citizens, and exclude all others, as ours have done. The others can hardly be expected to receive more of our patients than we shall receive from abroad. Massachusetts, then, must expect to provide for, and take care of, at least as many patients as belong to the State.

Admitting, however, that many who should be in hospitals will be retained at home, whatever may be the inducements to send them to a hospital, still there can be no question that there is now a necessity of further action ; and the time is ripe for a new effort for those lunatic patients who are yet at their homes, to save those who are curable from permanent insanity, and give to the others who cannot be saved such an asylum of protection as their own good and the interests of the State demand.

Besides these six hundred and ten lunatics and idiots now at their homes, and needing hospital accommodations, the question of selling the Hospital at Worcester is proposed by the Legislature to this Commission for consideration. If this sale should be deemed expedient, it would leave three hundred and sixty-four patients to be provided for. The city government of Boston are convinced of the necessity of giving up their present Hospital, which is now inconvenient and too small for their wants, and of providing a more ample and satisfactory establishment. The County Commissioners of Middlesex are convinced that the Receptacle at Cambridge is entirely insufficient and unsatisfactory, and would have provided another if the policy of the State as to the method of supporting the State pauper lunatics were not yet in doubt. But they are certain that some other provision must be made for those insane persons now on their hands. The probability or possibility of changing these three establishments, requiring new provisions to be made for the six hundred and ninety-seven patients now in them, and the wants of six hundred and ten other lunatics and idiots now at home, whom the physicians think should be in some hospital, leaves the whole subject of the distribution of, and providing for, the insane, open for consideration.

GENERAL PLANS FOR THE FUTURE.

In view of this state of things, the Commission deemed that it would be for the interest of the State, and for the advantage of humanity, that the best plan should be devised for distributing and providing for the insane; and for this purpose the wisdom and experience of those engaged in the management and cure of this disease should be sought and made available for the use of Massachusetts.

Accordingly, letters were addressed to the superintendents of the most successful hospitals in the United States, and to the same and others familiar with the administration of hospitals and the care of insane in Great Britain.

These gentlemen were asked to advise as to the best method of distributing and providing for the insane.

Whether it were best to provide in one hospital for all classes and kinds of insane persons, male and female, inde-

pendent and pauper, foreign and native, curable and incurable, innocent and criminal, as is generally done in the United States,

Or in separate establishments,

For the males and for the females ; or

For the independent and the pauper ; or

For the foreigners and natives ; or

For the curable and incurable ; or

For the criminals, as proposed by Mr. Ley, of the Oxford and Berks Asylum, and sustained by the English Commissioners in Lunacy.

They were also asked to advise as to the number that, "regarding the comfort and improvement of the patients," can properly be accommodated in one institution, and what number in reference to each of the preceding classifications which should be advised.

They were asked to give their ideas of the best plan of a hospital for lunatics for each of the above classifications.

These letters were sent to the following superintendents of hospitals:—

Dr. Luther V. Bell, of the McLean, Somerville ; Dr. George Chandler, Worcester ; Dr. Clement A. Walker, Boston ; Dr. George C. S. Choate, Taunton ; Dr. Henry M. Harlow, Augusta, Me. ; Dr. John E. Tyler, Concord, N. H. ; Dr. William H. Rockwell, Brattleboro', Vt. ; Dr. Isaac Ray, Providence, R. I. ; Dr. John S. Butler, Hartford, Ct. ; Dr. John H. Gray, Utica, N. Y. ; Dr. N. D. Benedict, late of Utica, N. Y. ; Dr. D. Tilden Brown, Bloomingdale, N. Y. ; Dr. M. H. Ranney, Blackwell's Island, N. Y. city ; Dr. Horace A. Buttolph, Trenton, N. J. ; Dr. Joshua Worthington, Friends' Asylum, Frankford, Pa. ; Dr. Thomas S. Kirkbride, Philadelphia, Pa. ; Dr. John Curwen, Harrisburg, Pa. ; Dr. John Fonerden, Baltimore, Md. ; Dr. Charles C. Nichols, Washington, D. C. ; Dr. Francis Stribbling, Staunton, Western Virginia ; Dr. William M. Awl, late of Columbus, Ohio.

Similar letters of inquiry were sent to England, to Dr. Samuel Gaskell, Superintendent of the Lancaster Lunatic Hospital ; Dr. John Thurnam, Wiltshire Asylum, Devizes ; Dr. William Ley, Oxford and Berks, Littlemore ; Dr. Daniel H. Tuke, York Retreat ; Dr. W. A. F. Brown, Crichton Asylum,

Dumfries, Scotland; Dr. Forbes Winslow, editor of the *Psychological Journal*, London; Edwin Chadwick, Esq., Secretary of the Poor Law Commissioners; the Commissioners in Lunacy for Great Britain.

It is due to the gentlemen to say, that all of those in America whose counsel was thus asked, except two, and most of those in Europe, answered all the questions proposed to them, and several of them at great length, giving statements and opinions very important to the work of this Commission, and the purposes of the Commonwealth in connection with it. These will be used in course of this Report.

SIZE OF A HOSPITAL.

It is the unanimous opinion of the American Association of Medical Superintendents of Insane Asylums that not more than two hundred and fifty patients should be gathered into one establishment, and that two hundred is a better number. When this matter was discussed, there was no dissent as to the maximum; yet those who had the charge of the largest hospitals, and knew the disadvantages of larger numbers, thought that a lower number should be adopted.

Taking the average of the patients that now present themselves in Massachusetts, of whom eighteen per cent. are supposed to be curable, and need active treatment, and eighty-two per cent. incurable, and require principally general management and soothing custodial guardianship, and having "due regard to the comfort and improvement of the patients," this limit of two hundred and fifty should not be exceeded.

The principal physician is the responsible manager of every case, and should therefore be personally acquainted with the character and condition of his patients, the peculiarities of the diseased mind, as manifested in each one, and the sources of trouble and depression, or exaltation and perversity. This knowledge is necessary, in order that he should be able to adapt his means of medical or of moral influence with the best hope of success.

The superintendents of hospitals, in their correspondence with this Commission, generally gave their opinions on this point. Two hundred and fifty is proposed by Drs. Bell, Chandler, Choate, Walker, Ray, Brown and Gray, Kirkbride, Cur-

wen and Worthington, and also by the Commissioners in Lunacy in England.* Dr. Butler, of Hartford, proposes two hundred. Dr. Fonerden, of Baltimore proposes one hundred and fifty to two hundred. Dr. Thurnam proposes two to three hundred if the hospital is for the independent class exclusively, and four hundred to four hundred and fifty if for paupers.

These gentlemen individually concur in the opinion given by the association; or if they differ from that rule, it is by assigning a smaller number, on the ground stated by Dr. Bell, that it gives "every advantage of that classification of diseases, dispositions and manners which secures the most comfort, and that mutual attrition of mind upon mind which is so beneficial, and at the same time, permits one head to acquire and retain that intimate personal knowledge of each case, in all its history and relations, which is so essential to the best application of moral and medical treatment." †

With a large number, then, a less effective work must be produced, and the patients cannot be managed with that "due regard to their comfort and improvement" specified in the law.

DISADVANTAGES OF LARGE HOSPITALS.

The policy which has built large establishments for the insane is a questionable one as applied to economy. After having built a house sufficiently large, and gathered a sufficient number of patients for their proper classification and for the employment of a competent corps of officers and attendants, and allowing each to receive just as much attention as his case requires, and providing no more, any increase of numbers will either crowd the house, or create the necessity of building more rooms; and their management must be either at the cost of that attention which is due to others, or create

* "No asylum for curable lunatics should contain more than two hundred and fifty patients; and two hundred is, perhaps, as large a number as can be managed with the most benefit to themselves and the public in one establishment." *—*Report of Metropolitan Commissioners in Lunacy for 1844*, p. 23.

† Report for 1844, page 14.

* The Legislature has recognized the expediency of limiting the size of asylums, by enacting (1 and 2 Geo. IV., c. 33) that the District Asylums of Ireland "shall be sufficient to contain not more than one hundred and fifty patients."—*Note to the above.*

the necessity of employing more persons to superintend and to watch them.

If the house be crowded beyond the appropriate numbers, or if the needful attention and the healing influences due to each individual are diminished, the restorative process is retarded, and the recovery is rendered more doubtful. And if additional provision, both of accommodations and professional and subsidiary attendance, is made to meet the increase of patients beyond the best standard, it would cost at least as much per head as for the original number. Dr. Kirkbride thinks it would cost more, and that the actual recoveries of the curable and the comfortable guardianship of the incurable are not so easily attained in large hospitals as in such as come within the description herein proposed. "It might be supposed that institutions for a much larger number of patients than has been recommended could be supported at a less relative cost; but this is not found to be the case. There is always more difficulty in superintending details in a very large hospital; there are more sources of waste and loss; improvements are apt to be relatively more costly; and, without great care on the part of the officers, the patients will be less comfortable."*

Besides the increased cost of maintaining and the diminished efficiency of a large establishment, there is the strong objection of distance and difficulty of access, which must limit the usefulness of a large hospital in the country, and prevent its diffusing its benefits equally over any considerable extent of territory to whose people it may open its doors.

THE INFLUENCE OF DISTANCE ON THE USE OF HOSPITALS BY THE PEOPLE.

From a careful examination of the number of patients sent from the several counties to all the State hospitals in the United States which kept and published such a record, and a comparison of those with the average number of people in these counties through all the recorded periods of the operations of the institutions, it is shown that the ratio of patients to the

* Kirkbride on Hospitals for Insane; American Journal of Insanity, July, 1854, p. 11.

population, sent to the hospital, diminishes constantly with the increase of distance from it.

The following table was prepared in 1850. The counties in the several States are divided into classes. The first is the single and central county in which the hospital is situated. The second includes the next circle of counties, and the third class the second circle from the centre, &c. The population of these several classes of counties is taken from the statements of the national census, and calculated to show the average number of people existing in them in each of the years for which the observation was made; and the several columns show the proportion of patients sent to the hospitals, during that period, to the average annual population, or the number of people in each that sent one patient.

TABLE XXIX.—NUMBER OF PEOPLE IN VARIOUS DISTRICTS TO EACH PATIENT SENT TO THE LUNATIC, HOSPITAL.

HOSPITAL.	Period within which patients were sent.	Counties or Districts at various Distances from the Hospital.				
		Co'ty of Hospital.	Next District.	Third District.	Fourth District.	Fifth District.
Augusta, Me., . .	1840 to 1849	263	519	856	—	—
Concord, N. H., . .	1842 to 1849	248	412	900	—	—
Worcester, Mass., . .	1833 to 1853	100	176	223	292	—
Providence, R. I., . .	1848	406	5,710	—	—	—
Hartford, Conn., . .	1844 to 1848	424	705	1,418	—	—
Utica, N. Y., . .	1843 to 1849	361	680	812	1,523	—
Trenton, N. J., . .	1848	1,956	3,077	6,781	—	—
Baltimore, Md., . .	1843 to 1849	500	689	2,680	—	—
Staunton, Va., . .	1828 to 1849	300	420	658	916	1,534
Columbus, O., . .	1839 to 1849	582	994	1,093	1,168	—
Lexington, Ky., . .	1824 to 1842	89	314	625	1,185	1,635
Nashville, Tenn., . .	1844 to 1849	349	1,374	3,251	4,529	—

These facts are taken for various periods in various States ; no comparison is, therefore, to be made of one State with another, but only of the different classes of counties in the same State, at different distances from its hospital, in respect to the use which their people make of it.

This calculation was made in 1850. Want of time prevents the making it for the four subsequent years, except as to Massachusetts ; but as this corroborates the previous calculations, and as they all originally agree in this matter, it is presumed that no further facts will be needed to establish the principle.

The proportion of lunatics which each county in Massachusetts sent to the State Hospital at Worcester, from 1833 to 1853, inclusive, as seen in table XXX., shows the effect of the same principle :—

TABLE XXX.—RATIO OF PATIENTS SENT TO THE LUNATIC HOSPITAL, AT WORCESTER, TO THE AVERAGE POPULATION OF EACH COUNTY, DURING TWENTY-ONE YEARS—1833 TO 1853, INCLUSIVE.

COUNTIES.	Calculated average population twenty-one years.	Number of patients sent.	Population to one sent.	Population to one lunatic at home and elsewhere in 1854.
Worcester, . . .	107,654	1,067	100.8	422
Middlesex, . . .	124,384	524	237.3	533
Norfolk, . . .	61,779	541	114.1	383
Hampden, . . .	42,114	236	178.8	554
Hampshire, . . .	32,775	181	181	402
	261,052	1,482	176	475
Franklin, . . .	29,814	102	290.5	377
Essex, . . .	107,943	535	201.7	396
Bristol, . . .	64,833	275	235.7	530
Plymouth, . . .	49,977	217	230.4	427
	252,567	1,129	223	427
Berkshire, . . .	44,228	144	307.1	446
Nantucket, . . .	8,409	30	283.3	686
Dukes, . . .	4,111	17	241.8	252
Barnstable, . . .	32,854	115	285.6	467
	89,602	306	292	449
Suffolk, . . .	110,041	464	237.1	371

It thus appears that, while Worcester County sent one in 100.8 of its people to the hospital, Hampden sent one in 178.8, Barnstable one in 285, Franklin one in 290, and Berkshire one in 307; showing that, in ratio of its population, the central

county, where the hospital is, and to whose people it is the most accessible and is best known, has had nearly three times as much advantage from it as the remote counties.

Taking the ratio of the insane to population in the several counties in 1854, table XXXI., there was some inequality in the distribution of the insane among them: six counties had a larger, and seven a smaller, proportion to their population than Worcester. Yet all sent a smaller proportion of patients to the Hospital.

The following table shows the exact relation of the want and the use of the hospital to the population of the several counties.

TABLE XXXI.

COUNTIES.	Lunatics in 1854.		Patients sent to Hospital in twenty-one years.	
	Population to one lunatic.	Lunatics in ten thousand people.	Average population to one patient.	Patients in ten thousand people.
Berkshire,	446	22	307	32
Franklin,	377	26	290	34
Hampshire,	402	24.8	181	55
Hampden,	554	18	178.8	56
Worcester,	422	23.6	100.8	99
Middlesex,	533	18.7	237	42
Essex,	396	25	201.7	49
Suffolk,	371	26.8	237	42
Norfolk,	383	26	114	87
Bristol,	530	18.8	235.7	42
Plymouth,	427	23	230	43
Barnstable,	467	21	285.6	35
Nantucket,	686	14	283	35
Dukes,	252	39.6	241.8	41

The opening of the State Hospital at Taunton affords another illustration of the influence of distance. At the end of March, 1854, the counties of Suffolk, Norfolk, Bristol, Plymouth, Barnstable, Nantucket and Dukes, had two hundred and twenty-five of their patients in the State Hospital at Worcester. In April, the hospital at Taunton was opened in the midst of these seven south-eastern counties, and offered to the use of their people. In October they had two hundred and seventy-five patients in both of these public hospitals—showing an increase of fifty, or 22 per cent., within six months, in consequence of the accommodations being brought so much nearer and made so much more accessible to them.

INFLUENCE OF FACILITIES OF TRAVEL ON THE USE OF A HOSPITAL.

The difference of the use made of the hospital by the people of the near and the remote counties is not to be explained by the corresponding difference in their necessity; for several of the distant counties, both in Massachusetts and in some other States, had a larger proportion of lunatics, and yet sent less, and some less than half as many, patients to their hospitals.

This difference is probably due to the difference in the facilities of access and in the labor and cost of travel. This is corroborated by comparing the use made of hospitals by people along the line of great thoroughfares with that made by those who have not these facilities of travel. In New York, the counties along the railroad and canal sent one in 790, and those in other directions, but at the same average distance, sent one in 1,155, of their people to the hospital at Utica. In Virginia, the counties in the valley of the Shenandoah, where the Western Asylum is situated, sent one in 514, while those among and beyond the mountains, and within the same distance, sent one in 877, of their people.

The same is found in the other States where the asylum is situated on some easy line of travel.

Having received proof from every quarter, and finding no countervailing fact or argument, it must be admitted as an established principle that a hospital cannot diffuse its advantages equally to the people of any large district. Those in the neighborhood having convenient access will use it much, and those farther off will use it little, and the distant still less.

Admitting this, then, it must follow that no large central hospital for any considerable extent of territory should be established; but, on the contrary, hospitals of proper size should be scattered as much as possible, and their advantages brought near to the people who ought to use them.

SEPARATE HOSPITALS FOR MALES AND FEMALES.

All the hospitals in the United States are for both sexes. One or two private asylums receive only one of the sexes. In England, all the public hospitals, and a great majority of the private licensed houses, receive both sexes. The two military and naval hospitals, and three private asylums, receive only males, and eighteen private asylums receive only females. All the public hospitals in Scotland and Ireland are open to both sexes.

Most of the superintendents of the American hospitals advise that separate institutions should be prepared for males and for females. Drs. Bell and Chandler, in their late reports, both urge this, and with good reason.

On the contrary, Dr. Thurnham, of the Wiltshire Asylum at Devizes, in England, who has devoted much attention to this particular question, says: "Asylums for the two sexes should be united. The supervision being careful and judicious, there need be no evils which are not insignificant when compared with the disadvantages of the separate plan."* Dr. Brown, of the asylum at Dumfries, in Scotland, gives the same opinion.*

Unquestionably there are some advantages to be derived from this separation. Each sex can thus have the peculiarly appropriate accommodations more freely and comfortably arranged; and the administration can be better adapted to the wants and liabilities of either, and be carried on with more ease and success, when they are separated, than when they are together in one establishment.

But all these advantages seem to be more than counterbalanced by the increase of travel made necessary by this separation.

A hospital for two hundred and fifty of only one sex must draw its patients from double the number of people that would

* Letter to the Commission.

be required to supply it if it contained one hundred and twenty-five of each sex; and of course these must be drawn from a much wider extent of territory. It is plain, then, that the obstacle of distance through which the remote patients must be carried will prevent the equal diffusion of the advantages of an institution for one sex in all the rural districts where people are scattered; but in large cities, or in their immediate neighborhood, which supply sufficient patients to fill two hospitals, this objection does not hold. And if separate provision should be made for the State paupers, whom the Commonwealth must take care of, and of whom none will be kept back for any of these reasons, the division of the sexes may answer, but not for the great body of the people of Massachusetts.

SEPARATE HOSPITALS FOR THE CURABLE AND INCURABLE
INSANE.

The returns of the physicians and others show that, in their opinion, of the two thousand six hundred and thirty-two insane persons in Massachusetts, four hundred and thirty-five were curable, and two thousand and eighteen incurable.

The question has been much agitated by those who study these matters, and it was asked of the correspondents of this Commission, whether it were best to provide separate establishments for these two classes; and they all with one accord, and yet separately, answered in the negative.

The plan now pursued in nearly all the hospitals of this country and elsewhere, of having both classes together, is deemed the best.

As the curable may vary more from day to day, and are more susceptible of remedial influences, they require more watching and active treatment than the incurable patients. Consequently they need more accommodations, and better arrangements, and a greater amount of attention. They are managed with more expense than those who are supposed to be hopeless; and therefore mere economy would suggest that hospitals, with all the appliances and facilities for restoration, be provided for the curable, and that other asylums, with the bare means of custody and occupation, be provided for the incurable. This is done here and elsewhere, to some extent,

by sending a part of the old and hopeless cases to the prisons and other places, to make room in the hospital for those whose cases are recent and promising. But this is only the result of necessity, because the curative establishments are not large enough for all.

There are strong and sufficing objections to this plan of separation. First. It is difficult to tell when a case becomes incurable, as some are restored even after several years' duration of disease. Dr. Tyler, of Concord, N. H., Hospital, says: "I do not think it in the power of man to infallibly decide on the curability or incurability of an insane person." * And second. There is ordinarily an advantage in keeping the two classes together. They have a healthy mutual influence; they aid in each other's purposes of residence in the hospital—the restoration of one, and the discipline and comfort of the other. Many of the incurable patients, with some delusions, are mild and manageable in the wards of these institutions. A part of them have considerable, and some much, intelligence. They are, therefore, not unacceptable companions for the more excitable and recent cases, and aid in controlling them. On the other hand, the incurable, seeing the others come diseased and go restored, feel that their malady is not hopeless, and, at least, are induced to make some more effort to overcome their delusions and to regain their health.

Dr. Bell proposes * that a separate establishment, not in connection with any prison, be provided for the lowest class of demented patients—those who lead a mere vegetative life in the curative hospitals and elsewhere, for those who are now sent to the County Receptacles and Houses of Correction, and the State paupers who are sent to the State Almshouses.

SOCIAL DISTINCTIONS IN HOSPITALS.

As, in the treatment of bodily disorder, the physician recognizes and sustains all those parts of the constitution and system that are in good health, and endeavors to extend their strength through the disordered parts, and overcome the disease, so in the treatment of insanity it is necessary to have regard to all the powers, faculties and feelings which are yet sound, and use

* Letter to the Commission.

their aid to restore the disordered elements to health. Therefore the manager of the insane carefully respects their habits and opinions, their inclinations and associations, so far as they are healthy, and do not interfere with the restoration; and all of these which are correct are to be disturbed as little as possible.

Hence it is desirable that the patient, as far as is consistent with the management of his malady, either for its removal or its amelioration, should live in a style similar to that which he properly enjoyed when he was in health; he should also have associates corresponding to his former habits and tastes; and in all things he should not be required, in course of his treatment, to submit to any new and needless disturbance, disappointment or mortification.

In general life, people associate according to their tastes and sympathies. They select their companions from among those who are similar to themselves, and shrink from such as are of different character. Hence the refined and the coarse, the cultivated and the ignorant, the high-minded and the sensually low, the gentle and the quarrelsome,—these severally are so diverse in their habits and tastes that they are unfitting and unacceptable to each other, but instinctively separate, and do not voluntarily meet, except when business or charity, or some other extraneous motive, prevails for the time. But when they desire to satisfy the wants of their hearts and find the most happiness, they select those of their own kind with whom they can sympathize. These are natural feelings and habits; they run through all society of every kind and in every country. It is not to be supposed that a man, by becoming insane, changes his character entirely in this respect, or loses all his old and healthy desires and aversions, or that he will bear crossing and disappointment, in those which are left to him, more willingly than when in health. On this account, then, there are strong objections to making microcosms of the insane hospitals, where persons of every kind of character and degree of development shall be associated together in the same halls, and be constant and unavoidable companions, in close if not intimate connection, day after day and month after month. Such a contact of opposing and inharmonious qualities interferes with the calm and happy discipline that is necessary for the recovery of the

curable and for the self-control and comfort of the permanently insane.

SEPARATE HOSPITALS FOR THE INDEPENDENT AND PAUPER.

All the State Hospitals in the United States open their doors for both the independent and pauper, and these meet together in the same wards. A few of the corporate institutions—those at Somerville, Bloomingdale, N. Y., and Philadelphia—provide elegant and expensive accommodations for the more prosperous classes, and charge a price nearly in relation to the cost. This, of course, excludes the paupers; for, with an occasional exception, none of them go to these institutions. But in all the hospitals in Massachusetts, except the McLean, the paupers constitute a majority (83 per cent.) of the whole. Some of our native town paupers have been in comfortable circumstances, and used to some of the refinements of social and domestic life. Some of the insane paupers belong to independent families. Among the native population of Massachusetts there is such an imperceptible gradation from the higher and more favored classes, through all the ranks, down to those who are supported by their towns,—the last including some that are cultivated and intelligent,—that it is not easy to draw a line between them, nor is it well to try to separate them in our State Hospitals. With one partial exception, this proposition finds no favor with any of our superintendents.

In England this separation is advised by the Commissioners in Lunacy, and by others who are concerned in the care of the insane and are received as authority in these matters; and this is the general practice there. Of the county and borough asylums, twenty-five received paupers only, and twelve both classes. Of the corporate hospitals, ten take private or independent patients only, and four both classes; and of the licensed private houses, one hundred and six receive independent patients only; one, paupers only, and twenty-three, admit all classes.

In Great Britain the poor are generally ignorant and uncultivated, with no education, and little sensibility. They live in wretched cabins or hovels, or in crowded tenements; they are little used to the comforts, still less to the luxuries and graces,

of life.* The English paupers are even lower in the scale than these. Between these and the middle and the more comfortable classes there is a wide difference in respect to cultivation and refinement. The latter would enjoy and profit by many comforts or even little luxuries of living, and would be benefited by more abundant and graceful appliances for their cure, and many means of occupation and amusement, which would not be beneficial to the others; and therefore the British establishments for paupers need not be so costly and elegant as those for the other classes. When these are brought together they are subject to the antagonisms and irritations, the retarding and disturbing causes, already described, that interfere with "the comfort and improvement of the patients," interrupt the process of recovery, and make the administration of the hospital more difficult and expensive.

HOSPITAL FOR STATE PAUPERS.

The origin, character and position of the State paupers of Massachusetts differ very materially from those of the town paupers. Of the seven hundred and thirty-seven lunatics and idiots supported by the Commonwealth, five hundred and seventy-three are natives of other countries; and a large part of the remaining one hundred and sixty-four are natives of other States, and some are colored persons. These are not only now supported by the public treasury, but they never, even in health, had sufficient ambition, or energy, or command of circumstances to own the requisite amount of property, or pay the necessary tax, or reside long enough in one place to gain a residence, and thereby establish a claim upon the people of any local municipality for their support, as the more cultivated and favored town paupers have done.

* See the General Report on the Sanitary Condition of the Laboring Classes of Great Britain, prepared by Edwin Chadwick, the learned Secretary of the Poor Law Commissioners, under the direction of that Board, and presented to both Houses of Parliament by command of Her Majesty. Printed in London, 1852.

See also Report of the Commissioners on the Health of Towns of Great Britain, presented also to Parliament, and printed by order of that body.

These Reports show the personal, social and domestic condition of the laboring but independent poor to be far lower than that of similar native classes in Massachusetts.

See Mr. Chadwick's Letter to the Commission, p. 62 of this Report.

The State paupers, especially those who are aliens, resemble in character and manner the English, rather than the American, dependent upon public charity. There is, therefore, a wide difference between them and the mass of our people. This is manifested in a marked degree among the sane of these nations; the natives and the aliens do not associate together, nor live in the same families. Except as employer and laborer, they do not make component parts of the same household. This disseverance is extended even to the houses and neighborhood. Wherever several families among the poor occupy one house, they are usually of one kind—either all natives, or all foreign; and they do not willingly live in close neighborhood, although in different tenements. In social life, in their gatherings, in their religious worship, each party cleaves to those of its own people, and stands aloof from others.

These feelings of affinity for those of their own nation, and aversion to the others, are not lost in insanity; they usually continue undiminished, and are often increased. To put together, in the same wards, insane persons of these two races, with such diversity of cultivation, tastes and habits, who stood aloof from each other in all social life when they were well enough to select their own companions—to require them to live in the same halls, to eat at the same table, to bear with that which was offensive, and from which they would have shrunk in health, is not the best way to calm the excitements or soothe the irritations of this disease, and is contrary to the principles everywhere acknowledged, and herein stated, that the natural and healthy feelings of the patients should not be disturbed, nor their tastes offended, nor their inclinations nor aversions needlessly opposed.

Looking, then, at the good of the patients there seems to be reason for separating the State pauper insane from the others in Massachusetts, and of making distinct provision for their healing and their protection.

It is probable that the interests of the State would be advanced by this separation. If the division would remove any of the obstacles to the cure of either party, or facilitate the discipline of the incurable and of the whole establishment, it would save some of those who are doubtful, who are almost,

but not quite, cured or curable under the present influences, but who might be restored to health, to society, and to usefulness, if this cause of disturbance were taken away.

Keeping in view that the style of life in the hospital should not differ so far from that to which the patients have been accustomed at home as to offend their tastes and disappoint them, and regarding the difference of domestic condition in the measure of comfort and convenience which they adopt when they have the means and the power to select for themselves, it is obvious that there may be, with equal advantage for the restoration of the curable, and the protection and comfort of the incurable, plainer and cheaper accommodations, and a smaller expenditure for the daily maintenance and management of the State paupers, than would be proper for the average of the other patients—the members of the families of the farmers and mechanics in Massachusetts.

Considerations of economy, then, should favor the separate provision for the State paupers, as their accommodation and support might be obtained at a less cost to the Commonwealth than would be expedient for the others, and with equal advantage to them.

The State paupers are already almost exclusively in some of the public institutions. Table XXXII. shows how largely they occupy the hospitals and the receptacles, and how few of them are at any home, or in any town or city almshouse. It would, therefore, be assuming no new burden, if the State should concentrate them in one or more institutions especially appropriated for their use.

TABLE XXXII.—STATE PAUPERS.*

Residence and Disease.

RESIDENCE.	Lunatics.	Idiots.	RESIDENCE.	Lunatics.	Idiots.
<i>Hospitals.</i>			<i>Jails.</i>		
Worcester, . . .	157	1	Concord, . . .	2	—
Taunton, . . .	127	1	Boston, . . .	1	—
Boston, . . .	207	1	Dedham, . . .	1	—
<i>Receptacles.</i>			Barnstable, . . .	1	—
Cambridge, . . .	57	6	<i>State Almshouses.</i>		
Ipswich, . . .	68	—	Monson, . . .	6	15
<i>House of Correction.</i>			Tewksbury, . . .	19	2
Boston, . . .	3	—	Bridgewater, . . .	15	8
<i>State Prison.</i>			<i>At Home,</i> . . .	24	10
Charlestown, . . .	3	—	Totals, . . .	693	44

CRIMINAL LUNATICS.

There is a natural repugnance in innocence to associating with crime. This sensibility, which society encourages and cultivates in all its members, and is deemed one of its safeguards, usually remains with the insane; it is sometimes exalted; and if it is ever clouded or diminished, it is from disease; and then it needs to be cherished and restored as certainly as any delusion or perversity is to be removed.

To place, then, these criminals—the insane convicts from the prisons—in the same wards with the innocent patients, and to require them to associate together,—this is offensive to those

* The paupers were distributed as stated in this table when the returns were received. Since the Report was written, and while passing through the press, some have been transferred to the State Almshouses.

sensibilities which remain natural and healthy, and increases the disorder of those which are perverted by disease.

Besides the restlessness that frequently is manifested in insanity, there is added in the criminal a desperate hardihood in desiring to escape. The convalescence, which awakens the patient to a sense of his condition, reconciles the innocent one to his confinement as the best means of regaining and enjoying perfect liberty, and makes him contented to remain; while, on the other hand, it opens to the criminal the prospect of another and a worse confinement after his restoration, when he shall be removed back to prison. It is necessary, therefore, that a hospital which is to receive criminal lunatics should be provided with more means of security and forcible detention, and it should be stronger, and less airy and expansive, than is needed for other patients.

In Great Britain the universal sentiment is opposed to this mingling the criminal lunatics with the ordinary inmates of hospitals. The Association of Superintendents of Asylums protest against it. The Commissioners in Lunacy, in almost every one of their annual reports, earnestly call the attention of the Parliament to this matter. In their report for 1853* they give the following reasons for their opinions against the association of these two classes of patients:—

“1. That such association is unjust; and that it gives pain and offence to ordinary patients, (who are generally very sensitive to any supposed degradation,) and also to their friends.

“2. That its moral effect is bad, the language and habits of criminal patients being generally offensive, and their propensities almost invariably bad; that in cases of simulated insanity, (which seems to be not unfrequent,) the patient is generally of the worst character; and that, even where the patient is actually insane, the insanity has been often caused by vicious habits; that patients of this class frequently attempt to escape, and cause insubordination and dissatisfaction amongst the other patients.

* Seventh Annual Report of the Commissioners in Lunacy to the Lord Chancellor, page 33.

"3. That a necessity for stricter custody exists for one class than for the other; and that this interferes with proper discipline, classification, and general treatment, and strengthens the common delusion that an asylum is a prison.

"4. That criminal patients concentrate attention on themselves, and deprive the other patients of their due share of care from the attendants.

"5. That the effect on criminal patients themselves is bad; that they are taunted by the other patients, and are irritated on seeing such other patients discharged.

"These and other objections have been expressed by almost all the superintendents and proprietors of lunatic establishments in England."

Yet the law and the custom, both in Britain and in Massachusetts, require the criminal and the guiltless lunatics to be brought together in the same hospital now; for in the present state of things, there is no other way. So long as no separate means are provided for curing the insane convicts, humanity demands that they should be sent to such as exist; for not even the felon should be unnecessarily doomed to permanent insanity, but should enjoy the due opportunity of healing, notwithstanding the revolting companionship may pain the feelings, irritate the tempers, and even aggravate and prolong the diseases of the other patients who are thus compelled to associate with them. Yet it is a questionable humanity that does not prevent this necessity.

Among the many with whom the criminal may be brought in contact in the wards of the hospital, there may be some whose curability is so doubtful, that they can recover only under the most propitious circumstances, and in whom the recuperative force is so small that any unfavorable influence weighs in the balance against their chance of recovery and destroys their hope. The introduction of criminal lunatics among such as these may make their insanity permanent.

In Great Britain it is now proposed to establish a criminal lunatic asylum, to which all the insane convicts shall be sent, and also all that class of patients whose conduct has approached the doubtful line between insanity and criminality even before they passed it, and who, though not convicted, yet

had committed such acts of violence as are ordinarily considered as crime or evidence of criminal intent.

There are not enough such patients as these in Massachusetts to fill an institution; and in the present state of things it is not proposed to change the policy in respect to them. Yet, if the State paupers should be provided for in a separate establishment, it should include strong and suitable wards for the criminal insane, where they could be securely kept by themselves, and where they will do less injury to the innocent patients, whose sensibilities are less tender than those of the more cultivated.

Except this provision for the State paupers and the criminal lunatics, no other separation of classes or patients is deemed advisable to be adopted in this State; but all other insane patients, of all ranks and all manifestations of mental disease, should be received, and treated and protected as they now are, in the same establishment.

POLICY OF THE STATE IN PROVIDING FOR THE INSANE.

Of the two thousand six hundred and thirty-two insane persons belonging to Massachusetts, sixteen hundred and seventy are now provided for, either in the four hospitals, two private institutions, two county receptacles, eight prisons, or three State almshouses within the State, or in five hospitals in the other States of New England.

These several classes of houses in Massachusetts, for the insane, have already been described in detail (pp. 112 to 130); and it is now for the State to decide whether all of these shall be continued, and others like unto them shall be created, now or hereafter, to meet the existing and increasing wants of those suffering under disorders of the mind, or whether any of them shall be abandoned and their places supplied by others.

The general plan of hospitals for all patients, the curable and incurable, the mild, troublesome, and the dangerous, seems to the Commissioners to be the best for their comfort and improvement, as well as a matter of economy. For a great majority of the recent and curable cases there will be no question that, in the present state of science, the hospital offers the surest means of restoration to health. The furious and violent cases, although incurable, must be confined; and the

hospital not only affords them sufficient and proper restraint, but it also calms and makes them comfortable; and the excitable and troublesome are quieted and made peaceable by the same influences. As these institutions give the patient the best opportunity of restoration, and as the cost of cure is comparatively little, while the cost of life-support is very great, it is good economy to provide such establishments for the restoration of all recent cases.

The question still remains as to the means of providing for the old and incurable patients. Excepting the hospitals, all establishments now open to the insane, under sanction of the law or the authorities of the Commonwealth, fail of their purposes, and are therefore objectionable.

LAW OF 1836—COUNTY RECEPTACLES.

The law of 1836, requiring the counties to provide suitable apartments in the Houses of Correction for the insane and idiotic persons not furiously mad, was an improvement upon the previous state of things. It offered a home to a part of the insane who were strolling as vagabonds over the country, the objects of aversion and of derision to the thoughtless, and of fear to the timid. It also ordered suitable apartments to be prepared for such others as had been hitherto confined in the common rooms built for felons.

It was supposed to be the complement of the law regulating the admission into the State Lunatic Hospital, to which the courts were authorized to send only such as were "so furiously mad as to render it manifestly dangerous to the peace and safety of the community that they should be at large." * The law then intended to provide for the furiously mad at the State Hospital, and for those who were "not furiously mad" in the county receptacles. It was intended, also, that these institutions should be in each county, and that every district should find its own means of protecting these helpless patients, and that they should be within the reach of all who needed them.

An inquiry into the history of the past in reference to the operation of this law, and consultation with those who have executed it, and a careful examination of the Houses of Cor-

* Revised Statutes, chap. 48, sect. 6, p. 380.

rection and their accommodations for the insane and idiots, show that in eleven counties it has been a dead letter and entirely inoperative, and in all the counties it has failed to answer its purpose.

These eleven counties have not fulfilled the first section of the law and provided suitable apartments for these lunatics. Nor are any of their lunatics now in any apartment within the precincts of the House of Correction, under the authority of the second section of the law, except in Norfolk, Bristol, Barnstable and Plymouth. Their other patients, if removed from home, are sent to the hospitals, and they are relieved of the responsibility for and care of them.

On the other hand, the counties of Suffolk, Essex and Middlesex assume the responsibility and the expense of providing accommodations for all such of their insane as may be sent to them through the several processes of law. All of these patients undoubtedly are found in, and are presumed to belong to, one or the other of these counties. Many of them have families or friends there, and consequently better claim for home there than elsewhere. But some of them lead vagabond lives; they float on the whirlpool of society until they are carried into the vortex of the cities, where they fall into the hands of the police, and then are committed by the magistrates to the places provided for them. In this way nearly all of the State pauper lunatics whom the law of 1836 is made to reach, and who are not in the State hospitals, find their way sooner or later into these houses of refuge in these three counties.

The law operates, therefore, very unequally; for while eleven counties are relieved from any investment of capital for its fulfilment, and from all expenditure except their share of the general tax for the board of their patients, the whole burden of providing buildings and grounds, and paying the excess of the cost of their maintenance, over and above the sum allowed by the State for this purpose, falls upon these three counties.

Besides this unequal distribution of the burden of this law in its practical operation, there are other and still more important considerations in respect to the patients themselves, and to the penal institutions with which this law connects them.

CLASSES OF PATIENTS COMMITTED TO THE RECEPTACLES AND PRISONS.

First, as to the character of the patients. The law had in view only the mild and harmless lunatics, "not furiously mad," whose diseases were established beyond hope of relief, and limited its requirements of the counties to provide for, and the authority of the magistrates to commit, such as these, supposing that it had thereby secured proper homes and guardianship for all that are not better provided for in the hospital, and that this was all that their disease or condition required.

But experience has shown that there is a class of incurable lunatics who are not mild and harmless, but furiously mad, and who, for their own good or for that of the public, need an asylum of security where they may be protected from excitements and prevented from disturbing or injuring others. Some of these are at their own homes troublesome or dangerous to their families; others are found in the streets noisy and violent. In either case they need guardianship, and perhaps restraint. They are taken and carried before the courts for examination, and then sent to the receptacle. Some of them are so furious that they are tied, bound and guarded by strong and courageous men, when they are carried to these receptacles or to the prisons. "Within a few months one of this class was received whose ankles were, at the time, badly excoriated by the manacles with which it had been found necessary to restrain him." * When they arrive there they seem to require strong rooms, and straps and muffs to curb their violence; but they certainly need the soothing influence of trained and skilful officers and attendants to calm them. In these cases the letter of the law is violated.

There is another class whose malady has its periods of excitement and quiescence. "Of these many have been sent there who had previously been periodically insane. They were committed, in most cases, perhaps during lucid intervals, the paroxysm continuing to occur at longer or shorter periods, during which, in many instances, they have been violent, noisy, and very difficult to manage." * In their cases the letter of the law is regarded, but the spirit is transgressed.

* Letter to the Commission from Gen. Samuel Chandler, late Sheriff of Middlesex, and for fourteen years one of the Overseers of the House of Correction.

This law presupposes that none but the old and incurable cases would be included in its description and sent under it to these places of custody; but there are some recent cases committed both to the receptacles and to the prisons under its sanction. Some of these recover, and others pass over the period of hope for want of the appropriate means of healing.

The reports received from these establishments state that, without including the insane convicts, they have one patient whose disease was supposed to have been less than one year's duration, fourteen from one to two years, and nineteen from two to five years. How long these had been diseased when they were committed was not stated. At the receptacle at East Cambridge about four recent and curable cases are received a year; and such are not unfrequently sent to Ipswich.

In the first class of cases the magistrates plainly overstep the letter and the spirit of the law. Yet they do so with good intent; for the hospitals are filled, and these excited lunatics need to be restrained, and the receptacle or the prison seems to be the only recourse.

In the second and third classes these officers judge by the facts presented to them. They find the patient before them mild, and "not furiously mad," and they inquire no further. In many cases they have no means of knowing what the condition of the patient has been; and a single examination is insufficient to enable them to determine whether he is constantly mild or periodically excitable. This is a difficult matter for even the practised manager of the insane to do without knowing the history of the case in question. And several of these lunatics are strollers, whose previous lives are unknown to the officers or people where they are found.

The magistrates cannot discriminate between the curable and incurable cases; nor are they required by the law to do so. They therefore look only at the present appearance of the case, and not to the future. They find the lunatic is described in the law, and commit him, without regard to the length of his disease or the hope there may be of his restoration.

There is another point in the preliminary steps of the administration of the law which is well worthy of notice here. It grants to any two justices, one being of the quorum, the

power of summarily sending to these receptacles, and practically to the prisons, in eleven of the counties, any person who may seem to them to be insane or idiotic, but not furiously mad. Now one of the most difficult things in both medical and legal practice is, to determine whether a person be insane or not. Questions of this sort are usually settled in courts with extreme difficulty and caution, and only on the evidence of the most practised experts in the disease. With all their caution in admitting patients into the hospitals on the evidence of physicians or an examination by the Judge of Probate, persons are sometimes received who are not insane. But then the error is soon detected by the medical officer of the institution, and the person discharged. For want of suitable evidence, the magistrates are still more liable to make this mistake. Mr. Worcester, of the Ipswich Receptacle, writes: "I have had six committed to this Insane Asylum, under the law of 1836, that were not insane when they were committed. They did not remain but a week or two before they were discharged." * There may be other persons of sound mind brought before the magistrates under suspicion of insanity, who, for the want of proper medical evidence to establish their mental health, are sent to the prison or receptacle; and for the want of medical supervision the true state of their health may not have been discovered, and they remain needlessly in confinement.

In regard to the admissions of these patients the officers of the prisons have no volition; the order of commitment is mandatory, and must be obeyed. Whatever may be the meaning of the law, they are not its interpreters, but must admit every patient that is sent to them, whether furiously or not furiously mad.

OPINIONS OF SHERIFFS AND OFFICERS OF PRISONS.

In course of this investigation the Commissioners held free conversations with the officers whose position and experience have given them the best opportunities of observation, and whose opinions are therefore of great value. These are the sheriffs, the overseers and masters of the houses of correc-

* Letter to the Commission.

tion, the jailers, who had the immediate charge or the general oversight of twenty of these prisons, and several of the physicians who attended upon their inmates when sick. They all expressed their convictions on this subject in personal conversation, and some of them at length in letters; and they substantiated their opinions with reasons, and most of them with facts that had come within their own observation. They all, with one modified exception, concur in the belief that the system of confining the insane in any apartments of the prisons, or the connection of the establishments for lunatics in any way with the houses of correction, was a bad one, and operated unfavorably both for the diseased patient and the criminal. The two classes of persons who are thus placed within the precincts of the houses of correction, in the same establishments and under the same general supervision, have no affinity either in their character or their liability. Except that they both need custody and government, there is no similarity between them. In the causes or the objects of their confinement, the accommodations they require, the discipline and treatment that will suit their condition, there is the widest difference. To put these classes together merely because they both need walls to keep them in and men to govern them, and they belong to the State, is as unwise as to connect a cotton factory and an iron mill, because they both need overseers and water-power and belong to the same proprietor.

The opinion and reasons given by Mr. Willis, Sheriff of Berkshire, are substantially repeated by the other officers who were consulted:—

That the lunatics were a great burden upon their care and labor; and the officers and the attendants all complain of the law that allowed them to be sent to the prison. Every thing which was necessary for the convicts—the buildings, the rooms, and the officers and the men, the general plan of administration, the system of discipline—was different from that which was most proper for the insane.

As the criminals and the criminal discipline were the primary objects of the prison, every thing is arranged for them. The rooms or cells were close and strong. The officers and attendants were selected for their power or skill in managing bad, rather than diseased, persons. They were bold and saga-

ice; but they were not skilled in the wayward workings of the disordered mind, nor prepared to meet the varieties of feeling, the delusions, excitements and depressions of insanity.

The rules of the establishment were made for criminals; and the whole administration must take the penal form, and could not be altered to suit the wants of the insane. On this account the independent and guiltless lunatic at the Dedham prison was clothed like the convicts—in the variously-colored dress.

The lunatics were in the way of the criminals. They could not be controlled with the same rigid discipline. Their excitements and their outcries disturbed the convicts; and the whole establishment could not be managed so easily, with so little force and anxiety, as it could be if all the inmates were of one class—convicts.

And on the other hand, these officers were equally convinced that they could not give to the patients the care and attention, the occupation and enjoyment, which their health and condition required.

The preceding objections relate principally to the confinement of the insane in prisons; but they bear with equal certainty, though in a modified degree, upon the receptacles. As it is no part of the intention of the law to make these curative or restorative institutions, there are no physicians employed to watch and cure the derangement of mind. The insane are subject to the law of the prison and of all custodial establishments in this respect, and are only offered the means of healing when their bodies are diseased.

The law supposed these patients were entirely passive, requiring neither healing nor forcible restraint; yet its operation has compelled the receptacles to provide the last at least, if not the first.

Mr. Keyes, the Sheriff of Middlesex, says: "Here are confined, without any means of employment or amusement, this number of patients, many of them approaching to an idiotic character, and comparatively harmless, but several of both sexes furiously mad, raving and dangerous. These last require constant watchfulness on the part of the officers, and much of

the time mufflers and straps, to prevent their doing mischief to other inmates, themselves and their clothing." *

The overseers and the government of these establishments endeavor, as far as possible, to correct this evil by sending these furious patients to Worcester. Gen. Chandler says: "It has not been necessary to retain those who were furiously mad when received, or those who have become so afterwards, for a very long period. After becoming satisfied that a patient was likely to remain permanently in that situation, evidence to that effect has been presented to the judge of probate, and his order obtained for his or her transfer to the State Institution at Worcester. But in this our Institution has not been very much relieved; for, owing to the crowded state of that Hospital for several years past, about as many have been transferred from it to our receptacle as have been sent from ours to Worcester, and there has generally been no very great difference in the character or condition of the patients thus exchanged." *

RECEPTACLE AT IPSWICH.

The receptacle at Ipswich has more room without and within; it has better accommodations, and is in every way better suited to the wants of the patients, than that at Cambridge; and under the excellent management of Mr. Worcester, the system of connecting an insane establishment with a prison has the best opportunity of success. Yet even there, where all the accommodations probably intended by the law, are provided, and the whole administered with kindness and discretion, it is plain that the plan is inadequate to meet the wants of those who are brought in subjection to it.

The present head of the house has had much experience in watching the insane; but his attention is primarily given to the House of Correction, which, with almost nine hundred convicts in course of the year, must be the principal interest of the establishment, and his attention must be given only secondarily to the insane department. Excepting him, there is no corps of officers and assistants trained for the employment, and by their taste, study and habit, competent to guide and control the insane. There is an absence of the means of occu-

* Letter to the Commission.

pation and amusement which should be offered to this class of patients, and which are considered necessary, and are found in hospitals prepared for them; and yet this establishment is of a higher order than can be expected of any county receptacle connected with a House of Correction.

RECEPTACLE AT CAMBRIDGE.

The receptacle at Cambridge is inferior in every point of view to that at Ipswich. The prison is on a small piece of ground, no more than sufficient for its own purposes, and so situated as to render any expansion impossible. Here are the House of Correction and one of the jails of the largest county in the State, and they had eleven hundred and eighteen prisoners in course of the last year. Here nothing but mere custody and confinement within the narrowest bounds can be offered to the lunatic.

The master of the House of Correction and the officers concerned in the administration are kind and discreet men, and manifest a deep interest in the general welfare of the insane; but they are compelled to feel that they are in a false position, where humanity expects, and they desire to do, that which neither the law nor circumstances allow them to do for these patients. The care of the penal part of the establishment, with the workshop and the general management, are as much as any one man should be required to attend to. With all this burden, which he must sustain, and which he has every means of sustaining, he finds that the care of the insane is a responsibility which he has neither the time nor the power to fulfil.

Mr. Sheriff Keyes says: "Of one thing I am quite certain—that no one can pass through either building without being sickened at the sight of so much discomfort and wretchedness where there has been no crime, and that no greater relief could be afforded to all officially connected with the institution than the removal of these to a better situation."*

General Chandler was asked, "Is the whole establishment, which you think the best for criminals—the buildings and the grounds, the corps of officers, the kind of men, the rules and

* Letter to the Commission.

regulations, and the general plan of administration which is needed for them, suitable also, in your opinion, for the insane?"

The General says, "To this question I answer unhesitatingly in the negative."*

General Chandler, when asked "whether he would advise the continuance, or the repeal, or modification of the law, and some other method adopted for the care and support of such insane persons as are sent to the receptacles," answered, "I have the fullest conviction, arising from experience and observation, that the law should be repealed, and some other method adopted."*

ECONOMY OF THE LAW OF 1836.

There is an apparent economy in keeping these patients in these receptacles and in the prisons. In these they have nothing but their board and shelter; and in the hospitals they have not only these, but also the best medical and other supervision especially appropriated to their mental condition. But the same price is paid for each.

The records of the State Auditor show that the same rates, \$100 a year, and \$2, \$2.25 and \$2.50 per week have been paid by the Commonwealth for the board and care of lunatics in the Worcester, Taunton and Boston hospitals, in the Essex and Middlesex receptacles, and in the Berkshire, Hampshire, Worcester and Norfolk Houses of Correction, since the year 1848 at least.†

It is true these rates do not cover all the expense of maintenance in the State hospitals, but only the board and attendance, and perhaps repairs; and besides this, the State pays the rent in the interest on the whole cost of the establishments, and also the salaries of the medical and superintending officers; while the rent and superintendence of the Boston hospital and the two receptacles are paid by the city and the counties to which they belong.

The annual cost of the rent, medical and other superintendence, which the State pays in the hospitals at Worcester and

* Letter to the Commission.

† Letter of the Auditor to the Commission.

Taunton, is about fifty dollars a year on each patient.* This is saved to the State on the patients who are supported at the hospitals in Boston and in all the receptacles and prisons; but it is either at the cost of the city and counties which built and own these establishments, or of the patients who receive so much less at the hands of their guardians.

It may be reasonably supposed that the annual and weekly rates allowed by the State pay for all that is obtained—rent, board and attendance—in the county institutions, because these are provided on a lower and cheaper scale, while they pay only for attendance and board in the hospitals; and the saving in the difference of expense is therefore at the cost of the patients themselves.

Unquestionably this class of patients may be provided for and maintained at less expense than most of the others in the hospitals; but, considering that there are some recent and curable cases among them, who, for want of proper remedial treatment, may become incurable lunatics and permanent paupers, and that the mild may become excited, and the troublesome become furious and uncontrollable, for the same reason, it is not good economy to diminish or deprive them entirely of that medical and other superintendence and means of cure and discipline which are considered the best for the management of insanity in all its manifestations and stages.

There is at the present time a crisis in the operation of the law of 1836, which seems to open the way for a change in the

* According to the records in the State Auditor's office, Massachusetts has invested \$185,000 in the Hospital at Worcester, and \$185,135 in that at Taunton. Besides this, the town gave land that cost \$2,400 to the former, and the land that cost \$12,000 to the latter. The salaries of the principal officers of these Hospitals are paid directly from the treasury of the Commonwealth,—amounting to \$3,200 at Worcester, and \$2,750 at Taunton. These payments, with the annual interest on the cost of these establishments, amount to \$14,372 at Worcester, and \$14,678 at Taunton, being the rent and salaries, which are not charged upon the patients.

These sums, being divided among the patients, make an average of \$39.15 a year, or 75 cents a week for each one at Worcester, when there are 367 in the house, as in October, 1854, and \$43.95 a year, and 84 cents a week, when the 327 rooms are no more than properly filled. At Taunton, this average is \$58.71 a year, and \$1.12 cents a week, when it is not crowded.

For both hospitals, with 577 patients, these averages are \$50.34 a year, or 96 cents a week, for each.

plan of taking care of this class of lunatics. The authorities of Middlesex find it necessary to provide other and more ample accommodations, and are only waiting to see whether the State will continue its present policy; and if it does, they will build another and suitable receptacle for their patients. The authorities of Boston feel the same necessity, and are only waiting to find a suitable location for a larger and more convenient hospital which they propose to build. Here is money to be expended and two new hospitals to be created. One is to be almost exclusively, and the other principally, appropriated to the use of the wards of the State. The former will, from the conditions of the law, be unsuitable, and the other suitable, for the wants of those who are to use them.

There seems to be no propriety in requiring Middlesex and Boston to make this investment and build these establishments, which the Commonwealth can do in the one case as well, and in the other better, for itself.

From these personal examinations of all the receptacles and prisons which are open for the insane and idiots under the law of 1836, from the universal evidence and opinions of so many competent witnesses, and from the reasons which have been presented, the Commission believe,—

1. That the system proposed by that law for the management and treatment of lunatics has not been successful.

2. That it is wrong to connect insanity with crime, lunatics with criminals, or asylums with prisons.

3. That this connection is injurious to the patients and to the convicts; and neither can be managed so well, nor the purposes of confinement so completely obtained, for either class, when in the same, as they can be in separate establishments.

4. That it is not good economy for the State to deprive its insane wards of those means of healing that would restore the curable, nor of those best disciplinary influences that would keep the others in the most quiet and comfortable condition.

5. That the State should provide a suitable establishment for its own pauper lunatics, and especially for such as are now in the houses of correction and the receptacles or hospitals connected with them, and also for the criminal lunatics.

6. That this establishment should be put under the care and supervision of responsible medical and other officers, who will

understand and be able to meet and to manage all the various phases of mental derangement.

STATE ALMSHOUSES.

In the crowded condition of the hospitals and of the receptacles, and the unfitness of the prisons for the confinement of the lunatics, the State almshouses seemed to be proper resorts for a portion of the State pauper lunatics who were mild and harmless, and who could no longer profit by the curative measures, nor need the peculiar confinement or vigilant watchfulness, of the hospital. Accordingly, several of these have been transferred from Worcester and Taunton and from the receptacles to these houses in Monson, Tewksbury and Bridgewater; and their numbers have been gradually increasing, and seem likely to increase more and more.*

These establishments were carefully examined and their intelligent superintendents consulted as to the convenience and expediency of keeping insane paupers in them. These officials gave their opinions very freely both in conversation and in letters to the Commission. They were unanimous in their convictions that the mingling of the insane with the sane in their houses operated badly, not only for both parties, but for the administration of the whole institution.

"I am fully of the opinion, from observation and experience, that the State Almshouse under my charge is not a proper or suitable place for the demented insane or idiotic in any respect." †

"We have no suitable accommodation in our Almshouse for this class of insane." ‡

"Not even in the smallest and least important requirement for their proper care are suitable accommodations provided in the building for the insane and idiotic poor." §

It was supposed that they could live quietly, undisturbed and undisturbing, mingling with the other inmates of these

* See Appendix, C.

† Dr. S. D. Brooks, Superintendent of State Almshouse at Monson, in letter to the Commission.

‡ Isaac H. Meserve, Superintendent of State Almshouse at Tewksbury, in letter to the Commission.

§ Levi L. Goodspeed, Superintendent of State Almshouse at Bridgewater, in letter to the Commission.

houses, and be there provided for as conveniently, as any other pauper. But the result of the experience of each of the almshouses does not justify this expectation. It is found that, although these lunatics were quiet and easily managed at the hospitals, where all the influences are regulated by the administration of the establishment, and where no irritating causes are allowed to come in contact with them, yet this quiescence and apparent good temper are due in great measure to the constant and present discipline from without rather than to any power of self-control. They will hardly bear the ordinary trials and irritations of common life even in company with discreet and well-balanced minds; but here, in these almshouses, their associates are less favorable to their calmness than the average of the world.

The paupers in these almshouses have less than the ordinary prudence and regard for others. They have not the discretion nor the self-sacrifice to enable them to live in harmony with those of unbalanced minds; consequently they tease, taunt and irritate the lunatic. They provoke and quarrel with him. He becomes more uneasy and less controllable.

"Under the present arrangement of our building, it is an absolute impossibility to keep the two classes separate at all times; which, from my observation and experience, I *know* to be one of the most desirable things or "helps" to be sought in promoting the comfort and well-being of both divisions of our unfortunate family. The mingling together of the sane and insane will, at times, produce much of that irritable and unpleasant effect which is so desirable and necessary absolutely to avoid."*

"They" (the patients) "come in contact every day, and at all times in the day, with a class of paupers that are very curious, and whose curiosity is easily excited, and, hearing the "comical talk" (as they term it) of the insane, leads them to merriment; and all manner of questions are asked the insane paupers, exciting them, and sometimes very furiously, which often renders it necessary to confine the lunatics; whereas, if they had not come in contact with the sane pauper, they would have remained quiet."†

* Mr. Goodspeed's letter to the Commission.

† Mr. Meserve's letter to the Commission.

“It is impossible, to any considerable extent, to keep different classes of persons, in one institution or house, separate. They must and will, under the plan of our buildings, mingle more or less.”*

The attendants and servants who do the work in the wards, and take care of the sane paupers, are generally the best and the healthiest of that class; yet they have not the moral nor the mental power to control these inharmonious elements and prevent these irritations and excitements.

“The policy in supporting these paupers here is, that they shall do the labor of carrying on the work of the institution, with the aid of a few officers at the head of the different departments;” but “we cannot depend on pauper help to have the care and custody of such persons.”*

By this mingling the sane and insane together both parties are more disturbed and uncontrollable, and need more watchfulness and interference on the part of the superintendent and other officers.

“It occasions frequent instances of discipline. It has a reciprocal evil effect in the management of both classes of inmates.”*

The evil is not limited to breaches of order; for there is no security against violence from the attrition of the indiscreet and uneasy paupers with the excitable and irresponsible lunatics and idiots.

“Most of the demented insane, and many idiots, have eccentricities; they are easily excited, disturbed; and nothing is more common than for inmates to tease, provoke, and annoy them, in view of gratifying their sportive feelings and propensities, by which they often become excited and enraged to a degree so as to require confinement to insure the safety of life.”*

“There are times when, from causes entirely beyond our control, within our present accommodations, our insane and idiotic become somewhat violent and dangerous; and to maintain a proper degree of restraint, it is necessary to resort

* Dr. Brooks' letter to the Commission.

to the mufflers, wristers, &c., sometimes confinement in the lockup." *

"I could name many instances where the demented insane have become furious and excited by coming in contact with the other paupers." †

As the patients live in the wards, and eat in the rooms with the rest of the family, and have access to the instruments which are necessarily common in such houses, and are not watched by the vigilant eye of intelligent and ever-thoughtful attendants, as they are in the hospitals, there is danger of assaults and injury from these excitable patients.

"A man whom we considered very harmless was plagued by the inmates, and caught hold of a large bread knife, and made at them with it, and no doubt, would have killed them if I had not at the moment come in and took the knife from him." †

In all these and similar troubles, the only means placed in the hands of the officers, of subduing the outbreak and restoring quiet to the wards, is to separate the antagonistic parties, and to remove the lunatic who is the apparent, though not the prime, cause of the disturbance; and then, for want of attendants to watch him, it is necessary to confine him alone. "But the places for confinement in the State almshouses are not suitable to confine insane; they are cells provided for punishing the refractory and disobedient inmates." † They are below the surface of the earth, and cannot be warmed or ventilated. ‡ §

* Mr. Goodspeed's letter to the Commission.

† Mr. I. H. Meserve's letter to the Commission.

‡ See page 129 of this Report.

§ In the earlier ages, when the nature of insanity was not understood, and the insane were the objects of terror to the people, they were sometimes confined in cells similarly situated.

Esquirol says: "These unfortunate creatures, like state criminals, were thrown into the cells of the basement." *

Dr. Brown, of Scotland, in his *History of Insanity and Insane Asylums*, says, that at "Maréville, in France, the cages containing the patients were placed in the cellars. At Lille they were confined in what were styled subterranean holes." "Revolting as these disclosures are, I feel bound to make them, in order to show from what a degrading state of ignorance and brutality we have escaped, and from what complicated misfortunes the objects of our care have been rescued by the diffusion of knowledge." †

At the visits of the Commission there were three excited lunatics confined in the cells in two of the almshouses; and in the present state of things, and with the present means of government, they are liable to be confined at any time in all of them.

The confinement of the insane in solitary and strong rooms in hospitals is one of the extreme measures. It is almost abandoned in England, and is resorted to with great caution in America, and only after careful consideration by the higher officers of the house, and is limited to the shortest possible period necessary to overcome the excitement.

With the present arrangements and means put into the hands of the officers of these establishments, it is impossible to have a divided or a flexible administration to meet the wants of such diverse parties as the sane and insane inmates.

“The government adapted to the management of sane inmates is not adapted to the management of those of an opposite state of mind; and two different forms of government cannot be carried out in one house with equally good results as they can if separated, both in point of economy, and moral and intellectual improvement of the patients. Our inmates generally are not very intelligent. We cannot vary a rule to meet the palliating condition of a demented insane or idiotic person without their taking the advantage of it, oftentimes to the serious injury of the general discipline of the house.”*

It was the opinion of each of the superintendents that the mingling of the State paupers, sane and insane, in these almshouses, made the whole more difficult and expensive to manage. It cost more labor, watchfulness and anxiety to take care of them together than it would to take care of them separately. The machinery which is proper for one cannot be profitably and successfully applied to the other. If, however, it be requisite to keep the lunatics at these houses, it would be necessary to have a distinct building, entirely separated from the principal house, and surrounded by a high fence, so that the insane and idiots should not come in contact with the other and sane household. They would need separate attendants and officers

* Dr. S. D. Brooks' letter to the Commission.

to take charge of them, and different regulations for their government. By this means each almshouse would have a distinct lunatic hospital, which could receive and accommodate an indefinite number of these patients, according to the size of the buildings that might be erected for them.

Here, then, would be three separate establishments for the insane, and none of them would be satisfactory. As these sane and insane paupers are now mingled together, the cost of maintaining the whole is greater than it would be if they were separated; and the cost of supporting the insane paupers in the three distinct houses on the almshouse farms and under the same management, and not under the care of persons trained for and exclusively devoted to them, would be as great as in another place, and less beneficial to the patients.*

OPINIONS OF SUPERINTENDENTS OF AMERICAN HOSPITALS.

Besides the especial objection to the State Almshouses as they are now constructed and administered, there are general objections to the whole principle of connecting any lunatic asylum or receptacle with any pauper establishment, and of putting both under the same government. The several superintendents of the American hospitals were consulted as to the expediency of adopting this system; none of them advised it, and some very strongly condemned the plan. Dr. Walker, of Boston, Superintendent of the City Lunatic Hospital, says, emphatically: "No lunatics should be kept in any pauper establishment, and I trust you will not advise it." †

Dr. Ray, of Providence, says: "No friend of humanity, much acquainted with the management of poorhouses, would hesitate to condemn the idea that they can be made proper receptacles for the insane." †

Dr. Tyler, of Concord, N. H., says: "I would never keep

* Since this was written an arrangement has been made at Bridgewater to give one large hall up to the use of the insane and idiotic; and many have been removed there from Cambridge and Ipswich, and a few from the hospitals.

These patients occupy this room, and walk or work in the yard, in the daytime, and at night most of them sleep in a large dormitory; but it is necessary to lodge some of them in the cells, on account of their dangerous dispositions and untrustworthy habits.

† Letter to the Commission.

any insane in almshouses or in houses of correction. They will be neglected at times." *

Dr. Gray, of Utica, N. Y., says: "No insane person should be treated, or in any way taken care of, in any alms or county house, or other receptacle for paupers." *

Dr. Benedict, late superintendent of the New York State Lunatic Hospital at Utica, and formerly of the Philadelphia Almshouse Hospital, says: "As to the expediency of providing, in connection with the State Almshouses, buildings or rooms for the mild pauper lunatics, I should say *no*, decidedly. Three years' experience in the Philadelphia Almshouse Hospital enables me to speak emphatically on this head. Buildings or rooms for the insane, in an almshouse and under almshouse management, would, I think, be unavoidably subject to abuse." *

Dr. Curwen, of the Harrisburg, (Pa.) Hospital, says: "The great objection to the establishments in connection with State Almshouses would be the little attention paid to the mental and bodily state of the inmates, the careless manner in which those in charge would perform their duties, from the feeling that nothing could be done for the class intrusted to their care, and the inevitable tendency of the experiment to see how small an allowance can be made to keep soul and body together." *

ENGLISH OPINIONS AND PRACTICE.

In England a great portion of the pauper lunatics are in the workhouses; yet those in authority on these matters discourage it as far as possible, and urge the removal of such patients to some proper asylum wherever room for them can be obtained. The Commissioners in 1844 said: "We think that the detention in workhouses of not only dangerous lunatics, but of all lunatics and idiots whatever, is highly objectionable. If a necessity exists for detaining the insane poor in workhouses, care should be taken to secure for them proper treatment by persons experienced in the diseases of the insane." †

* Letter to the Commission.

† Report of Commission in Lunacy, (Eng.) pp. 99, 100.

In 1847, the same commissioners, speaking of patients afflicted with melancholia and tendency to suicide, a common form of insanity, say: "Of course persons of this class are most improper inmates of a workhouse, and ought to be sent without loss of time to a lunatic asylum."*

The insufficiency of hospitals to accommodate those who needed their aid kept many in the workhouse; yet the commissioners report, in 1854: "The number in workhouses continues in most districts to be steadily diminishing—a result which is doubtless, in great measure, attributable to the large additional accommodations now made for them in the recently erected lunatic asylums."†

While, then, the progress of civilization and political economy in England is removing the insane from the poorhouses to hospitals, it is to be confidently hoped that the reverse will not be done in Massachusetts, and that wards will not be prepared for them in the State Almshouses, nor patients be sent to mingle with the usual pauper inmates of these establishments.

WORCESTER HOSPITAL.

Plan and Structure.—This Commission have made a careful examination of the State Lunatic Hospital at Worcester, and in all its parts, and become familiar with its internal arrangements, its advantages and disadvantages, and its defects.

The plan of the building, although the best the age afforded when it was constructed, has necessarily remained the same. Improvement has been made in all the arts and sciences; so that the machinery and the instruments which were in use twenty years ago are now abandoned, and others of better model and kind adopted, and the change has been found profitable. Similar improvements have been made in the whole management of the insane, especially in the plan and construction of the institutions appropriated for their use and in the means of occupying them.

The Hospital at Worcester now represents the past age, while the wants of the patients are measured by the means offered in the present. All the stories are low, being only eight

* Report of Commission in Lunacy, (Eng.,) pp. 99, 100.

† Ibid., p. 40.

and a half, nine, and nine and a half feet high in the different parts. In the latest hospitals they are twelve feet high, which, Dr. Kirkbride says, should be the lowest, but in the centre buildings they should be higher.

The halls are long and narrow, and, having rooms on each side, can receive light only at the ends. The windows at these ends are small; very few of these open directly to the air; some of them open into verandas, and others into smaller rooms, and in either case affording no prospect abroad. These long halls are therefore dark and gloomy, with nothing to cheer, and with little or no opportunity of receiving the direct rays of the sun. These are the day rooms of the patients, where they are expected to remain during all their waking hours while they are in the house.

Ventilation.—The ventilation is very unsatisfactory, and insufficient to carry off the foul air. Originally there were only small ducts in the walls leading from the wards below into the attic above. What foul air passed through them went to the attic, but no farther, for there was no outlet from that place; and when it was once filled with the air from the rooms, no more could be received, and they were no longer ventilated; and sometimes a current was sent downward from the attic, carrying its foul air to some of the wards.

An improvement was made by making some openings from the attic; and recently, under the direction of Hon. Jonathan Preston, of Boston, these ducts, in several of the wings, were connected by wooden pipes or boxes, with ventilating shafts or chimneys, which are heated, and have an active upward current. By this means these wards have a purer atmosphere, and are comparatively comfortable.

But the ventilation in the other wings, which have not the advantage of a chimney to make a forced current, but depend on Collins' ventilators, remains imperfect, and the air impure and insalubrious.

Warming—Danger of Fire.—The Hospital is heated with furnaces in which wood has been hitherto burned. This method of heating is less favorable for health, and less safe, especially in a hospital, than steam. The air is less comforta-

ble, and the equality of the temperature less certain. The greatest objection to the furnaces is the danger of fire.

The furnaces are in the cellar, immediately under the wooden work of the floors, which are very near, and must be in the driest and most combustible condition. The smoke flues pass up in the walls. The air ducts are also of brick, but in contact with wood. A slight crack in the furnace would allow a spark to escape into these air chambers, and thence to reach the woodwork, and combustion take place.

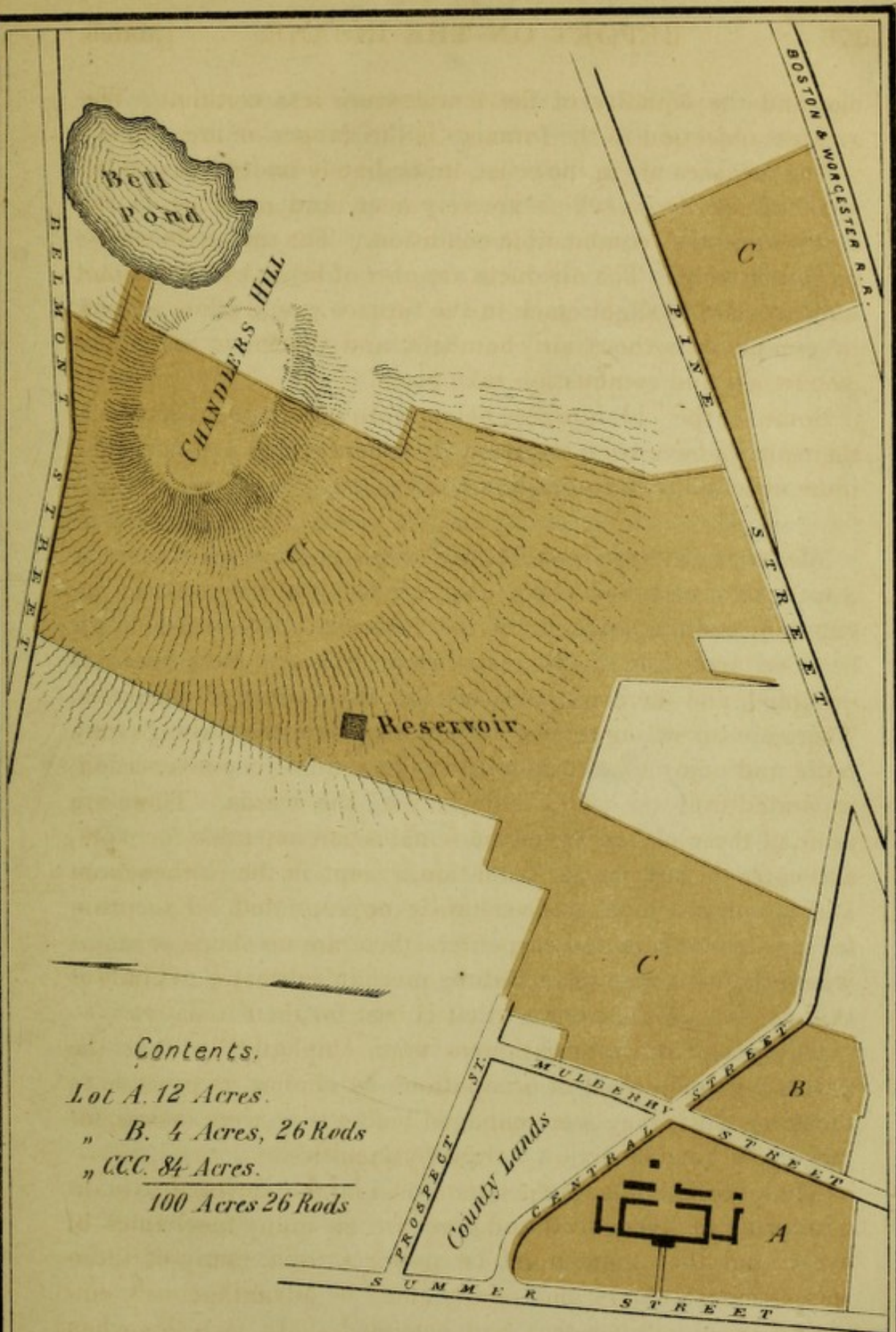
Some of the old furnaces being worn out or unsatisfactory, their places have been supplied by others which are safer and more effectual in warming the house.

Means of Occupation.—Besides these positive evils, there is a want of rooms and other conveniences for the use and occupation and employment of the patients. When the house is filled according to its estimated capacity every room is occupied, and there are none left for any variety of purposes. There are no sitting-rooms, no parlors, where the patients may retire and enjoy a quiet opportunity for reading or conversation, separated from the whole company of the wards. There are none of these places where the females can assemble for work, and carry on any special operation, except in the clothes-room and laundry, which are constantly appropriated. Excepting for harness-makers and carpenters, there are no shops or rooms where the men who have various mechanical tastes or kinds of skill can obtain the exercise that is best for their malady.

The English Commissioners urge, emphatically, that the patients be employed in occupations as similar as possible to those in which they were engaged before they were insane, for these give healthy action to healthy faculties.

The people of Massachusetts are so largely devoted to manufacturing of every sort, and here are so many mechanics of every kind, that there must be patients from many of these classes whose hands and minds could be advantageously employed in something that had occupied those faculties when in health. But there are no rooms in or about the Hospital for these to work in.

There is a want of opportunities of amusement, of pleasant though trivial occupation. There are no bowling alleys nor





other means where exercise is combined with diversion, or in which the mind is agreeably and suitably employed.

The only resort for exercise is, either to walk in the public streets or in the fields of the Hospital, or to labor on the farm or in the garden, which are almost as public. Unfortunately, the original site of the Hospital is small and surrounded by streets. The other lands which have been subsequently added at various times, as opportunity offered, are necessarily separated from it.

Grounds.—The plan of the estate, which was drawn by Messrs. Boyden & Ball, of Worcester, and is herewith presented, shows that there are twelve acres in the original lot on which the buildings stand; four acres and twenty-six rods in the east garden, which is separated by Mulberry Street from the first-mentioned lot; and eighty-four acres of tillage, pasture and woodland on and about Chandler Hill, separated from both of the other lots by Central Street, and this is divided by Pine Street; and the situation of the whole estate is precisely the reverse of that compactness which is the most advantageous for a lunatic hospital.

The grounds are not only overlooked by the people in the streets, but the pasture, the great body of the land, is the common and agreeable resort for the people of the city in their hours of leisure, and for the idlers and the loungers who wish to find fresh air and enjoy a pleasant prospect. The patients cannot, therefore, exercise in that place with the privacy that is generally requisite. These lands, then are of comparatively little value except for agricultural purposes. The surface of the ground being very hilly, the steep ascents and precipitous declivities will prevent its being used for rides; the stony soil of a part will not admit of much high cultivation; and its publicity must prevent its being used for walks with the freedom that is desirable for hospital patients.

Drainage.—The drainage is unsatisfactory. Although the Hospital stands upon a hill at the foot of which runs a small stream, yet the Trustees have been unable to obtain leave to conduct the sewer and carry the waste into that channel. It was not unreasonably supposed that the pouring of the offal

and the waste from so large a population as live in the Hospital into a sluggish stream in the midst of the city might be detrimental to the public health. It has been necessary, therefore, to carry the sewers in another direction upon the lands belonging to the establishment; but they terminate in open pools so near to the house that the offensive effluvia of the gases reach its inmates, especially when the wind is moving from that quarter.

Great attention is now paid in England to the sewerage of the cities and compact towns, both as a sanitary and as an economical measure. Not only better and more effectual methods of draining the towns are introduced, but the matters which were formerly lost are now used as liquid manure upon the lands with the greatest advantage to crops, and in a manner not injurious to health.

As "it is a primary condition of salubrity that all ordure or town manure should be immediately removed from beneath or near habitations,"* it is a matter of the first necessity that the drainage of the Hospital should not be allowed to stop so near the house as it now does, but be carried off as far as possible, and then, both for the good of the patients and for the good of the farm, be distributed over the land. If this cannot be done, it must be an important objection to the present site of the Hospital.

Out-Buildings.—The situation of the stables and piggeries seemed particularly unfortunate. They were immediately in the rear of the building, and especially near to the female wings. They cut off the natural prospect in that direction, and presented, instead of green fields and hills, buildings that are not agreeable to all, and to some quite offensive. It is convenient to have these near to the house; they are then more accessible, and the cattle and the swine can be taken care of with greater facility and advantage. But as the State created the establishment solely for the treatment and the cure of the insane, and as the Hospital is primary, and the farm secondary, with no interest whatever to the institution excepting so far as

* Report of the General Board of Health to the British Parliament on sewer water and town manures, 1852.

it is subservient to the health and comfort of the patients, these buildings should be removed from the immediate vicinity of their dwelling.

'There are four kitchens, all in full daily operation. By this arrangement the preparation of the food is more expensive, and the culinary department more difficult to manage, and less satisfactory, than if the whole cooking operations were done in one.

Nearness to the City.—The position of the Hospital, in the midst of an active and growing city, has some advantages, and many disadvantages. The busy scenes of life, the stir of business, the movements of passengers and carriages in the streets, the rush of railroad trains interest many patients, and stimulate at least the curiosity of some, and quicken the dormant faculties of others. And there are some who are benefited by walking in the public streets, by visits to factories, shops, and the market-places.

On the contrary, in the acute stages of insanity the excitable and violent need quiet and freedom from causes of excitement. They are disturbed and injured by the lively scenes and sounds that belong to the busy haunts of men. While, therefore, these may be presented with advantage to some classes of patients in some states of disease, they certainly should be avoided by others. It is well for a hospital that it have a city within convenient distance, that its inmates may see its sights and hear its sounds whenever it shall be profitable for them; but the whole should not be subjected at all times the necessity of seeing and hearing them. The officers should, therefore, be able to shut them out, and the Hospital should not be surrounded by, and near to, the stimulating affairs of city life.

What Improvements can be made.—The Worcester Hospital, in its present condition, cannot offer to the patients the means and facilities of cure and discipline which are found in other and more modern institutions, and to which they have a reasonable claim. Some of these defects can be removed, some modified; but others are inherent in the building and location.

The halls can be made lighter, and more airy and cheerful, by enlarging the windows at the ends and letting in as much

light as possible. By cutting out some of the side-rooms, and making cross-halls, the wards will be made more airy and less monotonous. Narrow parlors and sitting-rooms for the patients to retire to, or for small parties to gather in for work or amusement, can be made by converting two or more of the lodging-rooms into one. It is easy to build shops and work-rooms for men to occupy themselves in such ways as their health may require.

The ventilation is already improved in most of the wings; but it cannot be made satisfactory in the others without a great and radical change in the structure of the building.

Most of the strong and solitary cells that have become useless are about to give place to other rooms which are more needed and satisfactory. The steam apparatus for heating can be introduced, and the danger of fire from the furnaces arrested.

The four kitchens can be abolished, and one suited to the wants of the whole establishment substituted.

The stables and piggeries can be removed to a proper distance from the main house.

To make these alterations and improvements would be very costly. Dr. Chandler estimated the cost of the steam apparatus for heating, ventilation of the strong-rooms, the new kitchen, removal of the barn and proper drainage, to be fifty-five thousand dollars, (\$55,000.) Mr. Preston and Mr. Boyden, architects, both familiar with the construction of hospitals, estimated the cost of the heating apparatus, improved ventilation and kitchen, to be fifty-five or sixty thousand dollars, (\$55,000 to \$60,000.) Neither of these estimates included the cost of improving the halls, altering the rooms, providing shops, &c., which would probably cost more. A new and complete system of heating and ventilating has just been introduced into the New York Hospital, on only one side, at the cost of \$100,000.

What Defects must remain.—Yet, after all shall be done that can be, other defects which cannot be amended, and other objections which cannot be removed, will remain.

The nearness to the city, the divided and interrupted grounds, which should be exclusively appropriated to the use of the patients under the entire control of the government, the low

rooms, the narrow halls, the imperfect ventilation of some of the wards,—these must remain as they now are, and some of these must increase and interfere more and more with the usefulness of the institution. With all these alterations and improvements, which will require the expenditure of at least sixty thousand, and more probably seventy-five thousand, dollars, to put the Hospital in the best condition that it may be, it will still be imperfect, inadequate to its purposes, and unsatisfactory.

In view of this great cost and unsatisfactory result, the Commissioners think it not expedient to make these thorough repairs, but advise that provision be made, if possible, in some other way for the wants of the insane, more successfully for them, and more advantageously to the interests of the Commonwealth.

Value of the Hospital Estate.—Some of the circumstances and condition of the estate, its situation in the heart of the city, and the streets that run through its lands, which diminish its usefulness for its present purpose, increase its usefulness for other purposes, and give it a value in the market which would not justify the selection of this special location for a Hospital at the present time; while its intrinsic worth and increasing value afford abundant means and opportunities of escaping from these difficulties, and removing these objections hereafter, by the erection of a new structure on a cheaper and more suitable site.

Several gentlemen,* residents of, and engaged in active business in, Worcester, who represent the best commercial, manufacturing and financial talent and experience in the city, were requested to examine and appraise the whole real estate belonging to the Hospital. After careful consideration, they returned the following valuation:—

Original lot on which the buildings stand, containing the twelve acres, including the buildings,	\$70,000 00
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* Joseph Mason, Isaac Davis, Samuel Davis, F. H. Kinnicutt, D. S. Messenger, William M. Bickford, W. A. Wheeler, William T. Merrifield, Albert Tolman, Joseph Sargent.

East garden, containing four acres and twenty-six rods,	\$20,000 00
Residue of real estate, about eighty-four acres of pasture, tillage and woodlands on and around Chandler Hill,	30,000 00
Total,	\$120,000 00

Other gentlemen, conversant also with the value of property in Worcester, gave different estimates, both higher and lower than that rendered by this Commission. Taking the lowest estimate, and adding to this the probable cost of complete repairs, (seventy-five thousand dollars,) here is a sum almost, if not quite, sufficient to purchase a new and suitable site, with a large and compact farm, within the limits of the city, and to build a new and satisfactory Hospital with all the recent improvements.

Convenient sites can be obtained in Worcester within one or two miles of the dense part of the city and of a railroad station, and another Hospital could be built for two hundred and fifty patients for about two hundred thousand dollars.

As the building of a new Hospital would take at least two years, and as the wants of the patients in the present house are pressing, and the condition of this requires immediate relief, the Commission and the Trustees had careful consultation, and concluded that it was best to make some temporary repairs and alterations in this establishment, to secure the house from danger of fire and the health of the inmates from suffering—to provide for the immediate wants of the patients until other and more satisfactory accommodations shall be furnished. This work is now going on under the authority of the Trustees and under the charge of Mr. Preston.

They are making these improvements by removing many of the solitary and strong rooms, by opening the halls to the light, and thus obtaining more parlors and rooms for sitting, and giving more airy lightness and cheerfulness to the wards. They are about to remove the barn and all the farm buildings, and to improve the drainage. They are adding rooms for occupation, and improving the ventilation—thus rendering the whole establishment more available in the hands of those who admin-

ister it, and more advantageous to those for whom it is administered. When these alterations shall be made, the Hospital will necessarily afford room for a somewhat smaller number of patients than it now does. Yet how great that reduction must be cannot now be determined. And it will be then seen how far they will supersede the necessity of an entire reconstruction of this establishment.*

WANTS OF THE INSANE AND PROPOSED MEANS OF RELIEF.

Here, in this stage of the progress, is an opportunity for the Commonwealth to look the whole matter in the face, see the full amount of the burden of insanity and dangerous idiocy resting upon her and her people, and measure the extent of the sacrifice she and they must make for their cure, for their custody and guardianship, and for the public safety. The evil is a great one, and the means of relief are correspondingly great; but the burden is made none the less by keeping it out of sight, and the cost is not lessened by paying it indirectly.

The expense of keeping the troublesome lunatic in the State Almshouse is not diminished by assessing it upon the whole household, making an average of those who need watching and occasional restraint with the little children, and calling it so much a head for all. Nor is this cost diminished in the receptacles by making the counties pay a part of it.

This is not merely a present and temporary evil. A large portion of the cases are permanent, because incurable. Others are becoming so, although they may now be restored. Our population is increasing rapidly; and insanity keeps pace with it, and probably runs in the advance. The causes of insanity are still as abundant and as efficient as they have been; and if they are not arrested nor modified, this year and the succeeding years will produce as many lunatics as the last and those that went before it. The next year and the next generation will, therefore, have as large a proportion of lunatics to provide for as we now have.

It is well, then, to look to the future as well as the present, and lay such a plan for the administration of insanity as will

* See Appendix, C.

meet all the demands of those who suffer from it, and such as will be the best for the interests of the Commonwealth.

There are six hundred and ten lunatics and idiots who need, but have not, the advantages of a hospital for their cure or their protection.

Two hundred and five of these are said to be curable. Ninety are said to be violent and furious. Four hundred and eight are excitable and troublesome.

Besides these, who are at their homes, there are those who exceed the due numbers in the Hospitals at Worcester, Taunton and Boston.

For all of these some provision is to be made; and they demand the first attention of the State.

Without supposing that all of these would be sent to a hospital even if it were offered to them, yet, judging by the past, seeing how soon every new institution for the Insane in this and other States has been filled, there can be no doubt that another in Massachusetts would be immediately occupied.

PLAN OF FURTHER CARE OF THE INSANE.

In view of the present and future wants of the Insane in Massachusetts, the Commissioners recommend:—

1. That a new Hospital be now erected, in order to accommodate those who are not yet in any such institution, and especially the curable and furious patients.*

2. That the consideration of the sale of the Hospital at Worcester be postponed until the third Hospital shall be ready for occupancy, and then, if deemed expedient by the legislature, be sold, and another erected in its stead within the city of Worcester.

3. That the legislature take into consideration the plan of providing for the State pauper lunatics in a separate hospital suitable to their condition and wants, where the curable may be restored, and the incurable be properly and comfortably kept.

* *Note to Second Edition, June, 1855.*—The Legislature adopted the recommendation of this Report, and ordered a Hospital to be built in one of the western counties, and appropriated \$200,000 for this purpose. See Act for this purpose, in the Report of the Committee on Charitable Institutions, at the end of this volume.

4. That the law of 1836, ordering the creation of county receptacles, be then repealed, and the counties be relieved of the responsibility of providing for the wants of the State.

5. That all the laws in respect to Insanity and Hospitals be revised, and reduced to a code more suitable to the wants and the practice of the times.

NEW HOSPITAL LOCATION.

Having come to the conclusion that the State should build a third Hospital, the Commission examined the returns from the several towns and those from all the asylums; and comparing the numbers of the Insane who were in need of such an Institution in the various sections of the Commonwealth, they became convinced that, for statistical as well as for geographical reasons, it should be placed in the western part of the State. For convenience of the people who are to use it, it should be on one of the great thoroughfares, as the Western or the Connecticut River Railroad, in a place the most accessible to the whole body of the population of those four counties.

It should be near to some large town or village, where provisions, mechanics, and other aids could be obtained if needed, and near to a railroad station, certainly not over two miles from it.

SITE AND LAND.

If possible, there should be not less than two hundred and fifty acres of land, certainly not less than two hundred, all in one body, unbroken and undisturbed by any road, or streets, or impassable stream, so that the patients may obtain all kinds of exercise within their own enclosure, and so that the whole may be constantly under the eye and the control of the officers and attendants.

The ground should be high, and susceptible of drainage; and the soil porous, to absorb the surface water. There should be an unfailing supply of pure, soft water, to the amount of not less than ten thousand gallons a day in the dryest season. It is better that this should be spring water running directly from the earth than surface water, whether in running streams or in ponds.

SIZE AND PLAN.

The Hospital should be built for not over two hundred and fifty patients; though one for two hundred would be probably more advantageous to its great purpose,—the healing and the management of insanity,—and consequently more profitable to the State.

By the kindness of several of the Superintendents of Hospitals in the United States, this Commission have received many plans of asylums which they have designed for this purpose. They have also received some from England. These all have high merit; and probably each one would be found convenient and useful, and satisfactory for its purpose.

A very admirable plan of the Lunatic Hospital of Wiltshire, at Devizes, in England, was sent by its author, the able and learned Dr. John Thurnham, who originally designed, and now superintends, the establishment. Mr. Chadwick and the Commission in Lunacy both write that great improvements have been made in Great Britain in the management and the construction of Hospitals for the Insane, and they offer any further aid that may be needed to secure for Massachusetts the best plan that the present time has produced.*

The Commission examined many sites for a Hospital in the Western Counties, and found several that offered all the requisites for such an establishment; they include land sufficient for all its purposes unbroken by roads; the soil is a sandy loam, that absorbs the rains, and leaves no water to rest on the surface; they have facilities of easy drainage; there is pure and soft water running from springs to the amount of twenty thousand gallons and more a day even in the summer. All of these are within convenient distance of large towns and of railroad stations. Nevertheless, it would not be advisable to make a definite selection without a further and more minute examination.

* "Our management of the lunatics has been vastly improved. In the new Asylums there have been great structural improvements. Of these the reports will inform you. You should come over and see them yourself. Given your numbers, I think it might be worth your while to send over here to Mr. R. Rawlinson, or some other architect conversant with that class of structures, for a plan of internal arrangements—you taking such elevations as might suit the taste of the country. Our lunacy inspectors would give you every facility in their power."
—Mr. Chadwick's Letter to Commission.

The whole time of some of this Commission has been given to the work assigned them by the legislature; yet the lunacy survey, the collateral inquiries, the digestion and preparation of the facts that were learned, and the principles that were involved, have consumed the whole, and allowed this Board to do no more than is here presented. They have, therefore, omitted to select a definite site for, and plan of, a Hospital; and, inasmuch as both of them demand time for further inquiry, it is inexpedient to delay this Report for that purpose.

As the Commonwealth would not create such an Institution as herein proposed without obtaining assurance of every possible advantage and immunity from every avoidable danger, therefore, before making a definite location, it will be necessary to determine the healthiness and endemic influences of any town or district that may be proposed. This can be easily done by examining the reports of disease and mortality which have been sent from every town in each of the last twelve years to the Secretary of State, and are now preserved in his office. These annual reports will show to what extent any district or locality is subject to, or exempt from, the peculiar diseases that most frequently fall upon the insane.

This Commission has not had time to make this examination, nor have the Superintendents of Registration been able to furnish them with the requisite information in regard to this matter.

If the suggestions which are herein presented shall be adopted by the legislature, it will be necessary that another Commission be appointed, who will take the charge of the whole work of building a Hospital. It is better, then, that the responsibility of selecting both a location for the establishment and the plan for the building should be devolved on them.

They will have better opportunity in the spring to make the further inquiries that may be needed for this purpose. To that future Commission the present Board would leave this duty, with only the suggestion, that, as the buildings and grounds are the instruments in the hands of the officers and attendants for the production of health, as a factory and ma-

chinery are in the hands of the manufacturer and the workmen for the production of their articles, therefore that practical wisdom which is applied to common and private affairs should be used in selecting a site and adopting a plan, regarding present cost not so much as the advantage and success with which they may be afterwards used in the management and cure of the insane.

This Commission would advise, therefore, that in selecting a location no regard be paid to inducements that may be held out by towns, by the offer of lands or of subscriptions, to aid in the purchase, and that no gifts be accepted that will imply any obligation of the State to continue the Institution in a place when it may seem expedient to remove it, and no lesser present interest be allowed in any way to compromise the greater and future interests of the State and the lunatics for whom the whole Institution is to be created.

Like discreet individuals, the State should go into the market, make its selection with the sole view of effecting the final purpose, purchase its lands and pay the usual price, and then be independent of all further obligations.

With these suggestions, the Commissioners respectfully submit the whole matter to the wisdom of the legislature, not doubting that they will do the best that the claims of humanity for her suffering children and the interests of the intelligent and liberal Commonwealth require.

Accompanying this Report will be found all the papers referred to therein, the plans and descriptions of Hospitals, the correspondence and the returns of the physicians and others concerning the insane and idiots within or belonging to Massachusetts. The Commissioners respectfully suggest that these be deposited in the State Library, for the use of the legislature and of any future Commission which may be appointed for this or a similar work.

LEVI LINCOLN.
EDWARD JARVIS.
INCREASE SUMNER.

It is due to the intelligence, ability and fidelity of our laborious and indefatigable associate, Doctor JARVIS, to state, that the very extensive correspondence with professional gentlemen, in this country and Europe, which elicited many of the facts and much of the important and instructive information contained in this Report, was exclusively conducted by him. He directed and superintended, also, the preparation of the numerous tabular statements and illustrations which are herewith presented, and the draft of the Report is from his pen. It must be obvious that such service could be performed most connectedly and efficiently, and with greatest economy, both of time and expense, by one of the Commissioners, acting under the authority of the Commission; and the professional character of Doctor Jarvis, his personal experience and habits of observation, and his long-continued and devoted attention to the treatment of insanity and the subject of Hospitals generally, eminently recommended him for this delicate and difficult task. We hardly need add, that he has executed it in a manner most satisfactory to his associates, and, we trust, beneficially and acceptably to the government.

The other Commissioners coöperated freely in the general attention due to the objects and assigned duties of the Commission; in the direction given to the course of inquiry; in the personal visitation and examination of the public hospitals and places of confinement for the insane within the State, and in frequent consultations; and they fully concur in the opinions and recommendations which are expressed, and the results presented, in the Report.

LEVI LINCOLN.

INCREASE SUMNER.

A P P E N D I X .

A.

[Note to page 105.]

The Reports of the Worcester and the Western Virginia Hospitals through all of their years, and those of the New Hampshire, Kentucky, and Ohio Hospitals, through several of their years, state both the duration of the insanity before entrance into the hospital, when it was known, and the time required for recovery of each patient who was restored. The records of the McLean Asylum state the latter fact since 1840. The sum of their experience shows that the time required for recovery of all whose cases are thus stated, was less than seven months.

Duration of disease before treatment.	Cases.	Average time required for recovery.		
Less than one year,	2,775	5	months	19 days.
One year and over,	720	10	"	13 "
Unknown,	230	11	"	10 "
All who recovered at the McLean Asylum,	1,075	5	"	2 "
Totals,	4,800	6	"	16 "

The average time required for the recovery of all who were restored at the Worcester Hospital was five months and three days.

Dr. Chandler, twenty-first Report, p. 69, states that the average duration of insanity, of those who had died unrestored in the Worcester Hospital, was, of 201 males, six years and three days, and of 205 females, four years eleven months and five days. These include only those patients whose friends or guardians retained them in the hospital until their death. There were many others whose diseases were of sufficiently mild form to allow them to be removed to, and retained at, their homes. Although these were never restored, yet they en-

joyed a longer life than those who died in the hospital. If these had been included in the calculation they would have shown a greater average longevity of the incurably insane than is shown by Dr. Chandler's calculation.

Mr. John Le Cappelain, Actuary of the Albion Life Assurance Company of London, Eng., made a calculation of the expectation of life in the irrecoverable insane, founded on Dr. Thurnam's Statistics of Insanity, and has sent the result to the Commission, which is here given.

Probable duration of life in irrecoverably Insane Persons.

Age.	Males.	Females.
20	21.31 years.	28.66 years.
30	20.64 "	26.33 "
40	17.65 "	21.53 "
50	13.53 "	17.67 "
60	11.91 "	12.51 "
70	9.15 "	8.87 "

The difference of cost of time and expense of restoring, and of life support of lunacy, is largely in favor of the former.

B.

[Note to the second edition, page 167.]

The Tables and Statements presented in this Report show the distribution of the insane and idiots as they were when the inquiry was made in the autumn of 1854, and probably they are still the same, or represent similar facts now existing in Massachusetts, with the exception of some of the State Paupers.

Since the 1st of January several of the insane and idiots who were supported by the Commonwealth, have been transferred from the County Receptacles, &c., to the State Almshouses. A second inquiry was accordingly made of the superintendents of these several establishments, in respect to the number and condition of those persons under their care. The following table shows the facts as they were at the end of May, 1855.

Number and condition of the Insane and Idiots in the State Alms-houses and County Receptacles.

	Insane.	Idiots.	Both Classes.	SEX.		NATIVITY.			CONDITION.		
				Male.	Female.	American.	Foreign.	Irish.	Mild—manageable.	Excitable—troublesome.	Furious—dangerous.
ALMSHOUSES.											
Monson,	30	17	47	24	23	10	37	29	18	28	1
Tewksbury, . . .	22	5	27	10	17	6	21	16	7	11	9
Bridgewater, . .	—	—	99	60	39	6	93	87	54	40	5
Totals,	—	—	173	94	79	22	151	132	79	79	15
RECEPTACLES.											
Cambridge, . . .	24	—	24	13	11	7	17	16	—	—	24
Ipswich,	55	—	55	—	—	21	34	14	5	40	10
Totals,	—	—	79	—	—	28	51	30	5	40	34

In the receptacle at Ipswich there are six insane persons whose disorders are of less than one year's standing, and all these supposed to be curable.

Some of the lunatics have been removed to other States, where they had a legal residence, and a few have been returned to Europe.

Beside these changes in location and distribution, there have undoubtedly been changes in the individual patients. Some have died and some have recovered. But, as the causes of insanity still prevail, and as like causes under like circumstances always produce the same results, others have become deranged, and taken the places of those who were removed by recovery or by death. There may also be some changes as to their numbers in the hospitals, the poor-houses, the private dwellings, and even the towns, where the insane are found. There are probably some changes in the smaller classes; but in the greater classes of society, in the State and its great divisions, the numbers of the insane, and their proportion to the population, are not, and will not, be materially altered, until the character and habits

of the people, their condition, exposures, and circumstances which excite or disturb the brain are changed, and the causes of insanity shall be removed, or at least diminished.

E. J.

DORCHESTER, June 12, 1855.

C.

[Note to the second edition, page 182.]

The improvements which are indicated in this Report, page 182, are now in progress, and doubtless will be completed before the close of this season.

Dr. Chandler, in reply to an inquiry as to the present state, answers as follows:—

STATE LUNATIC HOSPITAL, }
Worcester, Mass., May 30, 1855. }

Dr. EDWARD JARVIS, *Dorchester, Mass.* :—

Dear Sir :—Very extensive changes are being made in the internal structure of this hospital under the direction of the Trustees. The halls are made more light and airy by throwing two rooms in each ward into the halls. Many of the dormitories are made larger by taking out the partition between two adjoining rooms. All but twelve of the strong rooms are being removed, and parlors made in the place of them. The piggeries have been removed to the East garden, and the barn is under way. Two ten-pin alleys have been constructed in place of one of the kitchens.

Yours, &c.,

GEORGE CHANDLER.

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HOUSE....No. 282.

Commonwealth of Massachusetts.

HOUSE OF REPRESENTATIVES, April 26, 1855.

The Joint Standing Committee on Charitable Institutions, to whom was referred the Report of the Commissioners on Lunacy, have considered the same, and

REPORT:

The Commission on Lunacy was created by the Resolve of the Legislature of 1854. The Commissioners were required,—

To ascertain the number and condition of all the insane and idiots in or belonging to Massachusetts;

To examine the present accommodations for them, and determine how far they were suitable for their present and immediate wants; whether any more were needed;

To ascertain and propose the best plans for the general management of insanity and the insane in this Commonwealth;

To examine the State Hospital at Worcester, and see whether it should be repaired or sold, and another be built in its stead.

It appears that the Commission attended to all the duties enjoined upon them by the government; and we have now the results of their labors, the facts they ascertained, and the conclusions they arrived at, in the Report* which is before the Legislature.

In obtaining facts, the Commission sought the aid of all the physicians in the State; and it is creditable to their high intelligence and generous devotion, that only two of these gentlemen, whose testimony was desirable, refused to answer the inquiry, and only two others neglected to do so; and the Commonwealth owes a debt of gratitude to those members of the medical profession, superintendents of hospitals, clergymen, and municipal officers, and all others who so liberally assisted the Commissioners in this important work.

In acknowledgment of these services rendered to the State, and to distribute as far as possible the valuable information contained in the Report of the Commission, this Committee recommend that the Legislature direct that one copy of that document be sent to every one who aided in gathering the facts and forming the opinions therein contained, by the Secretary of State, when he distributes the documents to the several towns, or in such other manner as may be more convenient.

There are two thousand six hundred and thirty-two insane persons, and one thousand and eighty-seven idiots, in and belonging to Massachusetts—making three thousand seven hundred and nineteen who cannot take care of themselves, but must be taken care of by their friends or the public authorities.

Of the insane,—

1,141 were in hospitals.

207 in the county receptacles, prisons and State almshouses.

1,284 at their homes, or in town or city almshouses.

2,018 are incurable.

In the opinion of the witnesses, who knew their condition, one thousand seven hundred and thirteen of the insane should be in hospitals, either because their diseases are recent and

* House Document 144, March, 1855.

curable, or because they are so excitable, or furious and dangerous, as to need confinement for the good of others. Besides these, there are sixty-one violent idiots who need restraint—making one thousand seven hundred and seventy-four for whom the accommodations of a hospital should be provided.

605 of these, who should be in hospitals, are at their homes or in the local almshouses.

Of those at their homes—

210 are recent and curable cases.

90 are violent and dangerous.

408 are excitable and troublesome.

All of these six hundred and five should enjoy the advantages of a hospital for their healing or their protection or for the good of the public; but they cannot be admitted, for want of room.

All the hospitals in Massachusetts are filled to their utmost capacity, and three of them are overflowing.

The whole experience of the world shows that insanity is one of the most curable among severe diseases, if it be properly attended to in its early stages. About four-fifths can be restored within the first year; about half, if delayed to the second year; and at about the fifth year the restoration becomes hopeless; then their disorder is permanent, and the patient must be supported for life.

A part of the two thousand and eighteen incurable lunatics were sent to a hospital in the early stages of their malady, but could not be restored. A much larger part were not sent until their day and susceptibility of cure were past. And many of them have not been in any hospital, and have never enjoyed the suitable means of restoration.

There are now in the State eight hundred and forty insane persons who have never been sent to any hospital; eight hundred and twenty-four of these are Americans, and sixteen are foreigners. Some of these were diseased beyond hope of cure before any appropriate institution was opened for them. There are several whose malady has been of twenty, thirty, forty, fifty, or even more, years' standing. None were in a hospital before 1818, when the McLean Asylum was opened, and but

few before 1832, when that at Worcester was ready to receive them.

It is reasonable to suppose, that four-fifths of the eight hundred and forty who have never been in any hospital might have been healed with the proper means. Without doubt, an equally large portion of those who were sent to a hospital, but not until their day of healing was past, might have been restored if they had been sent in season.

Considering, then, the great number of the insane now in this Commonwealth, and the large proportion of these who are incurable and must be supported for life, your Committee thought it proper to inquire into, and worthy the attention of the Legislature to see, the full extent of this burden of insanity, and of its bearing upon the State, the towns, and the people. It is important to know how much of it has been produced or perpetuated by causes or circumstances that might have been avoided in past time, or may be avoided in future, and whether this, in its present degree, is a necessary evil, and whether it may not be diminished, if not now, at least hereafter.

The cost of supporting an insane person is necessarily greater than that of one who is sound in mind. His food must be always good, otherwise he becomes more excitable and difficult to be managed. He requires more personal attention and watching; and many of them require much, and even constant, attendance. But even admitting that the expense of supporting the lunatics who are at their homes, or in the almshouses, is no more than that of the sane members of the same families, this, with the known cost of supporting those who are in the public establishments, will make the expense of maintaining the two thousand six hundred and thirty-two insane in the State a matter worthy of the anxious consideration of the political economist and of the government.

Two dollars and a half a week is the lowest that any one can be supported for, even in the rural districts.

The average cost of supporting the paupers in 1854, in all the towns in the State, including children, was one dollar and forty-eight cents a week.

The State paid for the support of its insane paupers, in the

hospitals, prisons, &c., an average of two dollars and eight cents a week. Besides this, the interest on the cost of the establishments and the salaries, which were paid in another manner, amounted to about sixty cents a week for each patient—making two dollars and sixty-eight cents as the average cost. But, to be on the safe side, two dollars and a half is assumed in this calculation.

The support of the independent patients in hospitals, including those at the McLean Asylum and those who were sent out of the State, will be not less than three dollars a week.

At these rates, the cost of supporting insanity in this State for the last year amounted to three hundred and twenty-one thousand eight hundred and sixty-eight dollars.

394	independent insane in hospitals, at \$3 per week,	\$61,464	00
716	“ “ at home, at \$2.50 “ “	93,080	00
954	pauper insane in hospitals, at \$2.50 “ “	124,020	00
568	“ “ elsewhere, at \$1.50 “ “	43,304	00
			\$321,868 00

This enormous tax for the support of insanity was paid last year, and will be paid this year; and if no change takes place in the administration of those who are afflicted with this disease, it will continue to be paid for years to come.

This great amount is paid in divided sums, by the several families or guardians of the independent insane, by the towns and the Commonwealth, for their paupers, and therefore has attracted no especial notice, either of the Legislature or the people. The only noticeable item is the fifty-three thousand and eighty-five dollars paid in 1854 for the support of insane State paupers, besides the salaries of the higher officers of the two State hospitals, amounting in all to about sixty thousand dollars.

The most painful feature in this matter is the two thousand and eighteen incurable cases, who now need to be supported forever. Including the eight hundred and forty who have never been in any hospital, and the large portion of the others who were not sent in season to the place of healing, it is probable that one-half of these incurables might have been restored if

they had been properly attended to. If the average cost of maintaining them is the same as that of the whole two thousand six hundred and thirty-two, then the State and its people are paying one hundred and twenty-three thousand and ninety-eight dollars a year for the support of insanity that might have been removed and its burden prevented.

The causes of insanity are as prevalent and active among us as ever, and every year produces its own supply of the insane. This year will produce as many new cases of mental derangement as the last, and the next will produce as many in proportion to the population as this. Of course, those who are not healed will be added to the number of the permanently incurable. This annual addition ought not to be more than one-fifth of all who are attacked. The other four-fifths should be restored to health and power of self-sustenance and general usefulness.

However willing the people and the authorities might have been to heal all of their insane friends and wards, they could not have hitherto accomplished this purpose; nor can they now, because there have not been, nor are there now, sufficient means.

It is a well-established principle, that the insane cannot recover amidst the ordinary circumstances and influences of home as those who suffer from other diseases, but they must be removed from the familiar associations and scenes to others which are new and strange to them.

Diseases of the mind are affected by the influences that reach it. It is necessary, therefore, that these should be controlled, and that only such as are favorable should be allowed to reach the patients. This can be best done in the hospitals, where every thing is arranged for, and adapted to, the condition and the wants of those who are submitted to their care.

In these institutions the curable are healed, the violent are subdued, the excitable are controlled, and those who are elsewhere troublesome are there easily calmed and managed.

But these means of cure and of control have never been sufficient to meet the wants of all the sufferers from insanity. From the beginning our hospitals have been filled. Although the McLean Asylum and the Worcester and Boston Hospitals have been enlarged from time to time, to satisfy the pressing

pemands for their accommodations, their wards have been immediately occupied by those who were near, or whose friends best understood their advantages ; but at no time has the supply been sufficient for the real wants of all who could and ought to profit by them. Consequently many of the insane of Massachusetts have never been able to enjoy the influences of a hospital, and many others have been sent there only after their day of healing was past. These have, therefore, remained uncured and incurable, and their friends, or the towns, or the State have been and are obliged to support them as long as they live.

Now the hospitals are all filled, and some are overflowing ; and yet there are six hundred and five insane persons in the State who are not in any such institution, but who ought to be there. Two hundred and ten of these have been deranged but a few months, and are, therefore, curable ; they need the hospital to restore them to health. Ninety of these are violent and dangerous ; they need the custody of a hospital for the safety of the community. Four hundred and eight of these are excitable and troublesome ; they annoy their families and disturb their neighborhoods, and should be confined for the sake of the public peace.

Unless some means besides those now provided are offered for their cure, these two hundred and ten recent cases will ere long become incurable, and their support for life will be entailed upon their friends or the community. These violent and the excitable patients are now cared for at their homes, with great trouble and cost, by those who have charge of them, and with some danger and much annoyance to their families and neighborhood. These six hundred and five are the surplus over and above those for whom the means are furnished in Massachusetts for the healing or the protection of its insane people. Their claims come to us in a manner not to be resisted. The curable ask to be restored to health and usefulness and to the power of self-sustenance ; the others ask to be protected from evil, and saved from the danger of injuring others. These speak not for themselves alone, but also for those who will follow in their train, and become insane in this and the succeeding years, as they have.

Insanity is produced by manifold and various causes and circumstances. Some of these are inherent in man, some are created by the customs of society, and others are allowed, and even encouraged, in the social law; all of them are, or have been, present with us; and they will continue to be active among us until the character and influences of our civilization shall be changed.

It is just and reasonable that every age and every year should meet and discharge its own responsibilities, and bear the burden which it creates or permits to be created, and transmit the world, with its privileges and advantages, unencumbered and untrammelled, to those who come after it.

There is a natural and an honorable aversion to incurring debts. It seems neither right nor generous that the people of any year or of any generation should assume an obligation by the creation of any good, or for the enjoyment of advantage, or for the endurance of any evil, and then throw the responsibility of meeting and discharging it upon their successors. This is often done; but it is never justifiable except when the advantage that is to be immediately gained is also to be transmitted to, and shared by, the succeeding generation who are to pay, or where the evil to be endured is one of great magnitude and rarely repeated, whose burden should be divided among others as well as those upon whom it first comes.

The creation or the development of insanity is practically a debt, which the friends of the sufferer or the public treasury must inevitably discharge, either by paying the cost of its removal or for his support during life. It is an obligation of the surest fulfilment; for the town or the State is necessarily the indorser of every insane person, and binds itself to pay all the expenses of his sickness and sustenance that his own estate or his friends do not, however long it may be needed.

The question, then, is, whether this obligation shall be discharged at once, by taking immediate measures for the cure of the patient and paying the due cost manfully and generously, or whether, by neglect of these measures, this obligation shall be thrown upon future years, requiring each to contribute an enormous proportion to sustain it.

The people in any year may build a hospital, and borrow

the money needed for its cost, with the engagement to pay it at a future period. In this way they throw the responsibility of payment upon another year and age; but with the debt they transfer the property, the hospital for which it is created; and those who are thus required to discharge the obligation receive also a fair equivalent, and no injustice is done.

But if the present year creates, or allows to be created, any cases of insanity, and fails to discharge its obligation of curing it, and, by neglecting to use the proper means, throws the burden of supporting the patient through life upon the future years, it transmits with this obligation no property, no value, to compensate for the payment, and those who pay it receive nothing but the ruins of humanity from the hands of those who created it.

In the creation and the payment of an ordinary debt, the year which incurs it, and the intermediate years, pay only the interest, and the last year only pays the full amount. But in the obligation of supporting permanent insanity, the first and the succeeding years, as well as the last, each and all, pay the same—almost as much as would have been required to pay it all off at once, by curing it in the beginning. In the case of the common debt it is paid only once, and the property is received with a clear title; while the other years, which pay the interest, enjoy and have the use of this property in return. But in case of the insanity, the obligation is multiplied and discharged almost as many times as there may be years in the patient's life; and they who annually pay it have suffering, anxiety, and loss, rather than enjoyment and profit.

It is, then, no more than the common wisdom that is applied to the ordinary business of life, to take such measures as will secure the early treatment of the insane, and give them the best opportunity of restoration that the age affords, and by this means reduce, in the future at least, the number of permanent lunatics to that small proportion whose malady is, from its very nature, incurable.

As there are not hospitals enough to admit all who need them, it is necessary to build more; but neither the patients who want them, nor their friends or guardians, can do this, nor is it well to leave it to private speculation to build them.

Considering that the State and its towns are the responsible

indorsers of every person that becomes insane, and must pay the cost of his restoration at once, or of his support during life, however long that may be, provided his friends cannot do it; considering, also, that this responsibility has become so great that the public are now supporting 1,522 insane persons in and out of hospitals, at the cost of more than one hundred and sixty-four thousand dollars (\$164,724) a year; that 1,262 of these are incurable, and claim a life support from the general treasury, and that about half of them were self-supporters until they lost their mental health; considering, then, how great and unavoidable an interest the body politic has in every case of insanity, it is a reasonable economy and a good investment of capital for the Commonwealth to build all the hospitals that may be needed for the early and prompt cure and the proper management of insanity.

As the demand upon the public treasuries for the support of insanity, which the State and the towns recognize and pay, knows no other limit than the number of the insane and the length of their disease, or the duration of their lives, so the duty of providing the means for their cure and protection should be measured only by the necessities of those who should profit by them.

In view of these principles, and of the six hundred and five insane persons in Massachusetts who need, but cannot now obtain, the accommodations of a public institution suitable for their cure or their protection, the Committee advise that the State now build another hospital, and place it in one of the four western counties.

The Commissioners on Lunacy state in their Report, that they made all the other inquiries enjoined upon them by the Resolve of the Legislature of 1854; and the facts which they learned and the conclusions which they arrived at are set forth in that document.

This Committee have carefully examined the Report of the Commissioners, and they have followed their steps as far as to visit the hospitals, and the county receptacles, and the State almshouses, where the insane are kept, and they fully concur in the propositions which are therein set forth:—

That the insane whose diseases are recent, and therefore curable, and those who are troublesome, excitable, violent or dangerous, can be best managed in hospitals especially appropriated for their use ;

That the county receptacles, and all establishments connected with prisons, and the prisons themselves, are improper places for the insane ;

That the State almshouses are unsuitable places for the insane ;

That, with one exception, all classes of patients should be kept in the same establishments as they now are in the State hospitals ;

That the State paupers should be provided for by the Commonwealth in a separate hospital ;

That the Worcester Hospital is unsuited for its present purposes, and has not the accommodations which the present age elsewhere affords ; and it should, at the earliest suitable opportunity, be sold and replaced by another.

But as the wants of those lunatics now at their homes, and need, but have not, the means of healing and no proper protection, are more pressing than those of the patients in any of the establishments now built, it is proposed that,—

1. A hospital be now established in the western part of the State.

2. That, when this shall be finished, the Legislature then existing build another within the city of Worcester, and out of the dense part of the town, to which the independent patients and those who are supported by the towns be transferred, and that the State paupers be then removed to the present old hospital.

3. That the Legislature, then in being, build in a suitable place, in the eastern part of the State, another hospital for the State paupers, and the present hospital, with its grounds, be sold.

Looking at the present valuation of the Worcester Hospital and grounds, as set forth in the Report of the Commission on Lunacy, and at the rapid rise of property in the city of Worces-

ter, there is no doubt that, at the time when, according to this plan, the State shall cease to need it, it can be sold for a sum much more than sufficient to build one of those institutions, with all the modern improvements, and with abundance of land for all its purposes.

Recognizing the propriety of this plan, the present Legislature can only take the first step, and establish the hospital in the western counties, and leave the rest to be finished by their successors.

They therefore report the following Bill.

BENJAMIN B. SISSON, *Chairman.*

Commonwealth of Massachusetts.

In the Year One Thousand Eight Hundred and Fifty-
Five.

AN ACT

To establish a Hospital for Insane in Western Massachusetts.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows :—

1 SECT. 1. His excellency the governor, with the
2 advice and consent of the council, is hereby author-
3 ized and empowered to appoint a board of three com-
4 missioners, who shall purchase an eligible site within
5 one of the four western counties of this Common-
6 wealth, and cause to be erected thereon a suitable
7 hospital for the care and cure of the insane—the
8 accommodations of such hospital to be sufficient for
9 two hundred or two hundred and fifty patients, a su-
10 perintendent and steward, with their families, and all

11 necessary subordinate officers, attendants and assist-
12 ants. And the said commissioners shall have power
13 to make all contracts and to employ all agents neces-
14 sary to carry into effect the powers hereinbefore
15 granted: *provided*, that the aggregate amount of ex-
16 penses and liabilities incurred by virtue of said
17 powers shall not exceed the amount of two hundred
18 thousand dollars; and the said commissioners shall
19 present all their accounts to the auditor, to be by
20 him audited and allowed, from time to time, as he
21 shall deem proper.

1 SECT. 2. In order to defray any expenses incurred
2 in pursuance of the preceding section, or to repay
3 any sums borrowed, as hereinafter authorized, the
4 treasurer is hereby empowered, under the direction of
5 the governor, with the advice and consent of the
6 council, to issue scrip or certificates of debt, in the
7 name and behalf of the Commonwealth, and under
8 his signature and the seal of the Commonwealth, to
9 an amount not exceeding one hundred and fifty thou-
10 sand dollars, which may be expressed in the currency
11 of Great Britain, and shall be payable to the holder
12 thereof in London, bearing an interest of five per
13 cent., payable semi-annually in London, on the first
14 days of April and October, with warrants for the
15 interest attached thereto, signed by the treasurer,
16 which scrip or certificates shall be redeemable in
17 London on the first day of April, one thousand eight
18 hundred and seventy-five, and shall be countersigned
19 by the governor of the Commonwealth, and be deemed
20 a pledge of the faith and credit of the Commonwealth
21 for the redemption thereof. And the treasurer may

22 under the direction of the governor and council, dis-
23 pose of any portion of said scrip at any price not
24 less than its original par value.

1 SECT. 3. The treasurer, under the direction of the
2 governor and council, may borrow, in anticipation of
3 the issue of the scrip authorized as above, of any of
4 the banks of this Commonwealth, or of any corpora-
5 tions or individuals, such sums as may be necessary
6 for any of the purposes of this act: *provided*, that
7 the whole amount borrowed by authority hereof and
8 remaining unpaid shall at no time exceed the amount
9 of one hundred and fifty thousand dollars.

