

and of the exercise grounds, garden and road of approach, with the levels of the surface of the ground at the quoins of the building, offices, and fence walls, figured thereon. (Scale of 100 feet to an inch.)

3. Plans of the basement, ground, and each other floor of the main building, subsidiary buildings and offices; also of the roofs and gutters, and of the principal elevation. (Scale of 20 feet to any inch)

4. Elevation of portions of the principal front, and also of any other parts, in which any variation therefrom takes place. (Scale of 10 feet to an inch.)

5. Transverse and longitudinal sections, or sufficient portions thereof to show the construction of every portion of the building. (Scale of 5 feet to an inch.)

6. Plan and section of one separate sleeping-room, dormitory, and eating or dayroom respectively, or of part of the same, showing the method of warming and ventilating each; also of the baths and washing rooms, and water-closets, and the construction of the apparatus for each. (Scale of 1 foot to $\frac{1}{4}$ an inch.)

7. An abstract of the draft contract and specification, giving a concise statement of the whole of the intended work; and also a detailed estimate of the building and the prices at which the different materials and workmanship have been calculated in making the estimate.

8. The thicknesses of the walls, and the scantlings of the timbers of the floors and roofs, to be figured.

9. The general system of heating and ventilation, proposed to be adopted throughout the asylum, to be fully described in the drawings and specifications.

10. Each plan to show the several classes and numbers of patients to be accommodated, in the wards, dayrooms, dormitories, cells, galleries, and airing courts, respectively, to which such plan relates.

*Excerpta from the Evidence given before the Select Committee
of the House of Commons on Lunatics. THE RIGHT HON.
S. H. WALPOLE, Chairman. March, 1859.*

The Right Hon. the Earl of Shaftesbury, Chairman of the Commissioners in Lunacy examined. "The course I should be inclined to take in this examination is this: first, I would state to the committee, as well as I can, the present condition of things, and then point out certain amendments which I think might be applied to the existing defects. Then the committee would probably put questions to me upon the various subjects, one after the other, and I think that would prevent confusion, as then one subject would be exhausted before we entered upon another. Having done that, I should then ask the permission of the committee to go more widely into the subject, and to point out to them what is the result of my long experience, and the result of the experience of my brother Commissioners, as to the real method of the treatment and cure of lunacy, because we are convinced that it stands at present upon a very vicious principle; and I should wish

to indicate to the committee, and to point out what I consider to be the true and permanent principle, which cannot fail of conferring very great benefits upon that enormous class of helpless beings.

The jurisdiction of the Commissioners is confined to England and Wales. The great periods of effective legislation were the years 1829, 1845, and 1853. The titles of the Acts under which we are now regulated are the 8th and 9th of Victoria, chapter 100, the 16th and 17th of Victoria, chapter 96—those two Acts being construed as one. There is also the 18th and 19th of Victoria, chapter 105. These are the Acts for the Regulation of Private Houses and Hospitals, and which prescribe the duties of the Commissioners. The Acts for the Regulation of the County Asylums are the 16th and 17th of Victoria, chapter 97, and also the 18th and 19th of Victoria, chapter 105—it was a joint Act, that affected both alike. The Act of 1829 was founded on a report of a committee that was appointed in 1827, at the instance of Mr. Robert Gordon, of Lewiston, as he is called in the Act. That committee sat during the whole of the session, and upon the recommendation of that committee the Act of 1829 was passed, and that continued to be in operation till the year 1842 or 1843, and then sundry amendments were introduced, and among the rest there was an extension of the jurisdiction of the Metropolitan Commissioners in Lunacy with regard to the provinces, and they were directed to make a visitation into the provinces, and to report upon the state of the lunatic asylums, both public and private. Their Report was presented in 1844, and upon that was founded the Act of 1845, the 8th and 9th of Victoria. That very much extended our jurisdiction, and our powers, for it gave the Metropolitan Commissioners the right, and imposed upon them the duty, of visiting the provincial asylums so many times in the course of a year, and visiting the county asylums, and reporting upon them. It also made the commission permanent, for at that time it had been a periodical commission; the officers engaged in it were not permanent officers, and they were allowed to follow other vocations; the medical officers and lawyers were only paid so much per hour, and for special work done. It was a fleeting commission, the expenses were increasing rapidly, and it was thought advisable, as the subject of lunacy had assumed so much importance, that there should be a permanent commission, with a permanent staff of officers, who should be precluded from following their professions, and should give their time exclusively to the business of lunacy, and the necessary visitations.

The composition of the commission was this: there were six paid members, three lawyers, and three medical men, at salaries of £1,500 a year each, and there was a secretary appointed at £800 a year. To them were attached certain unprofessional members, who were to take a part in the business, and who were to have powers pretty nearly co-ordinate with the rest of the Commissioners; to go upon visitations in lunacy, and take part in all the business of the commission; but what are called the statutory duties, that is, the necessity of visiting—which necessity or duty in the metropolis is imposed exclusively upon the professional commissioners—these statutory duties must be performed by a medical man and a legal man in conjunction. The lay element was considered to be of very great importance; indeed in the working of the commission, and I can say, from very long experience in this matter, that the non-professional element, not only upon the commission, but among the visiting magistrates in the country, and in every possible department relating to the treatment and care of lunatics, is of the most indispensable importance, and without it I am quite certain that the whole system of the management of lunatics would fall into the greatest disorder, and we should relapse into many of the errors from which we have been extricated. In the past year the Commissioners have made, including the visits to the workhouses, 908 visits under the Act, but with the voluntary visits the figure would be much higher, and they have seen 35,595 patients. Besides the duty of visitation, of course there are very considerable Board duties: the Board meets once a week regularly; it meets sometimes more frequently, but it meets invariably once a week, on Wednesday, on which day the business of the Commission is transacted. The number of Board meetings during the past year was 50. But this is by no means the measure of the full amount of business that is done by the Commissioners meeting together; because there are a great many meetings at which very important business is transacted, but which have no statutory effect, and are not formal Board meetings; and therefore even the 50 Boards which were held during the year 1857-58 are not by any means the full measure of the time devoted to the business. The unpaid Commissioners are myself, Colonel Clifford, Mr. Gordon, and Mr. Vernon Smith, and also Mr. Barlow, who is a Master in Lunacy; he is connected with our Board, for it was thought desirable that there should be a connecting link between the two, and he supplies that link, and is one of the unpaid

members. There are 33 county asylums and four borough asylums to be visited once in a year, that makes 37 visits; there are 15 hospitals visited once in a year; and there are 37 metropolitan licensed houses visited four times in a year each, making 148; there are 77 provincial licensed houses to be visited twice in a year, which would be 154 visits; the total being 354. The single patients, if we know where they are, are visited once in a year; of those, there are 124; but it must not be supposed that 124 is the limit of the single patients, for we believe that there are many more, but we cannot arrive at a knowledge of the place where they are. Of late a certain number have been taken abroad, both single patients and others, who would have been in the licensed houses; it has not been to any great extent, but still to a greater extent than I should desire to see. We have no check over them, although the law of the country to which they may go is sometimes very stringent. There is very considerable nominal inspection and authority exercised over them. All those things appear upon paper; and if you read accounts of the system under which lunacy is governed in France, you would think that nothing could be more perfect; but when one comes to examine into the matter, I think it is very doubtful whether it is so. I had heard a great deal about foreign asylums; but when I examined into them, I thought them wonderfully inferior to our own, and very deficient in things that we in this country consider to be absolutely necessary. As I stated, the number of visits to single patients are 124. Then, by the Act of 1845, a duty was imposed upon the Commissioners of visiting the workhouses, and the whole number of those workhouses is 645. The workhouses were latterly visited in 18 months; and, taking two-thirds of them to show what was done in 12 months, it would be 430; the whole would be 908 visits. I may explain to the Committee, (for otherwise they might be misled, and suppose that there were many matters that none but medical men could undertake; and a friend of mine said to me that he could not conceive what laymen had to do with matters of this sort,) that the business transacted at the Board is entirely civil in 99 cases out of a 100. A purely medical case does not come before us once in 20 Boards.

The Commissioners make four visits annually in the metropolis, and two in the country. In workhouses they make one inspection at least in the year—that was imposed; but I should say that by the Amending Act of 1853, that

compulsory duty was taken away, and it was left to the discretion of the Commissioners assembled at the Board to indicate when and what houses should be visited. It was found to be so extremely onerous, that it was necessary that there should be a limitation to it, and a discretion is now exercised by the Board. Those who visit these asylums make a very full report to the Board. It is enjoined by statute that they should do so; and, moreover, it is enjoined that they should ask certain questions, and those questions must be asked. They ask, of course, a great many more, and enter most minutely into various details. These reports are sent up. A certified copy must be taken by the proprietor of the house, and be sent up to the Commissioners, and all these reports are read to the Board, and it is one of the most important duties which they have to discharge, viz., to read all these reports in succession at their weekly meetings. The lunatics are questioned when visited; and not only that, but as a matter of very great importance where there is the slightest belief that either the patient is under any influence of an improper kind, or that something may be discovered by private intercourse, the patient is brought into the room, and the Commissioners sometimes spend a long time with a single patient. I have known as much as an hour or an hour and a half spent with one lunatic, in order to ascertain his state of mind, and whether he had any complaints to make. We endeavour to make the visits in the metropolis as uncertain as we well can. They must be made four times in every year, but we often, with a view to create uncertainty, make the visit at the end of the quarter, and return suddenly upon the house at the beginning of the next quarter. It is next to impossible that they could be more secret. We come down as suddenly as we can upon them; but the moment the Commissioners appear in a county, what with the penny post and the electric telegraph, and the wonderful communication which there now is with all parts of a county, it is known to every one that the Commissioners are there; and the Commissioners, on account of the large surface they have to cover, cannot appear at an asylum in Berkshire, and suddenly quit Berkshire and run off into Northumberland; for not only would time be lost, but the expenses would be greatly increased.

In some instances I have no doubt that the visits are anticipated, but not from any facilities of judging that we may have given them, but from the fact that they know the time is coming round when they will be revisited, and they know

when the Commissioners have entered a county. I have thought that the Committee would like to know what was the number of lunatics at three different periods. In 1828 it was really next to impossible to get at any conclusion; and until just before the year 1845 there were no data upon which we could make any statements and arrive at any results; and even in 1845 we could not go further than this, that we found out what were the numbers in the county asylums; we found that there were 4,155, and 245 private patients; under the local Acts there might be 80 paupers; in the military and naval hospitals, 168; in Bethlem and St. Luke's there were 442 private and 121 paupers, making 563; and in other public asylums, now called registered hospitals, there were 879; 536 private and 343 paupers. In licensed houses in London there were 973 private and 854 paupers, making 1,827; and in the provincial houses, 1,426 private, 1,920 paupers, making a total of 3,346: the grand totals on the 1st of January 1844 were 2,399 private patients, 2,744 pauper patients; making 5,173.

On the 1st of January, 1858, the number of patients in asylums, that is, county asylums and borough asylums, was 15,163; in hospitals, 1,751; metropolitan houses, 2,623; provincial houses, 2,647; and we put down for the naval hospital, 126; making 22,310. To that you must add in workhouses, 7,686; living with their friends as paupers, 5,477; making a total of 13,163 paupers. If I add to that 124 single patients, the grand total will be 35,597. These numbers were distributed in the county and borough asylums, licensed houses, hospitals, and single houses. In 1828 it was quite impossible for us to obtain any information upon the matter. In 1845 there were no borough asylums, but there were 15 county asylums; before the act of 1845 it was optional with the counties to erect asylums for the county patients or not, as they pleased; by the Act of 1845 it was made obligatory, and the result of that has been, that in 1858 there were four borough asylums, and 37 county asylums, but that does not represent the provision made for the pauper poor at the public expense.

The naval and military hospitals are not under the jurisdiction of the Commissioners, nor are they visited by the Commissioners by right. I do not think any military hospital is now existing. We have visited Halsar, and we have visited the military asylums, but we have no right to do it. The Chancery patients are not subject to the visitation and jurisdiction of the Commissioners, and are not in the list given in.

St. Luke's and Bethlem are included now ; there might be included in this list a certain number of Chancery lunatics who might be found in licensed houses, but Chancery lunatics, as such, living separately, are not under our jurisdiction. In going over Bethlem we should enquire into the condition of the criminal lunatics, and if we saw anything that was worthy of note, we should make it known to the Secretary of State, but we have no authority over them. There is a very great deficiency in the provision that ought to be made in the boroughs.

There are 33 county asylums, and the present accommodation in them is for 15,627, but with the additions that are in progress they will in a short time give accommodation for 18,108. The asylums which have been opened since January 1858 are two, and they offer additional accommodation for 562. The asylums in progress, in course of erection, and very soon to be opened, are four, and they offer accommodation for 1,304. There are some asylums about to be erected upon sites purchased, and approved by the Secretary of State, and those are two, and they will accommodate about 500. The summary is this : of the county asylums already opened, in progress of erection, or about to be erected, the number will be 40, after deducting Bedford, which is about to be closed ; and the total accommodation then offered by county asylums will amount to 20,294. There are some five or six counties in which the law has not been complied with ; in a few, no measures have been taken at all, but there are a great many in which preliminary steps have been taken ; but the whole thing has been checked by circumstances and difficulties, particularly in the Welsh counties. With regard to the boroughs, Birmingham is about to be enlarged ; the number of patients in the Birmingham asylum, on the 1st of January 1858, was 330 ; in Hull, 95. In Bristol they are in the course of building an asylum ; and the City of London, at last, after many years delay, has purchased a site near Dartford, where there is an asylum to be built for 300 patients. The pauper lunatics of Northumberland are sent to the Northumberland hospital. Gloucester, Nottingham, and Staffordshire, used to have mixed asylums, but the subscribers have separated, and they have built separate hospitals ; but Leicester and Denbigh have still mixed asylums ; they are partly hospitals and partly county asylums. They take in patients who are paid for, but that has been found to operate injuriously, that union has not answered at all, and the system is being generally abandoned throughout the country.

There are a vast number of boroughs that have made no provision whatever for their lunatic poor ; but we hope now, by a provision in the bill that has been brought in by the honourable member in the chair, a great deal of that will be overcome, and that boroughs may be annexed by the Secretary of State to the county asylums, and be entitled to send their lunatic poor there, paying, of course, the necessary expense. There is a power now for a borough to unite with the county, if both parties agree to it, in the erection of an asylum ; but there is oftentimes a very unreasonable opposition offered by the visitors to the county asylums, and it is very desirable that the Secretary of State should interpose and settle the matter, as the lunatics suffer from being shut up in workhouses. I think we have every reason to be thankful that since 1845, when we consider the progress that was made before that, a vast deal has been done ; and there seems, I think, a willingness in the country to do more, and I have no doubt that the provision will be commensurate with the demand.

Is not a pauper lunatic compelled to pass through the workhouse before being admitted into the county asylum ?—Not by law, but through the mode in which the law is administered. I think that there ought to be a law to say that he shall not pass through the workhouse ; but he does pass through the workhouse, and very often he gets into the workhouse, and never comes out of it. He ought never to go near the workhouse ; and the law should say, that no lunatic should be detained in the workhouse beyond two days, and that, for the sole purpose of keeping him till means of conveyance were found to convey him to the principal asylum.

Does not this necessity for passing through a workhouse cause great delay in the application of the relatives, so that the case is actually not placed under medical treatment until it is often too late ?—That is also the case in 99 cases out of 100 ; if a man is sent to a workhouse, there he remains. The great apparent increase in the number of lunatics that had taken place between 1845 and 1858, was not a positive increase in the actual number of lunatics in proportion to the population. Of course, as the population increases, there must be a certain increase in the number of lunatics, but the lunatics did not in that time increase in the ratio of the population, but it was owing to provision having been made for them, and the greater activity of all the authorities to look them up in all directions, and to bring them to the face

of day, and place them in the receptacles prepared for them ; and I think I cannot give a better proof of that than this, that when the activity began, and all these cases were brought to light, they were found to be not recent cases, but they were old-established chronic cases, of very long standing indeed ; and it was a very sad thing when Hanwell was extended, and also when Colney Hatch was opened, which we had hoped would be for the reception of recent and curable cases ; it was almost instantly filled with old and chronic cases, to the exclusion of the recent and curable cases that might have been brought there, and many of them returned in a state of health to the duties of life.

I am almost afraid of giving an opinion, whether there has not been an increase of lunacy in the country, for there is a great difference of opinion on that point, because all the data preceding the year 1845 are so very indistinct, and even subsequently to that, they are so few, and so mixed up with all those old chronic cases, that it is difficult to say what has been the increase. I will state my opinion, which is pretty well borne out by my brother Commissioners, and a good many others, that the increase of lunacy is certainly unquestionable, but it is not by any means in the ratio of the increase of the population. If the population is increasing, it would be certainly supposed that the number of lunatics would be increased ; and if it has increased at the rate of 20 per cent., there has not been the same ratio of increase, that is, of 20 per cent. among the insane, which I ascribe to the operation of various agencies. In the first place, I think that education has done a good deal to keep down the drinking habits of the people, and to keep down many of those habits the ultimate issue of which is almost invariably lunacy. I have no doubt that the movements of the temperance societies and the teetotallers have very much repressed the increase of insanity, because it must be observed, and I believe it will not be disputed by any one who has the least knowledge of insanity, that seven-tenths of the cases of insanity that prevail among the poorer class arise from their habits of intoxication. Some years ago I looked very much into this matter, having occasion to bring the subject of education before the House of Commons. I then communicated with the Superintendents of almost all the asylums in England, both private and public, and I communicated with the conductors of asylums in America, who in the most kind manner sent me abundance of returns ; and the result was that they all concurred in this, that if the people could be brought even to moderate habits—

I do not mean teetotal habits, but temperate habits—the result would be, that at least seven-tenths of the cases of lunacy that afflict and distress mankind would be altogether got rid of, and an enormous proportion of our lunatic asylums might be shut up or converted to much more happy purposes. I am led to think that, owing to the efforts made by teetotal societies and temperance societies, that the progress of insanity, which would otherwise have been a most formidable ratio of increase, has been very much checked. In the year 1843 I stated that “a large proportion of the cases of lunacy was ascribable to intoxication,” and that remark applies equally to the present time, for it is applicable to all times that habits of intemperance in so many instances lead to the development of insanity. “We shall see how large a proportion of the cases of lunacy is ascribable to intoxication; but we shall draw moreover this startling conclusion, that if thousands are deprived from this cause of their reason and incarcerated in madhouses, there must be many fold more who, though they fall short of the point of absolute insanity, are impaired in their understanding and moral perceptions.”

Do you think that you are justified in drawing that conclusion, and that there may not be physiological reasons which connect the effect of intemperance with the previous predisposition to insanity, so that the insanity may be rather the consequence of the combined effect of a depraved appetite, and a natural predisposition, and not the depraved appetite alone?—I think so; I have no doubt that in some instances it may arise from that, but then, I think, that that predisposition to insanity would not be developed unless the man had been guilty of indulgence in drink; I think that it is that which causes the predisposition to issue in positive insanity. This cause applies principally to the poorer classes. As soon as the means of obtaining drink are taken away, the cure is very rapid. It is true that when put under curative treatment they rapidly recover. A man who has lost his senses from drinking, when brought under care and treatment may probably be well in three weeks or a month, and able to go back again to society. But with this habit of drinking, perhaps, it produces a recurrence of the disorder. I have known instances in which one man has been brought back 20 times in a state of mania in consequence of drink, and that habit of repeated drinking, and that constant recurrence of the disorder, at last becomes settled, and the man becomes a chronic madman; of that there can be no doubt. We have had the greatest difficulty, indeed, I do not know that there is any

greater than dealing with these cases. Persons are shut up, under the influences of mania in consequence of drinking, and in the course of a short time they become perfectly sane. We visit them, and find them in a state of sanity, and we know from long experience that those persons, be they men or women, upon being discharged, will in the course probably of one hour go to the nearest gin shop, and drink to excess, and be furiously mad before the end of the day. That happens repeatedly, and yet we have no power to retain people who are sane, and it is wrong that we should do so; except in such a case as that I have mentioned of a man who had been shut up nearly 20 times, we knowing that he was come to such a state, that if let out he certainly would be guilty of excess again. In cases of that description we have generally acted in this way; after a person has had so many trials, and has indicated so total an incapacity for self control, we must think that he is altogether of unsound mind, and we cannot let him go out any more. It would be hazardous to society to let him go out again. There is no doubt that the habits of the people are improving. It is bad enough as it is. The extent to which people indulge in strong drink is frightful as it is; but it is not so bad as it was.

With regard to the progress of insanity among the pauper classes, I do not believe that it is by any means in proportion to the increase of the population. I think I see several agencies at work that tend to repress it, but when you come to persons a degree above pauperism, and when you take the classes beginning with the trading classes and persons keeping small hucksters' shops, and going to the highest vocations in life, I cannot but hazard the opinion, although I dare say many will differ from me, that if there is not an actual increase of insanity, there is developed a very considerable tendency towards it, and I think it arises from the exaggerated state of society—the new state of society in another aspect, upon which we are entering. It is impossible not to see the effect that is produced by the immense speculation that takes place among all the various small trading classes, and people keeping costermongers' shops, and every one who has £5 that he can invest: they are carrying it on to a very great extent, and the number of disappointments and the great ruin that has come upon so many people, and the horrible distress to which they have been subjected, have had a very considerable effect upon their minds; and society is living in a state of perpetual agitation. It does not signify whether it be political life or

literary life. Every one must see now that life is infinitely more active and stirring than it used to be ; the very power of locomotion keeps persons in a state of great nervous excitement, and it is worthy of attention to what an extent this effect prevails. I have ascertained that many persons, who have been in the habit of travelling by railway, have been obliged to give it up, in consequence of the effect upon the nervous system. I was speaking to one of our Commissioners the other day who had just come off a journey, and he said that his whole nerves were in a state of simmer, and he was not able, without some period of rest, to enter upon business. I think that all these things indicate a very strong tendency to nervous excitement, and in what it may issue, I do not know ; but I am quite sure, with regard to persons in that class of life entering into trade, and living in, and very constantly under the influence of, this stir and this agitation, that the nervous systems of these persons are in a much more irritable state than they were 20 years ago. But there are a great many other causes besides intemperance. If you go over the various lunatic asylums, you can there see a number of causes at work ; no doubt want of food has a very sad and serious effect upon the nervous system, and I have known some instances in which it has superinduced madness. I remember some instances in that most oppressed class, the needlewomen and slop-women, I have seen two or three cases in which they have been brought into the house in a state of decided mania, but in a very short time these poor creatures have been set right, by no other remedy than beef and porter ; I have no doubt that the effect of want of food in many instances has a most depressing effect upon the nervous system. There is sometimes a strong hereditary predisposition, a good many come from accidents and blows upon the head. The predominant cause among the richer class of lunatics appears to be a disordered imagination, the pursuit of money, disappointed ambition, or great losses in trade, and sometimes you will find it from over-work.

Has religious excitement—not religious excitement in the ordinary sense of the word, for different classes appear more divided upon religion than they were—in your opinion, led to insanity?—That is one of the most important questions that can be put, and I am very glad that the Honourable Member has put that question, because I think there are two or three observations to be made upon it, which may tend to remove a good deal of misunderstanding upon the

subject. I, of course, should have very great diffidence in speaking upon this question, if it were purely a medical question; but it is a moral question, and therefore any non-professional person, any layman who gives his mind and heart to this subject, has as much right to speak upon it as all the physicians put together; and I do not hesitate to say, as the result of my experience, that I have never seen a case, and I have never heard of a case, in which a person has gone mad caused by the influence of religion; and when I say by the influence of religion, I mean the true Gospel spirit of true Christianity. I do not mean that a person may not have been turned aside by some strange notion, that some ignorant timid person having taken up some obscure and mysterious point of religion, and looked at one small unintelligible part of it, and looking at it exclusively and constantly may not have become disordered in his reason; but religion, taken as the pure Gospel, I will never believe has had the slightest effect in producing any aberration of reason whatever.

It is not the fact, that there are many instances of persons going mad from fear of eternal punishment?—No doubt; but then I say that that is because they have not had present to their minds the full Gospel in all its bearings, but only certain parts of it. I remember a case of madness that came under our observation not many years ago. To one of the large towns in the kingdom there came down an unauthorised person, a most fanatical and violent preacher. He succeeded in getting together a considerable congregation of foolish, ignorant people, and among the rest there was one poor girl who clearly had never been much instructed in the truths of religion; and he, thinking to produce an effect, broke out most violently upon the wrath of God and upon the terrors of eternal punishment, describing them with all the vigour of which he was capable; and then ended by saying, to produce an effect, and fixing his eye, and directing his finger to this poor girl, “I see one, I see one, who before this night will be in hell fire.” The effect upon her mind was such that she was deprived of her reason, and I believe never recovered it. But nobody will say, I should think, that that was the effect of religion, that religion was the cause of that woman’s aberration of mind. Again: I have often found that persons having a strong predisposition to insanity fasten upon religion as the strongest aliment they can find; but it is the predisposition to insanity that, indulged, causes the insanity, and not the religion, that their predisposition

to insanity feeds upon. I remember a case that came under my own knowledge. I was visiting an asylum, and I wished to make inquiries about the attendance upon religious worship by the patients, and I went into one of the rooms, where there was a very intelligent clever man, who had been a lawyer, and of some eminence. I entered into conversation with him, and I asked him whether he ever attended the religious service in the chapel, and he said, "No." I said, "Why do you not attend?" He replied, "There is no reason why I should do it, but there is every reason why I should not." I said, "Why?" He said, "Because I am the prophet Amos." Now nobody shall tell me that the fact of his believing himself to be the prophet Amos had drove him mad, but it was his predisposition to insanity which made him believe that he was the prophet Amos.

Supposing that a great deal of insanity arises from religious excitement, your Lordship is probably aware of what occurs in the West of England, in Cornwall, where there are what are called revivals, people meeting in crowds, and staying together for a week; have you heard that a great deal of insanity is produced in that way?—In the first place, revivals must not always be condemned at once, without due inquiry into them. I have heard of a good deal of excitement arising out of them and of very foolish things being said and done, but of little or no permanent insanity arising out of them, except as in the case I have alluded to, where an enthusiastic preacher had been guilty of such an atrocity as I have mentioned, and had worked upon the timid and ignorant.

There is no doubt that the number of cases of insanity induced by habits, which cannot be named, is considerable, and these habits generally lead to idiotcy and to epilepsy. They are epileptic idiots, and sometimes they are mere slaving idiots.

The acts by which we are governed recognise four places of reception for lunatics. There are the public asylums, which are principally for paupers, the county or borough asylums; there are licensed houses with or without paupers and hospitals; and there are houses for single patients; no person can receive more than one patient into any house, if he derive profit from receiving such patient, unless he have a licence. That is the great principle that governs private asylum; of course, the county asylums and hospitals are not included, because they are not institutions from which the superintending parties derive any profit. Now I should

mention that the licence has always been a subject of the greatest anxiety with the Commissioners, and their desire always has been to select the very best persons they could find, to be intrusted with so important a charge. I have already stated that there were four places for the reception of lunatics; 1st, asylums; 2nd, licensed houses; 3rd, hospitals; 4th, houses for single patients. The county asylums, and borough asylums, are beyond our jurisdiction, except in this way, that we are bound by statute to visit them once a year, but we have little or no authority there. They do not require a licence, but it is for us to grant a licence in the metropolitan houses, and therefore we are directly responsible for those houses; and I am anxious to show the character of the licence, and the anxiety that we have to give it to proper people; and impediments that stand in our way. When an application is made by a party desiring to open a house, he is bound to give 14 days' notice to the Commissioners, and with that to send a plan of the house, and to state all other circumstances that might be required. The object of the Commissioners of course is, that in every instance, if possible, the house should be in a good situation, properly fitted, and sufficiently capacious. We do not make it a rule to grant a licence to any applicant however good he may be, unless we think there is some necessity for it, or unless there is a sufficient demand to justify the opening of a new house; it is not desirable to multiply the number of private asylums, and therefore we always make inquiries, in order to ascertain whether there is a positive necessity for the erection of, or the opening of a new house. The conditions of attainment are comparatively easy. They are to get a house in a good situation, to have it properly fitted up, and to see that everything is properly prepared for the reception of lunatics. Then comes the great and leading difficulty, which is to find a proper person to have charge of such an establishment; that is the great and leading difficulty. Now, generally speaking, one would say, that medical men would be the fittest persons to be the proprietors of these houses, and to have the entire charge of them; but it too often happens that the fittest medical men have no capital at all, and they have not the means of undertaking this charge, whereas, other persons who really are not fit to have the charge themselves have the capital. We therefore are constantly driven to this necessity. It becomes indispensably necessary that a house should be opened in this or that locality. The public demand is such, that there must be a

receptacle for patients, and you cannot find persons who come up to all your notions of fitness, and who have at the same time the means. A man must have a certain amount of capital, £5,000 or £6,000, to open a house, and to carry it on with comfort and propriety. Therefore we are constantly driven to this state of things, which we never like, but which we cannot get rid of, and never shall. We are obliged to give the licence to a capitalist, upon the condition that he has there a medical man, who shall be his superintendent, and undertake the charge of the house; but that is not a state of things that one desires; for the medical man is not at the head of the house, and not being altogether the responsible person, do what he will, not being the proprietor, he cannot altogether have his own way, and a hybrid state of things arises out of the difficulties I have mentioned. The proper men have not the capital, and those who have the capital are not the proper persons; therefore we must counteract this evil by giving the licence to the latter, and letting some medical man reside in the house. Where the person applying for a licence is a capitalist, we require that a proper medical superintendent should be appointed to reside. Latterly we have always required that his name should be given in, but it is a great stretch of power. We require the name of the person to be given, and time to inquire into his qualifications. It is of great importance that the Medical Superintendent should be entirely independent of the proprietor. The Medical Superintendent ought to be lord paramount. Considering the most serious and solemn responsibility connected with the governing power in an asylum, the Medical Superintendent ought to be the lord paramount, and be able to order what he pleases for the patients, with regard to diet, clothing, and general care, and in the adaptation of their rooms; he should have the nomination of all the attendants, with power to appoint them and dismiss them, and there ought to be no appeal from him. We insist upon the residence of the medical man where the patients exceed a certain number, but where the patients are very few, only ten or twelve, we do not; and there again is another evil of this system, that as these licences are granted to persons and the law recognizes their right to make a profit, we are bound to have some consideration for the limited means of the parties, and not impose upon them such conditions that would eat up their profit. The number of these licences within the metropolitan district is 37. The number has increased, but it is not increasing very rapidly now. We have sometimes given

licences to women. There are many asylums in which three or four ladies are received, and there is a lady at the head of it; and some of them conduct their asylums very well, and these are visited daily by a medical man.

Is it not the fact, that in a case where the medical man is under the proprietor, he is, in fact, liable to be very much influenced by the proprietor of the asylum?—There is no doubt about it; and it is not the true position that a medical man ought to occupy. The medical profession stands too high to be placed in that position; and they are under influences which they cannot resist. I have reason to speak in the highest terms of estimation of some of the medical men in charge of these asylums, and I can only deeply deplore that they are not placed in their true position. We insist upon the residence of some one person, whose name is in the licence; but there is no doubt about this, that henceforward there ought to be a most stringent rule, and I think it would be better that it should be embodied in an Act of Parliament, rather than that it should be left to the discretion of the Commissioners, because it is possible that their discretion might be questioned, that the proprietors should be compelled to reside, and if there are joint proprietors, as is often the case, that one of those joint proprietors should reside. There is a very great abuse, which is that some large proprietors have three or four great houses, and residing in no one of them. If you have the proprietor upon the spot, there are ten thousand influences that bring matters into a far better condition; and there are many other abuses which might be obviated, and some of the most serious description, by making at least one of the proprietors resident. In a case where the proprietor is a medical man, I have no objection that he should be the sole medical officer of the establishment. If the number be limited, if it is a small establishment, one man would be quite sufficient. I am now stating the case as it is, and the amendments that I think ought to be proposed upon the supposition that the present state of things will prevail, but I feel strongly that the whole system of private asylums is utterly abominable and indefensible. By and by I wish to lay my views before the committee upon the subject of private asylums. Under the system of recognizing houses to be opened for the purpose of profit, the consequence is, that there are a great number of very poor places that have been licensed for years past, and it is extremely difficult to refuse a renewal of a licence, because the principle of receiving a profit from

patients has been recognised by the Legislature ; and in some of those houses which have been licensed for years, to say that no licence should be granted, would have the effect of reducing many families to absolute beggary.

There being no palpable abuse in those houses?—No ; not beyond the general unfitness of the house, and the people who have charge of the patients. If we discover any abuse, then we remedy it, and we have often refused to renew a licence ; and, in some instances, although very rarely, we have revoked them, but that has been where there has been something so notorious, or, in other cases, where persons have shown such general incompetency, that it would have been most improper to renew their licence. In many cases you shrug your shoulders, and say, "What a sad place this is, and what a poor person is at the head of it ;" but you cannot say to that person, "Though you have been guilty of no offence, yet I will reduce you to absolute beggary ;" and this is one of the evils of the system. When we want to introduce any improvements into a house we constantly make our recommendations, and issue our orders, and we wait sometimes years and years before we can get all these recommendations carried into effect ; and we have no intermediate penalty for neglect in the ruling of these asylums, and in the management by the proprietors of these asylums ; we have no alternative. We must either let the licence go on, notwithstanding the contumacy of the man, or take away his licence.

Does not the threat of withdrawing the licence induce these persons to make the improvements which are essential? —In course of time it does ; but I think that they cannot but feel that the punishment would so exceed the offence, that they trust to our not doing anything that will reduce them to beggary. Then, again, there are large houses encumbered with family arrangements ; and there is one great house in London which has been the subject of family settlement for years, and there is no end of the debts and difficulties, and the annuities and settlements upon it. The payment for a licence is, in proportion to the number of patients, 2s 6d a head for pauper patients, and 10s a head for private patients, but not less than £15, and if the sums paid do not amount to £15, the money must be made up by the man taking the licence. I should say, upon the whole, that the provincial asylums are not increasing, that they are decreasing. A proved case of cruelty or ill-treatment would be a ground to forbid the renewal of the licence certainly ;

and further than that, any proved case of cruelty or ill-treatment would lead to a revocation of the licence. We have not the power to revoke the licence, we must apply to the Lord Chancellor for that purpose; he can do it; we apply to the Lord Chancellor, and due notice must be given to the party, then the Chancellor receives our statement, and hears what the holder of the licence has to say, and then he determines accordingly. We have not revoked many licences; we did one a few years ago, in a case of most enormous cruelty, in which the proprietor as a punishment actually drew the teeth of one wretched patient; that came to our knowledge, and we instantly applied to the Lord Chancellor, and the licence was revoked. There have not been many cases of revocation on the ground of proved cruelty. Not many in proportion to the number of patients, at least speaking of those we have discovered; we cannot say what takes place in secret. The cases of cruelty where they do occur, in some instances may be chargeable upon the superintendence of the proprietors, but in a vast majority of cases they are chargeable upon the attendants, and it is the attendants who constitute the well-being or ill-being of an asylum, and that is a large reform necessary to be introduced; and a reform in the attendants is most indispensable. The Commissioners can recommend to the Lord Chancellor the revocation of a licence, where they think it necessary, not only in the metropolitan district, but with regard to the licensed houses throughout the country. Formerly they had no power of interfering with provincial licences at all, but now they have this power.

Do the observations which your Lordship has made, with regard to the licensed houses in the metropolis, equally apply to the licensed houses in other parts of the country?— I think they apply in an equal degree, but I think in some instances there are other influences at work which are not at work in the asylums under the Metropolitan Commission. I think there is a good deal of local influence at work, whereas we have no local influence at all over us; but I think that there may be some little local influences at work occasionally in the country, which induce people to take peculiar views; and rather to deceive themselves.

Do you approve of the working of the system, the visiting magistrates having the power to grant licenses?— Yes, I do upon the whole; I think it is an extremely desirable thing that we should enlist the magistracy of the country, as much as we can, in the superintendence of these matters. I think

it is of great importance to get the non-professional element at work. When the visiting magistrates were first appointed they did their work laxly, they did not seem to understand it, but of late years really many of them have done their work very well; they are very regular in their visits, and they make good reports, not so full as we do, but I think they are very much disposed to act in conformity with us, and we have of late had no collisions with them at all, and I think that we can speak with very great approbation of their labours.

Are you of opinion that the visiting magistrates residing near the spot, are likely to hear incidentally of abuses, and be able to represent to the Commissioners evils that they may perceive to exist in an establishment, which would not be perceptible to any officer who only made an occasional visitation?—I think so, and they are more likely to interfere.

Public attention was called to a case that occurred at Accomb House, near York—was there any difficulty in revoking that licence?—None at all.

Was it done, notwithstanding, by application to the Lord Chancellor?—Yes, by ourselves.

Had you any reason to believe that that house was ill-conducted before?—No, quite the contrary; we had no reason to believe that. Mr. Metcalfe had always borne a very good character, and he seemed to be a mild person enough; and the remarkable part of it is, that the lady in question had never at any one time, directly or indirectly, made the slightest complaint, either to the visitors, or to the visiting Commissioners, and they had had many conversations with her, and she appeared to be frank and open; but she never in any one instance made the slightest complaint.

Had she been seen by yourself?—Repeatedly by the Commissioners.

Do you believe that there was any neglect on the part of the visiting justices in that case?—No.

I do not think obtaining information from lunatic patients is a difficulty; no doubt patients are sometimes very reluctant, and they are very much afraid, lest what they say might operate injuriously upon their position. When we take the patients aside, they often open their hearts freely to us, and if any patient expresses any desire to see a Commissioner alone, he is allowed always to do so, and wherever there is any case in which we think there is the slightest ground for inquiry, we insist upon having the patient alone.

In respect to the testimony given by lunatics this is to be observed, that I have never been mistaken in it myself, and I think my colleagues will say the same; and that the testimony of a lunatic, in respect of himself, is to be received with many grains of allowance; but the testimony of a lunatic, in respect of others, is oftentimes of the most trustworthy character. Our duty is to see all the patients and see all the rooms, and every nook and corner, and every cellar and dusthole. We are not necessarily accompanied by any one; but sometimes, for convenience, we like to have the medical man with us. He tells us much about the case of each individual, and gives us much information. It is not a matter of necessity that he should accompany us; and very often the Commissioners go about without any one. It has often been the rule, when the Commissioners are about to visit any large asylum in London, or any very large asylum, that sometimes two and sometimes three Commissioners go together; and immediately on arriving, our great object is not to go in in a body, but to scatter ourselves over the asylum. One may undertake to examine the books, so as to see all the patients, and dot them down; another will go into the upper rooms, to see the state of the bedding; and another would go into the kitchen, and see the state of the food; so that we may take them as much by surprise as possible. They have made some night visitations in the country, and they have made two or three visitations in London, and I think with great advantage; but although I think we should some years ago have discovered most terrible enormities, we have not done so of late, we have only discovered very bad ventilation, and a great deal of bad smell. The state of the licensed houses, and the condition of the poorer patients has been inconceivably improved.

Do the Commissioners upon their visitations, ever compare the copy of admission papers with the original, to see that the copy is a real copy of the original?—I do not think that they do, it would be such heavy work to be carrying about all the copies of the number of admissions into private asylums; every year there are nearly 2,000.

Have you any reason to believe that the admissions are made irregularly, and that the certificates are either evaded, or neglected to be signed as required by law?—No, I do not believe that. I believe that in some instances we have detected this, and have punished accordingly. There has been a falsification of dates, but I do not think that there has been any falsification of facts.

Whose duty it is at your board to undertake the examination of these certificates?—It is the duty of the secretary; as all these come up, the secretary goes through them most minutely with our chief clerk, who is a man of very great experience, and it is a work of enormous labour; and then, if the certificates are correct, no further notice is taken, but if there is the slightest defect, it is brought before the board.

Is attention given to the substance, and also the form?—Attention is given to everything, and it constantly happens that the secretary reports to us, and says, Here is a certificate, and the facts assigned by the medical men, as proving the person to be a proper person to be confined, are so weak, that we must look into the matter; and we constantly do. We frequently send back a certificate and say, "This is insufficient." The medical men who give the certificate very often arrive at a right conclusion upon wrong premises. They are obliged to give their reasons, and their reasons are sometimes bad, although the conclusion is correct.

Does the medical superintendent of an institution when a patient is brought in, exercise any discretion as to the state of his mind, or is the patient received entirely upon the certificates of two medical men who have seen him before?—He is received entirely upon the certificates of the two medical men who have seen him before; but if a patient comes, and so it has happened in many instances, and it appears to the medical superintendent that really there is very weak ground for shutting him up, he would lose no time in communicating the fact to the Commissioners in Lunacy.

The statement which is required to be signed within seven days by the medical superintendent, operates to a certain extent as a check upon the certificate of the medical men, upon whose certificates he has been received?—Yes; it is in some respects a third certificate.

There is no discretionary power on the part of the proprietor to refuse a patient?—Yes, certainly. The certificates are not obligatory upon the proprietor, but they are his defence for receiving a patient; but if he does not choose to receive a patient, he would send him away; he might say, "I am full," or, "I do not want this patient;" or he might say, "I really cannot see that the patient is insane, and I do not choose to have such a person in my house;" and he can send him away.

I suppose the disposition generally is to admit the patient?—Yes; we send back these certificates, if we consider them inadequate and informal, as to the one or the other of the

facts adduced. We do that in virtue of the general powers that we have over the asylum, as we should refuse their licence if they did not conform to what we lay down, but we have no positive power by the Act of Parliament.

If there is no doubt about the facts, which is the most important part of the whole proceeding, is it not necessary that there should be some authority who might be put in motion by the relations, independent of the medical superintendent of the house, who might be interested in keeping a patient in, in order to see that the Commissioners were rightly informed with reference to the case of a patient who was confined?—If you could devise such a personage as that, it would no doubt be beneficial, but you must be careful, while you are endeavouring to protect the patient, that you do not throw too great impediments in the way of his being put under proper care; for, not only are the public to be protected, but even in the interests of the patient you must not multiply the difficulty in determining the point when a person should be deprived of his natural liberty, and be subject to restraint and medical treatment. If you wait until the symptoms are so clear and so developed that there can be no doubt about it, then you will have waited till such a time that the man is probably become an incurable patient; but if the case be taken in time, when the symptoms are only discernible to an experienced eye, and when they would not be discernible to an inexperienced one, the probability is that the man will be cured, and will return to society in the course of a very short time. It is remarkable to what an extent cures may be effected, if the cases be taken in hand within 3 or 4 months, or if they be taken within 12 months; I am sure that all experienced men will tell you that fully 75 per cent. will be cured of cases taken within three months. Dr. Sutherland told me, in 1845, that he believed that in some instance, nearly 80 per cent. might be cured; but the difficulty increases in proportion to the length of time that the patient has been under the disease; and if you suffer the disease to go on and to exceed the 12 months, the probability is, that not three per cent. will ever be cured; and therefore the difficulty is very great; for while there is sometimes danger in shutting a person up; there is also danger in not shutting him up at all, and thereby making the disease inveterate. I do not think, in my experience of nearly 30 years, a single case, or not more than one or two cases have occurred, in which any person has been shut up without some plausible grounds for his or her temporary confinement;

but in every instance, with these exceptions, there have been certain plausible grounds in facts and in logic, sufficient to justify the temporary confinement of the persons and their being submitted to medical treatment. I believe that very few have been really shut up without cause, but I have no doubt that very many indeed have been detained beyond the time when they might have been set at liberty; I hope that we are reducing the number every day, yet I have no doubt that many are detained a long time indeed beyond the period when they should be set at liberty, but who were not received improperly originally; detained by proprietors, or detained through the non-intervention of their friends; but such is the melancholy condition of patients, that from the moment a patient is struck by this affliction of Providence, from that hour he becomes, civilly and morally, dead in respect to his relatives. All those motives that influence people whose relatives are in private asylums have little or no effect in public asylums. There the desire is to thrust them out too soon; it is the better extreme of the two.

Have you any reason to believe that there are cases of another kind, in which, owing to the difficulty of getting friends to interfere, patients continue at large when they ought to be subject to restraint?—A vast number of cases, and they are cases of a very sad and afflicting kind indeed. In the first place, a great many relatives are unwilling to have in their family the taint of insanity; they see the symptoms hourly more and more developed, and they will not apply to a medical man, and have these persons put under certificate, because they think that the moment the certificate has passed, from that hour the taint of insanity is upon the family, and it is impossible to describe the miseries that arise to the patient, and to families, in consequence. Just imagine what the effect must be in the largest establishment to have a wife a husband, a daughter, or a son insane. It operates injuriously in many ways; they are kept at home till they cannot be kept any longer; and the best course is a change of scene and circumstances; the patient ought to be removed from all around him, both for his own sake and that of his family, and particularly where there are young children, the presence of a mad person, or the disturbance he causes, is apt to produce most injurious effects upon the young imagination. One of the great difficulties in the way of placing persons under that restraint, which they clearly ought to be placed under, arises from this, that you must, in seeking for a certificate, apply, generally speaking, to the medical men in the neigh-

bourhood, Now the knowledge of lunacy among medical men is extremely limited indeed; it has never yet been made the subject of study, generally. Of course there are some who have attained to a very great degree of science and knowledge, and there are most eminent names in England at present; but people assume that because a man is a medical man, he must have a knowledge of lunacy, and they therefore apply to him for his opinion; but the fact is that a medical man has no more knowledge of lunacy than any other human being, unless he has made it his special study; it is a specialty, and as much requires minute study as anything else. For my own part I do not hesitate to say from very long experience, putting aside all its complications with bodily disorder, the mere judgment of the fact whether a man is in a state of unsound mind, and incapable of managing his own affairs, and going about the world requires no professional knowledge; my firm belief is, that a sensible layman, conversant with the world and with mankind, can give not only as good an opinion, but a better opinion than all the medical men put together; I am fully convinced of it.

Insanity is always accompanied, is it not, by a morbid condition of the brain?—It may be so or not; still it is not always apparent. Insanity is often accompanied with bodily derangements and symptoms which the medical man alone can deal with; but it is not in all cases the object so much to determine whether a man is out of his mind or not, as to tell whether a man, although being a little queer, as it is called, is capable of managing his own affairs. A man is not to be shut up because he is eccentric, or somewhat strange. If a man is altogether harmless, and capable of taking care of himself, and of managing his own affairs, and not in an early stage of the disorder, there is no reason why that man should be shut up.

But insanity is invariably accompanied, is it not, by a morbid condition of the brain?—I am afraid of going into that question. Many men say that there is such a thing as moral insanity, which is not connected with any functional disorder. However that may be, it is clear that the value of the certificate must depend upon the experience of the people who sign it. I hope that we shall see rise up a body of men who will have devoted their attention to the study of lunacy, and I think then that medical men will have been so much better instructed, as to be able to give a proper opinion.

Have you any suggestion to make with regard to the

certificate?—The only suggestion that I can make with regard to the certificate is this, that supposing the present system to go on, I think that some benefit would be gained by granting in the first instance, a certificate for only three months; now it is granted in perpetuity, so long as the patient is under the disorder; but in the first instance, I would have it given for only three months, and I think the effect would be to compel a revision of the case by the family, or friends; the relatives would then be obliged to look into the matter, as they would know that in all probability, if they did not do so, the patient would be returned upon their hands.

In order to justify the retention of a patient for more than three months, that form of certificate would have to be gone through again?—Yes, but only in one instance; I should not have it every three months; I should say that it would be necessary at the end of the first three months after the detention, that the certificate should be renewed.

Q. The way in which I have tried to provide for that was this: that there should be medical examiners independent of the commission, and to report upon the case within seven days to the Commissioners, and a separate report within three months from the time the medical examiner had made his examination; would that answer your purpose?—Not entirely; I understand that there will be very great opposition to that provision, and that provision could only have been considered, I think, as a sort of expedient to meet the temporary exhibition of feeling on the part of the public; but I do not think that it would work with any great benefit to the patient, neither do I think it would work with any injury to private houses. Again, the examiner must be taken from the same class of men as those who have signed the certificate. He must be some medical man in the neighbourhood, and he would be altogether a person of the same class, and therefore his opinion would be worth no more than the opinions of others. It would be only a third opinion apparently independent, but whether it would be so one cannot say. It is possible that a medical man living in the neighbourhood might be on bad terms with the proprietor of the house, or he might be on very good terms with him, in either case I do not think that his opinion would be of any great value. On the other hand, I do not see what injury it could do to the proprietor of the house, as it is limited to this, that within the first 24 hours he is to go there to see the patient, to make a report upon the state of the patient, and to make any further observations

that he might think necessary, but not to interfere with the house. I never contemplated a second visit of that examiner, and I think it would be injurious to give him thereby a *status* in the neighbourhood. I think it might operate injuriously, and as to the opinion that he would give in the first 24 hours, it would be worth little or nothing.

It is to be within seven days?—Then it will come precisely at the same time with the opinion of the superintendent.

But it would be a great check upon it, would it not?—Possibly; but it would be better, I think, to have them at two separate times.

What are the regulations within the metropolitan district, with reference to patients writing to their friends; are there any?—There are. It has been ruled in a court of law that the relatives have a right to come to an understanding with the proprietor of a house, and to put a limit, if they please, to the correspondence; and very often, I believe, a limit is put upon the correspondence; but there is no limit put upon the correspondence between the patients and the Commissioners; that is a thing that we never should tolerate. We believe, really, that no limit is put upon it, and that they do write to us, whenever they have occasion to do so, but if it went to such an extent that there would be hundreds of letters prepared by the patients in one week, it would of course be stopped. When letters are written I believe they reach their destination.

Does that remark apply to patients in provincial hospitals?—Yes, as far as we know; and when complaints are made, they will always complain that their grievances have not been heard, if they have not been attended to; but I dare say that very often they are prevented from writing to their friends, in a way that is really cruel and unjust; but I am sure, as to the Commissioners, that there is no limitation at all.

Ought not that to be inquired into?—It is a thing that we inquire into very much; and, among the rest, we inquire very much whether the friends have visited the patients, and I am sorry to say that the answer, in most cases, is that the friends have taken little or no care of them, and that is one of the most melancholy circumstances with regard to these afflicted patients. As I said before, a patient becomes morally dead in the estimation of his relatives; they think that he has brought the taint of insanity upon them; partly the heart is seared, and partly they are afraid,

or in a confused and agitated state, and the result is, that the wretched patient is in some instances altogether abandoned. In some cases, many relations discharge their duties in a most affectionate manner; but a large proportion of them do no such thing, and in case of any Act being passed, I think there should be a compulsory clause, making it obligatory on relatives either by themselves or by their agents, to visit their friends when shut up in an asylum. The 9th of George the 4th, chapter 4, is the Act that was introduced into Parliament by Mr. Gordon, to whom we are so much indebted, who was indeed the beginner of efficient legislation upon this matter, who moved for a Committee in 1827, the Bill being passed in 1829, and there was this clause in it, the 36th, "Be it further enacted, that the person by whom, or by whose authority such patient shall have been delivered to the care of the keeper in any such house, shall in person, or by some person duly appointed by him in writing under his hand and seal, such appointment to be renewed for each time, visit the patient so delivered as aforesaid, once at least in every six months during his confinement, and shall enter in the journal kept at such house for registering the visits of the Commissioners or visitors respectively, as hereinbefore directed, his name and the date of his visit." It is not in the present Act.

Do not you know that medical men in general throw every impediment and discouragement in the way of persons seeing their insane relations?—I would not go so far as to say that, but I have no doubt that many of them would be unwilling that the friends should come too often. I have no doubt of that, and perhaps that may account for their friends not showing the same zeal that they ought to do.

Do you mean unwilling on medical grounds?—They would assign medical grounds. There are some instances no doubt, in which the presence of relatives might be injurious, particularly in the case of a husband seeing his wife, or a wife seeing her husband; sometimes the excitement is dreadful; or when enmity is entertained by one towards another, it throws them into excitement, and there are many times medical reasons, but sometimes there are not.

I should draw the attention of the committee to this, in order to show our operation in respect to discharges. We have sometimes exercised our power of discharging a patient, but we have effected very many discharges in a different way. When we have been convinced that a patient had reached that point, that he could safely be set at liberty, we

have made it almost the invariable rule to write to the relatives, or to the party who put the patient in, and have said, "this patient is fit to be taken out, will you have the grace, and the decency, and the propriety of doing it yourself." It is a very sad thing, but it is not to be prevented, but a sore place will remain for years afterwards in the mind of a patient who has been shut up; he is sure to charge it upon his relatives that they were indifferent to his welfare, and therefore our object has been to restore harmony amongst them as much as we can. We write to the relatives, and implore them to have the grace of doing the act themselves, so that they may appear before the patient, not only as the parties who put him in, but as the parties who took him out, and in that way we have been very successful. A great number of relatives have taken them out in that way, and I do believe that it has restored harmony amongst them. When we find them contumacious, we act upon our authority, and a case occurred a few years ago, in which a father was most obstinate and unreasonable, and we were obliged to say, "If this is the case, we will discharge the lady, and there will be an end of the matter;" and we did discharge her. It is a power of the greatest possible value to give temporary absence in order that the patient may go down to the sea, or travel about, and it has had the most beneficial effect; the other power to send them out upon trial, we have not got; that is a different thing, but we hope to get it under Mr. Walpole's Bill. It would be of immense value for all classes, and especially for the paupers to be able to let a poor lunatic go out upon trial, provided that he should have some subsistence from the parish. I do not know any one thing that has operated so beneficially in the case of lunacy, as the power that we now exercise of transferring patients from one asylum to another. Many a time we have found patients moping and miserable, and we have transferred them to another asylum, and the change of scene and circumstances has operated so beneficially, that a man has seemed to live again. You cannot estimate the value of one house over another by the number of cures that are effected in one, nor say that one is worse than another because there are many more deaths in it. You must bear in mind the state in which the patients are admitted. Some asylums receive a number of old chronic cases and some others receive only curable cases, and when you come to the deaths, you will find that in county asylums a vast number of patients are admitted in a dying state, and one county

asylum would appear to have an enormous mortality, while another would appear to have none at all, and yet the one with the greater mortality might be the better asylum of the two, it depends upon the state of the patients when they are admitted. We have statements constantly coming up, showing that a patient has been admitted in a dying state. I think it would be very desirable if we could have proper statistics on insanity drawn up and put upon a good footing. It would require great trouble and expense; but I think it would be worth the trouble and expense, if it could be put into the hands of some competent persons; and I have no doubt that some most remarkable results would be brought out. In our department we have got a great deal too much to do; the Commissioners are constantly at work, and the clerks too.

Having closed your observations upon the licensed houses, will you now go into the next part of the case, viz:—Houses for single patients?—Yes; our power is to visit them once in a year, and to ascertain whether the patients are under certificate—it is only in that case that we have power to visit them.

You do not know necessarily how many houses there are with single patients?—We have no sufficient knowledge of that and we have spent years and years in endeavouring to learn it. I am certain that there are hundreds of persons called single patients of whom we have no knowledge whatever, and during the early periods of legislation, single patients were hardly even mentioned. By the first Act a record of single patients was sent to the Secretary of the Commissioners in Lunacy, who was bound to keep the whole thing under lock and key, and not to show it, except to the Lord Chancellor. It was of no value at all, and no person was compelled to send a record to the Secretary unless a patient was under his charge 11 months, and we found this to be the consequence, that they kept a patient under their charge for 10½ months, and then shifted him to another house.

A return ought to be made to the Commissioners of every patient in every one of those houses?—Yes, it ought to be compulsory; then the next process by the Act 1845, was, that a private committee was formed, which consisted of three members, the chairman, myself being one, and we were to have a knowledge of the private patients, and to visit them once a year. That lasted for some time, but it was found to work very ill; the three Commissioners could not do the duty, and it was extremely awkward to have secrets within secrets. Then it was extended and thrown open to the whole Commission,

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and therefore the whole Commission have such a knowledge as they can get of single patients ; but we have no right to visit the single patients unless they are under certificate. We believe that there are a vast number of actual lunatics who ought to be under certificate, who are detained in single houses, and we believe that although the condition of some of them is pretty good, the condition of others of them is extremely bad.

You spoke of them as being under certificate ; what authorises the reception of a patient into one of these houses, and his confinement there under restraint ?—If a person be in such a state that he is decidedly lunatic, he ought to be under certificate, and it would be the duty of the person taking charge of such a person for profit to notify that to us ; but they receive them under various pretexts, under the title of nervous patients, and many things of that sort ; they say that a man is not a lunatic. Suppose a patient is received as a nervous patient, no notice by law is required by the Commissioners, what is it that defines a lunatic, and requires a notice to be given ?—Until we can see and judge for ourselves, it is nothing more than the good intentions or convictions of the man who receives him, or the doctor who attends him, but we are entirely at the mercy of those people.

There is no statutory provision requiring the owner of any house to communicate with you in those cases ?—No ; unless a person is confessedly mad, and the doctors had declared him such. We, in many instances, have visited single patients in that condition, and have ordered that then they should be put under certificate.

Have you the power to visit, in cases with respect to which you have received no notice, on suspicion ?—The Lord Chancellor can give us authority.

With regard to those that you do visit, how do you find they are taken care of, as compared with those of the licensed houses ?—Now they are in a much better state than they used to be ; the responsibility is so great ; and they are mostly persons in a better condition, and some are very comfortable, and living quite happily. In other cases, there is a great deal of neglect and inattention ; but, upon the whole, they are in a very fair condition, but there are a great number of whom we know nothing, and who I believe are in a very bad condition.

Are they all under medical care ?—Many of them are

under merely the care of the person who receives them ; they ought to be under medical care.

Under what degree of restraint are they ?—That varies very much indeed , sometimes they are allowed to go about in a garden, and allowed to walk out by themselves; but that varies much according to their condition. Some of these are patients who, I believe, in many cases are under as much restraint as if they were in an asylum.

Have you any power to transfer a patient from a house of that kind to a licensed asylum ?—Upon a reference to the Lord Chancellor ; we could not on our own authority. I was asked whether the condition of things was now better than it was, and I do not hesitate to say, both with respect to public asylums and private asylums, the difference is so great, that we cannot be sufficiently thankful for it, in every possible respect, both moral and physical ; the difference is perfectly indescribable. I do not believe that any person could well describe it, except those who have been conversant with it. But that is no argument why we should not go a very great deal further, and endeavour to arrive at a higher standard.

Do you think the single system an advantageous one for patients ?—No, it is in many instances the very worst ; and from the bottom of my heart, I would advise anybody, if it should please Providence to afflict any member of his family, to send him or her to a private asylum, or if my own wife or daughter were so afflicted, and if I could not keep her in my own house, under my own eye, I would send her to a private asylum ; to a good private asylum, because there are most remarkable examples of excellence and comfort among them.

With regard to the houses in which single patients are kept, what is the state of the law with regard to those houses ; what superintendence have the Commissioners over them ; what means of ascertaining how many there are, and how are they looked after ? We have no power to visit a patient until such time as he is under certificate ; we have no power of ascertaining whether the person ought or ought not to be under certificate, and, therefore, of course, it rests in the breast of the medical man whether he will put him under certificate or not. We have every reason to believe that a very large number who ought to be under certificate are entirely hidden from our view. By degrees we have discovered a good many, and have compelled the medical men or their relatives to put them under certificate, and they are now

constantly visited ; but there are a vast number of whom we have no knowledge. We have no means of arriving at it, and we have advertised and used all sorts of agency to discover such persons. In a great many instances where we have discovered them, we have found that they were acting in complete ignorance of the law, and we have in such cases said, "If you will put the parties under certificate, we will not put the powers of the law in force against you." These patients require more than any other the superintendence and care of the law, because they are the most unprotected and the least known ; and even when they are known, they are the most difficult of frequent access ; they are scattered in all directions. It often costs one of the Commissioners a whole day to see a single patient, and having given that patient the benefit of his visit, he might, should he wish to see another single patient, have to go off in an opposite direction, perhaps 100 miles. Now all domestic rights are respected ; there is no power directly of obtaining access to a private house, where a patient is kept under the charge of his own family ; and it is only in a case where a patient is put out for profit, that we can, upon application to the Chancellor, obtain access to a house, where we have reasonable ground to believe there is a patient restrained, and who ought to be under certificate. But not only in the first place is it difficult to ascertain where such patients are, but it is also difficult afterwards, as we must have good testimony to induce the Chancellor to give us a right to enter a private house, and make an examination accordingly. The past condition of these patients has been very bad, but I believe that the influence of public opinion, and the activity that we have employed, has bettered the condition of a good many of them ; certainly it has bettered the condition of those who are under visitation ; but knowing what has taken place, before they were under visitation, we are led to infer that the very same enormities may take place in respect of those who are not under visitation. The number with respect to whom the law has been complied with is 124. The number has been gradually increasing for some years ; we did not at one time know of more than 30 or 40 ; sometimes they are in private families, and sometimes they are in the houses of medical men ; and where they are in the houses of medical men, as far as we know, they are upon the whole well treated ; but where they are put out, merely under the charge of attendants, I know of my own knowledge, from communications made to me by persons who

have been rescued from these dens of suffering, that what they had endured has been something dreadful. We have not prosecuted any one under the 90th section. It is constantly the wish of families to avoid making patients certificated lunatics; and it is to defend the wretched patients from the understanding between the medical man and the family that we desire to have the interposition of the law. We have a case before us at the present time, in which a gentleman has placed his wife as a single patient; and in order that she may be as far removed from him as possible, he has sent her into a distant county, and for two years he has neither seen her nor inquired about her.

In those cases where it is required that entries of certain particulars should be made, has that requirement been observed?—In some cases it has, but in the great majority of cases it has been neglected. The truth must be told, and I must say that we, the Commissioners, have erred upon the side of lenity in many instances. We have endeavoured year by year to do things by persuasion until I have lost all patience. We have erred on the side of lenity in respect of licensed houses and those who receive single patients, and I am very sorry for it.

This section seems so easy to evade: anybody who receives a lunatic, or an alleged lunatic, is brought under the operation of this section, but any person wishing to evade it would say, "Take the custody of this patient; I do not think he is a lunatic, but I think he requires care"—Quite so. The Committee must have seen advertisements in the public papers from gentlemen advertising to take nervous patients, which is one of the greatest difficulties we have to contend with. We ought to know not only of those who are decidedly lunatic and fit to be under certificate; but we ought to know the fact of any person being received in a house for the profit of the medical man or any other under the title of a nervous patient. It ought to be known, that we might have the power of ascertaining whether such patient ought to be under a certificate or not.

It would seem that whenever a person is put under surveillance, it is not too much for the Legislature to require information of that fact?—I think that the honourable member has put it on the true principle; so long as a patient is kept within the walls of his own house under the care of his wife, or if it be a wife under the charge of her husband, I do not think that public opinion is ripe for allowing any one to go into it. I do not say whether it would be right or wrong, but I am sure that public opinion is not ripe for that, to introduce

a new power to enter domestic establishments. If they choose to take charge of patients themselves they are right, if it is necessary for their own happiness and comfort ; but if they put them under the charge of another, then I think that the law has a right to come in and see that there is no undue power exercised over the personal liberty and comfort of the sufferer.

Have there not been many cases of that kind in the lower ranks of life, in which, in order to avoid expense, persons of unsound mind have been detained by their own friends, and subjected to very bad treatment?—Yes, a vast number of such cases. The cases that we brought out of that description in the report of 1844 in Wales were very shocking ; I can conceive nothing so horrible as the state in which that class of patients has been found. I am not contemplating a compulsory law ; I only wish to point out the evil condition of the single patients, showing that in consequence of their evil condition the law ought to interpose, and to give all the protection that it could, and I only venture to say, as the result of our experience, the security of private asylums is infinitely better than that of the single houses. I do not contemplate any compulsory powers ; all that I contemplate is, that we should have a knowledge of the parties under charge, not with a view of sending them to an asylum, but to ascertain whether they were properly or improperly restrained. If you could find any intermediate expressions that would answer the purpose, it would be a good thing ; for relatives are unwilling, not only to fix upon a family the taint of insanity, but there is also this feeling, and a very proper one it is, they are in hopes that the patient may be soon cured, and they would not wish that he should turn round, and say, “ See with what haste you have stamped upon me the mark of insanity ; if you had had a little patience I might not have borne this mark ;” and it is this that constitutes the extreme delicacy of the question. It is the most delicate question that we have to handle. I know of nothing so painful or that causes so much consideration and reflection, and so much doubt and misgiving, because you have this before you, that you may hastily fix the taint of insanity upon a family, and upon the man himself, and you may also shut him up ; and yet, on the other hand, if you do not do it, you may allow the disease to become inveterate, and then he may remain incurable for the rest of his life. Our view of the question is, that there should be some power given of compelling all medical men or attendants, or others appointed by medical men, who receive any patient whatever for profit, that they

should be compelled to give us notice of the reception of such patient. Any lunatic patient? Yes, in a single house, at least I will not say lunatic, because that begs the whole question, but still that we should have a right to judge whether they ought to be put under certificate. Take the class called nervous patients, who in some instances are only in a state, sometimes of high excitement, and sometimes of low depression; a little medical treatment would put that all to rights; in other instances nervous people are upon the very verge of insanity. I think we must have a register in some manner. It might be said that the medical man was not to make any return for the first three months; and there might be a case of brain fever that would be over in three months; but if at the end of three months the patient continued in a low nervous state, or in a state of mental aberration, I do think that some notice ought to be given to the Commissioners. It is a matter of the strictest privacy; not another human being knows it; and all that the Commissioners require is, that they may have the power of going to see what is the condition of the patient. All that the Commissioners require is this; there are a vast number of what are called nervous patients, and we have no jurisdiction over them; we believe that a vast number of those patients so received are lunatics, who ought to be under certificate, and under our jurisdiction and visitation; but how are we to arrive at a knowledge of the places and the circumstances in which these various patients are confined? All that we require is, and it seems a very small requirement, that any medical man or other man receiving patients under the appellation of nervous patients should, after the expiration of three months, make known to the Commissioners in Lunacy that he has such a patient in his charge, and that the Commissioners, upon that, should have the power to go down and ascertain what is the state of mind of the patient, and determine whether that patient should or should not be put under certificate, according to their decision whether he is a lunatic or a nervous patient.

If a medical man receives a patient, not under the name of a nervous patient, but under some other name, how could you ascertain that fact a bit more under your proposed new law, where there was a patient who ought to be certificated?—That is a difficulty that suggested itself to me when the clause was drawn, that if we use the word “nervous,” they would use some other, and thereby evade the law. But it is a

term which has passed completely into the formularies of medical men, and I am convinced that if the law required that course to be taken, that in a vast number of instances, the medical men would give evidence as to the patients that were under their charge.

Is it practicable or not to require that medical men should report to some authority, say to a medical board, all patients whom they might take into their house for profit, distinguishing the malady of the patient and thus enabling them to say that the patient was a nervous patient, without making the case exceptional?—Yes, and that is pretty nearly what I was saying; and then upon the receipt of that notice the Commissioners would go and see the patient, and if they found that he was really as stated by the medical man, simply a nervous patient, we should have nothing more to do with it. I do not know that the medical profession would object to notify to us in all cases; and if they said this is a case of a common disorder, it is a case of an abscess, or the patient has a bad foot, of course we should not interfere.

Although we are bound to say of the 124 cases that we know of, that no doubt some of them are living comfortably and peacefully under charge; yet we have discovered such cases that we have a right to assume, where there is no supervision, and no care, that the same enormities will prevail, and I have no doubt that there is going on now, in many parts of England, what we know went on a very short time ago. I will mention to the Committee what a gentleman related to me: he was a man of considerable ability; he was afflicted by brain fever, and nothing more than that; he never had an attack of lunacy before, and he never had an attack afterwards; but he was afflicted by brain fever, and he was put under the charge of a medical man in London; one of those medical men who have a vast number of these houses in charge of attendants, to whom they consign A. B. and C.; he was put under the charge of one of these attendants, and detained a few months, and then liberated; and the account which he gave to me about six or seven years ago would hardly be credited. He showed to me the scars on his legs, where the ropes had cut into the calves of his legs, and into his ankles; he stated that he was left under the charge of attendants, and they strapped him down in his bed for 24 hours together, and that they would bring into the room women of the town, and others to smoke and drink, while he lay there on his bed: he recovered, and was liberated, and he gave that account to

me of what he had endured, and this is an instance of the treatment of a man being consigned to the charge of attendants.

Could that state of things exist if proper care was taken by the friends by whom they are confined, that the treatment of the medical man was proper ; does not it imply great neglect on the part of the friends ?—No ; not altogether ; except it may to this extent, that the friends do not see him every day or every week. A medical gentleman, in one instance, has as many as from 30 to 40 houses in which he puts his attendants, and when a patient is brought under his care, as a single patient, he is consigned to one of those houses ; and it must be remembered that there are two parties to receive profit in that case, that is, the physician and the attendant who has the charge of him. The attendant is the person who generally receives the patient into his own house, and has himself to furnish the house ; and therefore the medical man having the charge is able to say, "This is not my house," and, in fact, it is not ; but it is his man's, and the man bears the whole expenses.

Is it not necessary that the visitors should possess some tact in making their visits to large asylums, where there are many keepers and nurses walking about, and somehow or other to get hold of the patients out of the sight and beyond the influence, so to speak, of the attendants ?—Yes ; it requires a great deal of dexterity in visiting them, but I am happy to say, that I think our Commissioners do visit with a great deal of skill. In the first place, two of our Medical Commissioners are men who were in charge of very large lunatic asylums themselves ; Mr. Gaskell superintended the Lancaster Asylum, and Mr. Wilkes the asylum at Stafford, and, therefore, they have very considerable experience of the whole thing. There is a very great desire always to get rid of the medical man and the attendants, with the view of getting the patients entirely to ourselves. I have always found that one way of arriving at a conclusion as to whether patients are kindly treated or not, is to observe the manner of the patients towards the attendants and towards the medical men. Insane persons do not practise much dissimulation ; they show pretty well by their manner what is passing in their minds, and if upon going into a ward, you find all the patients thronging round the medical man and taking his hand, and asking him questions, and the same with the nurses and the attendants, you may feel sure that there is kindness shown to them. On the other hand, if you see them retreating into a corner, looking distressed, and you see them

casting glances out of the corners of their eyes, that always excites in me a desire to make further inquiry. The qualifications for male and female attendants, both in public and private asylums, should be of the very highest order, for just see to what they are exposed; what a trial it is of their strength and their health, their patience and their forbearance; see how their judgment must be put to the test repeatedly. They ought to be persons able to bear a good deal without exhibiting the slightest temper or the slightest spirit of retaliation, for the temptations to strike patients in return for blows is very great; and where they are noisy, and fractious, and troublesome in the extreme, none but those persons can know what the forbearance is that is requisite to manage these persons by gentleness, and to beat down their frowardness by general kindness, and all this requires a great degree of judgment and forbearance.

Do you find more difficulty in procuring efficient male or female nurses?—I think a greater difficulty in procuring good men. The tendency of woman's nature is to nurse and take care of others, and therefore you have a good preliminary principle to start upon.

Do you think, looking to the interests of the patients only, the number of the attendants is insufficient, and their character is not sufficiently high?—Most undoubtedly; and the tendency in licensed houses is, on the part of the proprietors, to bring down the wages to the lowest point; and really I believe, in 99 cases out of 100, you will find that the happiness or the unhappiness, the comfort or the discomfort, the cure or the perpetuation of the malady, depend upon the character and conduct of the attendants. The medical man only sees them at stated intervals, but the attendant has the power of harassing, vexing, and annoying the patients, and retarding in every possible way their cure, at every instant of the day and the night.

Does your Lordship consider that the morals of the female attendants are necessarily lowered by the conversation which they are obliged constantly to hear?—There is no doubt about it; that it operates most injuriously, morally and physically, upon both the male and female attendants, because there is no doubt that the effect upon the attendants themselves is so decided in many instances as to give to many a predisposition, and to produce in many the actual development of lunacy. We have seen it in the medical men, and there is nothing more harassing to the human mind than to be perpetually in the presence of disordered intellects; they have no repose

night or day ; it bears down everything that is great in human nature ; and therefore I must say that, taking it altogether, I am filled with astonishment at the number of good instances there are of kindness and forbearance.

Are the attendants often changed ?—Very frequently.

What becomes of those who go away ?—They go to other asylums, generally speaking.

Can your Lordship suggest any means by which power should be given to compel the employment of a higher class of attendants, which can only be done by giving a higher rate of salary, as there is always a tendency, on the part of the rate-payers, if not to depress the rate of wages in public asylums as there is in private houses, on the score of profit, still to make a tremendous outcry if there are any great expenses incurred ?—I do not see how we can do it in licensed houses, except by compelling them to take servants with higher qualifications ; and if we did so, they must pay them much higher wages.

Probably the attendants are better in the licensed houses ?—They are more in number, but even then they are not what they ought to be ; and a case came before us the other day at our board ; a very respectable man wrote to me a private letter, and said that he had been long liberated from an asylum, but he wished very much to open his heart to me, and to state a few things. His letter was so simple that I thought it desirable that he should come to the board and give us some information, he came, and his demeanour was calm and sensible. He admitted that he had been once out of his mind, but he said he wished to give us some information, and he told us many things ; and he went on to say that the source of all the suffering and misery in the private asylums that he had known was the attendants, and not generally the head of the establishment ; that they were the source of all the sufferings and misery ; and that I believe to be the case ; and I am sure until you can get a class who shall have some sense of responsibility, and will do their duty to these wretched patients when the eye of authority is not over them, that the whole system of these licensed houses, although better than it was, yet at its very best will be detestable.

What is the condition of the criminal lunatics ? Is their treatment the same as that of others ?—Yes, precisely so ; but their presence in lunatic asylums is a very great annoyance, because these criminal lunatics must be treated in a somewhat different way. There are many of them with much more reason than the others, and, therefore, they have a

greater power of combination, and their presence in an asylum is a very serious thing, as it compels the keeper of that asylum to put the asylum more upon the footing of a prison.

It would be an advantage with regard to the other inmates that these prisoners should be collected in one asylum instead of being mixed up with others?—Of the greatest advantage.

Would it be an advantage also with respect to themselves?—Yes, and to the other lunatics also.

And it becomes a very serious question when those criminal lunatics have committed the gravest of all crimes to know whether, in a state of freedom, a man may not commit the crime again, and other lives be imperilled?—It is the most difficult of all questions; it is one that we have constantly referred to us, although we have no jurisdiction in the matter; but the various Secretaries of State have referred to us cases for our opinion, and we have been obliged to consider the matter, and we have confined our opinion to this point. We have stated that we thought such a person could safely or not safely be liberated, but we have not gone any further into the question. That seems to be one of the most important considerations, namely, what will be the moral effect of liberating such personages. It was not our duty to go into it, it is altogether a most difficult question. I have no doubt that there are many criminal lunatics who might be set at liberty, and I dare say that they would go through life quietly; some of them might be very troublesome, but I have no doubt that there are a good many who might be liberated with tolerable safety to themselves and safety to others, but then it becomes a very serious question what is to be the moral effect upon the public at large.

You speak of those who have committed very serious crimes?—Yes; there are cases in which we have not so much doubt, taking the moral sense of it; in cases of women who, under puerperal mania, have been guilty of infanticide. In a good many instances, we have found such women who have passed the age of child-bearing, and, in one instance, we went so far as to take the initiative and to write to the Secretary of State, and said that this was a case of a woman 53 years of age, and we thought that she might be safely sent back to the world.

I think your Lordship stated that there was a great difficulty as to liberating criminal lunatics who have been guilty of great crimes; are you aware whether any criminal lunatic has ever been liberated who has been guilty of murder?—Yes; one was liberated the other day; she was a maid in a family at Greenwich, and she had cut off the head of her employer's

child ; that was in the year 1848, and I think she was liberated the other day.

Are you aware whether the practice of the Secretary of State has not been to require, in addition to the ordinary certificate of present sanity, some medical evidence, satisfactory to him, that the cause of the insanity was not likely to recur, and that the liberation could take place without any reasonable ground for apprehending a recurrence of the crime?—Yes ; and I think that the Secretaries of State have taken great care as to this matter, that they have taken every security that the certificate should be such as to guard the public against a recurrence of the crime in that person ; but that does not touch the question that we have discussed, namely, the moral or political effect upon the public mind.

Is your Lordship of opinion that in the case of murder being committed under immediate access of disease, such as brain fever, where a prisoner was so rapidly cured as to be sane on his trial, that that person should be confined for the rest of his life in a lunatic asylum, even though the medical authority declared him to be sane?—In the sense of punishment, and with a view to the effect to be produced upon the public mind, whether persons who have been guilty of murder should be let at large, I do not know what opinion to give ; but if I were Secretary of State, I suppose I should have a decided opinion upon it. I am unwilling to say that in every instance, a man should be condemned to imprisonment for life because he had committed, however fearful an act, in a sudden aberration of mind. That must be left, I think, to the discretion of the Secretary of State ; but then it is becoming more delicate and complicated every day, because, it will be observed, that the medical men who are called to give evidence, in 99 cases out of 100, give evidence in favour of insanity, and persons who have any great crime to perpetrate know that very well. I am told that there is one medical man, of considerable reputation, who has openly said that it is his rule always to give evidence in favour of insanity, as he has such an opinion of the general misconception of the whole human mind ; and even when it is not so, see how juries are influenced by the profession. They bring in other arguments which perplex the jury very much, who are told that the man is not absolutely insane, but that he is labouring under the effect of an impulse that he cannot control. I must say that the medical men oftentimes talk an immense amount of non-

sense when they come before juries, and I believe that that is the received opinion.

I am certain, that those who have to determine these cases, the discharge of criminal lunatics, should make minute inquiry into this point, and endeavour to ascertain whether the patient has any sense of the crime he has committed; if you find a patient who has committed murder, and at the end of eight or ten years, a report be that he may be set at liberty, make further inquiry, and see whether the patient has any sense of the crime he has committed, and if he has none, think that that man is insecure; but if he has a deep sense of it, and feels remorse for the crime he has committed, although it may have been done in ignorance, we may have far greater hope of that man.

What is the next point that your Lordship wishes to go into?—The next thing I think will be to go into the whole principle upon which the private licensed houses are founded.

What remarks has your Lordship to make upon that point?—It is the result of very long experience in these matters, that a large proportion of the difficulties in legislation, and almost all the complications that we have to contend with, or to obviate, arise from the principle on which these licensed houses are founded. The licensed houses are founded upon the principle of profit to the proprietor, and the consequence is, that any speculator who undertakes them having a view to profit is always eager to obtain patients, and unwilling to discharge them; and he has the largest motive to stint them in every possible way during the time they are under his care. Now, this must be borne in mind, I do not intend to cast any reflection upon the medical profession. I know that when I have urged arguments of this kind, I have been told that I have entertained most undue suspicions of that great profession. I have no suspicion of them as medical men; but my suspicions are of the medical men only when they are proprietors of lunatic asylums, into which lunatics are taken for profit. I am perfectly ready to admit that there are some of the best men in that department of the profession that one can meet with. I am perfectly ready to admit that there are a great many medical proprietors who now, under the operation of this Act, are governed in a great measure by their own good feelings, and they have brought their houses to a very great degree of excellence; but even the very best of them must be under this influence of the profit to be made out of the patients. Even supposing that you gave them full credit for care and for proper treatment,

from a desire to do their duty, nevertheless they must with a view to making a profit, take the utmost payment that they can exact; and of course within proper limits they give the smallest amount of treatment, and go to the smallest expense that would be consistent with the discharge of their duty, and therefore there is this vicious principle of profit that runs through the whole. The Committee will perfectly understand, that where a proprietor is an unprincipled man, where he is determined to evade the conditions of the law, he will do everything he can to avoid whatever the Commissioners enjoin upon him. How very severe the temptation must be, the Committee can perfectly understand, and to what an extent he may carry the bad management and government of his asylum, so that the patient will receive from it little or no real benefit, their object being to get as many patients as they can, and to keep them as long as they can, and stint them in medicines, clothing, food, and comfort. This to a certain extent must be the case even with many of the best-intentioned proprietors. I am convinced that those who have invested a certain amount of capital must turn it to account, and the only way by which so many of the asylums can be carried on is upon borrowed capital; and these proprietors are still in greater difficulties than those who carry them on on their own capital, and this principle of profit operates most injuriously to the great mass of the community, and now keeps up the scale of prices for care and treatment to such an amount, that really a vast number of people in this country belonging to the middle classes and those just above pauperism, such as small shopkeepers, and so on, are put in such a position that it is impossible for them to get anything in the shape of medical care and treatment for an amount less than from 25s. to 30s. a week.

When I look into the matter, I see that this principle of profit vitiates the whole thing; it is at the bottom of all those movements that we are obliged to counteract by complicated legislation; and if we could but remove that principle of making a profit, we should confer an inestimable blessing upon the middle classes, getting rid of half the legislation, and securing an admirable, sound, and efficient system of treatment of lunacy. That brings me to the great point, viz., the establishment, I will not say of public asylums, but hospitals, or asylums at the public cost, for the reception of all classes of lunatic patients. I now speak with reference to that large class of society which begins just above pauperism, and goes on to the highest in the land. All the difficulties in legislation

arise out of that particular class ; we have none with respect to the management of the paupers in the county asylums ; they go on very well. There is nothing in them but the ordinary decay, and the difficulty that arises in all institutions out of occasional ignorance and mismanagement. If you had establishments of that kind, asylums or public hospitals, I should like to say chartered asylums, you would find that they would be precisely the reverse of those I have mentioned. First of all, there would be a total absence of that motive which constitutes the vicious principle of the present licensed houses, there would be no desire or view to profit of any sort.

Do you suggest that there should be no private asylums of any sort or kind, and would you absolutely prohibit them by law ?—No, certainly not. I would leave them, and leave it to the public to choose which kind of asylum they wished to go to. I have no doubt that a certain number of those licensed houses would continue, and I dare say that persons, from peculiar notions of their own, would resort to such asylums. I would allow them to continue, and I would also have, as you have, public asylums for paupers, houses on a public footing for persons in a better condition of life.

The example which I principally should follow would be the example of Scotland. In Scotland, the chartered asylums have existed for a certain number of years, and they have been productive of the very greatest benefit. We have a certain number of institutions similar to them in England, and they are called hospitals. Hospitals in England are founded upon private funds. The chartered asylums in Scotland are also founded upon private funds.

What you wish for is an encouragement for the endowment of hospitals for lunatics ?—Yes ; to be founded in two ways, either as in Scotland, and in some parts of England, by private contributions ; and we have 11 hospitals in England also so founded, or, as in England, in respect to borough and county asylums, upon the public rates. I think it would be sufficient only to make known the want, and I have no doubt the money would flow in ; but I would give in the Bill a permissive clause to counties for the purpose of founding these asylums entirely for the reception of the middle class patients.

Do you mean to be annexed to others ?—Not necessarily so.

A permissive power to found them out of the county rate ?—Yes ; it would not require that the county should do more than give the guarantee of its rates ; it would not be necessary that the county should expend a farthing,

in fact it would incur no hazard of its own whatever. But then it should have power to erect an asylum of that description, I would leave the governing power, the initiating power just the same as with regard to the county asylums, with the magistrates in quarter sessions, or it might be vested in the visiting justices of the present county asylums ; who, having considered all matters, might with the consent of the magistrates in quarter sessions, if they thought it desirable to institute such an asylum, merely take the guarantee of the rates, to raise the sum of money at 6½ per cent., the whole interest and principal being thus paid off in 30 years. The thing would be self-supporting, and the moment the asylum was opened it would be filled with patients, some of a higher class and some of an inferior class, who would pay the whole expense ; their payments would cover not only the 6½ per cent., but the whole expense of carrying on the institution, the care and maintenance of the inmates, and all the salaries and everything else.

There is another very great advantage indeed, that in these chartered asylums, as they would be in England, you would have a medical man at the head of them, and that medical man instead of being as he now is, either the servant of the superintendent, or the man at the head of the establishment having to make a profit, would be a man who was completely independent, and you would have an infinitely better class of attendants, and an infinitely better class of medical men, for no medical man ought to be at the head of an establishment of that sort without being absolute in the control of it ; he ought to have the appointment and dismissal of the attendants, and there ought to be no appeal from him, and I think that no man having the charge of 200 patients ought to receive one farthing less than £600 a year, with a house and allowances.

Is that the case in the existing county asylums ?—I am sorry to say that in the county asylums they are most cruelly underpaid in many instances.

All I ask is the guarantee of the rates ; I am quite sure that the whole system would be self-supporting, and infinitely to the advantage of the community ; and I am certain by the establishment of such asylums as these, and by the appointment of medical men of a proper description, you will introduce that which some gentleman mentioned at the beginning of the day, an effective school of lunacy ; you will have a body of persons who really will be able to devote their time and attention uninfluenced by any of those motives which have been

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referred to, to look into the root of the whole thing, and establish a school of lunacy.

There is one other point that I would refer to, namely, that some persons might be afraid that these would lead to publicity, and destroy the privacy which they now seek ; but I really do not believe that that result would at all take place. And in the first place, I think we may fairly argue, whether privacy is a thing that you ought to consider when you have to deal with the interests of wretched and unprotected lunatics. But I do not see that there would be the slightest publicity, greater than there is now. Many persons, whose families are afflicted with lunacy, think that they are keeping the fact in entire privacy, but it is an error. If there is an insane relative of any family, it is invariably known ; the world may not know where he is, but no family ever succeeded in suppressing a knowledge of the fact that there was a mad member connected with it.

The testimony in favour of the chartered asylums throughout the whole of the Commissioners' report from Scotland, is very strong indeed, and some of the gentlemen in charge of those asylums are amongst the most eminent in the whole profession. There is the Crichton Asylum, which is superintended by Dr. Brown, whose name I cannot mention without feelings of respect and admiration.

Does your Lordship now propose to go into the subject of lunatics in workhouses and county asylums ?—Yes.

You propose to take them together, because they are connected with each other ?—Yes.

How many lunatics were there in workhouses during the last year ?—I have already given that in evidence, but I think the one will immediately rise out of the other.

Will you be good enough to take the workhouses first ?—Yes.

What is the law with regard to the detention of lunatics in workhouses now ?—Properly speaking, no lunatic can be detained in a workhouse at all. There is a specific law against dangerous lunatics being detained in a workhouse for more than 14 days.

What Act of Parliament is that ?—That is under the Act of Parliament, 4th and 5th William 4, c. 76, s. 45, the other acts are the 16th and 17th of Victoria, chapter 97, and also the 18th and 19th of Victoria, chapter 105.

The law is, that no lunatic can be detained in a workhouse beyond 14 days ?—Yes ; no dangerous.

But notwithstanding that law, they are detained for a considerably longer period?—Yes, a vast proportion of pauper lunatics are detained altogether, or for very considerable periods of time.

Under what authority is that done?—It is merely under the authority of the Boards of Guardians, but in direct contravention of the law. It will be found that the workhouses are filled with lunatics, who are taken there on the sole authority of the relieving officer, or the Boards of Guardians; but the law requires that if a person be a lunatic, he should be taken before a magistrate, that he should be submitted to the examination of a doctor, that then the magistrate being of opinion that the person is a lunatic should consign him to the care of the principal lunatic asylum, if there is one, and, if there is not one, to some proper receptacle, some private asylum in the neighbourhood; but in a vast number of instances that is not done. He is taken to the workhouse, and there he remains; but the great proportion of them are taken there now, and have been there on the authority of the relieving officer, and Boards of Guardians, without the intervention of the magistrate. They are detained there merely under the authority of the Boards of Guardians and the authorities of the union, simply because the guardians believe that it is cheaper to keep them there than to send them to the county asylum. It is solely on that ground; in many instances the workhouse authorities would be very glad to get rid of them.

What would be the difference in the cost of taking care of them in an asylum as compared with the cost in a workhouse? It was a question I intended to arrive at, somewhat later; but I will take it, if the Committee will permit me, now. That is perhaps the most important consideration in all these matters; and I believe it would be found upon minute examination, that the difference in the cost will be very little indeed, if any. Perhaps, in very many instances, the differences in the cost would be in favour of the lunatic asylum, as compared with the workhouse; but a very bad habit has grown up in the method of keeping accounts, and if we can succeed in altering that, a very great deal of light will be thrown upon the subject, and a very great deal of error will be dispersed. At the present time the accounts invariably appear in a gross sum for "maintenance and establishment charges." I hold in my hand the 12th Report of the Commissioners in Lunacy, in which there are full statements of the expenses

of all the county asylums, the weekly charges, and the maintenance and establishment charges. I will take Bedford as an instance. The whole weekly charge for the paupers from the county or borough to which the asylum belongs, is 8s. 9d. That is the only sum which the guardians look at. They see that it costs 8s. 9d. to put a pauper into the Bedford asylum, and they calculate that it will cost only about 4s. a week to keep him in the workhouse, and they jump to the conclusion, therefore, that it is cheaper to keep him there, than to send him to the lunatic asylum. They do not consider that in that 8s. 9d. is included the whole of the establishment charges, and that the maintenance charges for food and clothing are no more in the asylum than 3s. 8½d. for provisions, and 8¼ for clothing. But we must always assume, that if lunatics are kept in the workhouse, they must be treated in some measure as lunatics; they must have all those comforts, and those superior kinds of diet and treatment which they are entitled to. If we could once have the accounts duly separated, and put before the country, I am certain that boards of guardians and parochial authorities would see that, in fact, the cost for the maintenance of a pauper in a lunatic asylum was not greater than in a workhouse. By the manner in which they estimate the cost of a patient, they make it appear to be much lower in the workhouse than it really is. Suppose for example that there are 200 paupers in a workhouse, they make an average of the expense divided by 200 and they then say it is so much per head, but that brings down the expense of the lunatic or able-bodied pauper to a very much lower figure, because it is shared by women and children; whereas, if they were to estimate the cost of a pauper in the workhouse, giving him his due maintenance, and not reducing it by the average of the women and children, who consume much less, it would appear that the cost of the man in the workhouse was as great as in the lunatic asylum. Every calculation that we have made we find that, by separating the establishment from the maintenance charges, we should bring down the cost to a little more than one half. The justices of the county know it (detention of lunatics in workhouses) perfectly well, but the Visiting Magistrates to the county asylums have no authority over them, and it would be very beneficial and proper, indeed, if by the Bill now before the House, a power were given to the Visiting Magistrates of the county asylums of their own authority, and without the intervention of any other

authority to remove lunatics from workhouses to the county asylum.

Then it comes to a question of increasing the size of the asylums?—Yes; it was proposed in 1845, that there should be annexed to every asylum, other buildings for the chronic cases, where they would be kept at much less expense. Then the principal asylum might be emptied of its chronic cases, and be kept open for the reception of the recent and curable cases; and wherever that has happened, the greatest benefit has arisen.

Have not the justices power to proceed under the provisions of this Act to remove those paupers from a place where they are improperly detained?—Yes, the spirit of the Act is very clear that no lunatics should be sent to workhouses and none should be detained there, excepting under circumstances of very great emergency, beyond 14 days. The spirit of the Act is very clear, but the machinery for carrying it into operation is very cumbrous. The Commissioners have very little right of interference; it is not under their immediate jurisdiction. There is no doubt, whatever, and I say it with great deference to the country gentlemen, that they do not like to be interfered with, and we have had very angry and fruitless correspondence; with various authorities there is great power in passive resistance. We have gone to the full extent of our powers, but we have not been able to effect what we desired; and the consequence is that the workhouses are over-crowded with lunatics to a most frightful extent, and their condition is something of which the Committee can form no conception.

What it is important for the Committee to know, is whether that over-crowding of the workhouses by lunatics arises from the provisions of the law not being put in force for their removal to places where they would be put under proper care and treatment, or whether it arises from want of room in the county or other asylums for their reception?—In some cases it arises from want of room in the county asylums, but in a great number of instances it arises from the dogged and passive resistance which is offered by the authorities, who are determined that they will not incur what they consider will be an increased expense.

When you spoke of the dogged resistance of the authorities, you referred, I presume, to the parochial authorities, and not to the county magistrates?—Yes; but a vast majority of the lunatics who are now detained in workhouses, are sent there

merely upon the authority of the relieving officer. They hear of a man being a lunatic, and they say he must be confined, and they carry him on their own authority to the workhouse, and there they keep him. We are constantly applying to the Poor Law Board to give us assistance; and the Poor Law Board, I must say, have always from the very beginning shown the Commissioners the greatest kindness, and have given us assistance upon all occasions to the full extent of their means; but they constantly say, "It is very well, but we have no power to do what you wish."

Does your Lordship wish to show that it would not really be more expensive to a union to send their lunatic paupers to an asylum, than it is to detain them in the workhouse?—I do not believe that it would be.

Are there many cases of idiotcy in the workhouses?—A very great many.

Are they exposed to very great cruelty there?—Yes, to the very greatest cruelty, and we are now returning in these workhouses to the system of things that prevailed in 1828, there being no means of classifying these persons; a large proportion of them were then chained down, and kept in the most horrible state of filth and suffering.

What is the kind of treatment which these lunatics undergo in these different workhouses. I think you stated that there were no special attendants provided for them?—Yes. There is almost a total absence of proper supervision, proper attendance, and medical treatment.

Could your object be attained under the existing law, or is an alteration of the law necessary to effect it?—It could be attained under the existing law, if the visiting magistrates of the county were of opinion that such a system would be beneficial; they have full power to move the county for that purpose. I think that the law is sufficient to give all the accommodation that is required. If the visiting justices were convinced by inquiry into the matter, that an establishment for these chronic cases connected with the various asylums would be very beneficial, and likewise that the guardians and the parochial authorities were brought to a conviction that it is not more expensive to keep a pauper lunatic in a county asylum, than it is to keep him in a workhouse or union, could you bring them to that opinion, the law is quite strong enough to carry into effect every amendment that is required.

Then it comes to this, that if the justices in the different

counties would provide asylums sufficient for the pauper lunatics in those counties, the law is quite adequate for the purpose?—Yes.

Would there be objection to remitting the chronic cases of pauper lunatics to the workhouses?—There are very many objections, and I will mention one; first of all, I should be sorry to recognise the principle that lunatics should be kept in workhouses at all; I may mention that the suggestion of the Honourable Member has already been made, and adopted in some instances, and in every instance of a chronic patient going back to the workhouse, he has declined in health and appearance, and in fact they require to be placed in a totally different position, to undergo different kinds of treatment, and to be put upon different sorts of diet; in every instance of a chronic patient being sent back to the workhouse, he has declined.

There are a great number of these pauper lunatics who are now shut up in workhouses who might be liberated from those workhouses, and placed under the charge of some of their friends, a small allowance being made by the parish for their maintenance, and those lunatics so living with their families should be placed under the superintendence of the various union officers whose business it should be to see them once a quarter, and report upon their condition to the authorities of the parish, to the magistrates of the county, and to the Commissioners in Lunacy.

Just consider for a moment the confinement to which they are exposed in the workhouse. Many of the pauper lunatics, who would pine away in a workhouse, would flourish even upon inferior diet, if they were living under the care of their relatives. The discipline of the workhouse was intended for a totally different order of beings; it was intended for able-bodied paupers, and it was contrived for the purpose of making the workhouse disagreeable, and painful to a man who ought to be earning his livelihood; and, therefore, there is every kind of restraint imposed, and the discipline itself is very severe. And, then, again, particularly in large towns, look at the airing courts; see how they are divided, and subdivided into small spaces, with high walls, into which these wretched lunatics, who ought to enjoy fresh air and exercise, are allowed to go once or twice in the course of the day, and where they go round and round like so many wild beasts—the poor creatures pine under it.

A vast number of these lunatics are treated as sane persons,

and for any breach of order or discipline they have been sent to prison frequently.

Does not a still greater objection apply to the kind of medical men who attend these workhouses?—Certainly.

They employ persons who will perform the duty at the lowest price?—Yes. When a medical man sees a case, and he is convinced that the patient ought to be sent away to a lunatic asylum, or he sees a case, and is convinced that the patient ought to have higher diet, and receive all those little comforts which are necessary in his condition, the truth is, and it ought not to be concealed, that the medical man is so completely under the control and influence of the guardians, that oftentimes he does not dare to do his duty.

What provision would your Lordship suggest?—I think there should be a provision to this extent, that the relieving officer, or the overseer, should not of his own authority take any lunatic into a workhouse, which he does now, for a vast proportion of them are taken in so.

You would prohibit the relieving officer from acting so in every case, but where there was a pauper lunatic brought to his notice, what would you require him to do?—I would require, in every instance where there was a lunatic, or an alleged lunatic, that that lunatic, or alleged lunatic, should be taken before a magistrate, and that the magistrate should then send for a medical man, in order to ascertain what was his state of mind; but I would never allow the relieving officer to lay hold of a lunatic, or an alleged lunatic, and take him into the workhouse, except for the purpose of temporary safe custody, until he could be taken before a magistrate.

A difficulty arises from this. We keep calling the pauper a lunatic, but he is not so unless he is certified to be such, and therefore the relieving officer, or overseer, defends himself, and says, "It is true that I have carried the fellow off to the workhouse, but he is no lunatic at all; he may be a little odd or a little queer, but he is not a lunatic under the law until he has been certified to be so." Now observe the protection which the relieving officer and the overseer have is this, that the medical officer visiting there, is so much under the influence of the Board of Guardians that he will not certify that the man is a lunatic, and there is the difficulty. If we could get the magistrates to interest themselves in these matters, it would be very advantageous; I stated before how anxious I was to bring the lay element to

bear upon this matter, and to get all the laity of the country to take it up.

Is there not another large class of pauper lunatics, amounting at least to 5,000, who are detained by their friends?—Yes.

Are there any remarks that your Lordship would wish to offer to the Committee with respect to that class?—No, I think it is a class that might be increased with advantage if kept under proper supervision, a small allowance being made to them by the parish. I think that they would be happier, and be much better cared for, and that they would thrive better for a sum less than that which is now paid for them in the workhouse.

Does not it often happen that these persons are detained from an early stage of the disease with their friends, whereas if they had been at that period placed under medical care and treatment a cure might have been effected?—Quite so; but I should contemplate the placing of lunatics with their friends, only in cases where they were chronic cases. I should not think of detaining in the house of their friends any person in an early stage of the disorder, who might be sent to a curative asylum.

Practically, does it not happen that these persons do remain with their friends?—Yes, constantly.

Whereas if they had been sent at an early stage of the disorder to a lunatic asylum they might have been cured?—Yes, a very vast number.

Might not the object of Section 67 be carried out, if the duty of taking this course were at once thrown upon the magistrates, instead of calling upon the medical officer to do so, bringing him into collision with the guardians, throwing upon them the duty of calling in a physician in case of every person deemed to be a lunatic coming within their cognizance?—Yes, but I think it would be a great burden to the magistrates to have to go about to look after lunatics; I should think that a magistrate has the power now, if he have any knowledge of any lunatic to send for a medical man, but I think if you imposed additional duties on the magistrates they would not execute them.

Your Lordship will now go the county asylums?—Yes.

Have you any additional remarks to make with reference to the county asylums than those which you made the other day?—The county asylums are not under our immediate jurisdiction; we have little or no authority over them. Our duties are limited to one inspection in a year, of which

we make a very full report in the visitor's book, a copy of which is sent to the Commissioners.

Do you find them generally speaking well managed and conducted?—Certainly. Of course we have every now and then some criticisms to make, but generally speaking the system has worked exceedingly well, although they might be improved; I cannot but look back to the state of things as it was some years ago, and compare the condition of the paupers in the large county asylums now, with their condition as it used to be in the private asylums throughout England and even in the metropolis.

Will your Lordship first look at the Bill which has been brought into this House, intituled "A Bill to amend the Law concerning the Providing of Lunatic Asylums for Counties and Boroughs, and the Maintenance of Pauper Lunatics." Will you have the goodness to give your opinion as to any of the provisions of that Bill which you think might be amended or improved, and whether you think those provisions are necessary?—The first clause we consider a very desirable clause; at present, no borough can be annexed to a county, without the consent of the visitors, and we consider it very desirable that in many instances, this annexation should take place, although much opposition has been made to it. In a variety of ways, we cannot but think that it is very desirable if those words "the consent of the visitors of an asylum were omitted, and that power were given to the Secretary of State to effect an annexation."

I may mention to your Lordship that that provision of the Bill has been objected to on the part of some of the counties, as they think that an additional burden and additional inconvenience may be thrown upon them by requiring them, without their having a voice in the matter, to furnish additional accommodation for the lunatics belonging to a borough in the county; does your Lordship think that that objection is so serious a one as to countervail the recommendation which you have made?—I really think not with reference to the pauper patients; I can hardly think that any additional expense would be thrown upon them.

Where a reluctance has existed to allow of an annexation, do you think that it has arisen principally on the ground of the expense that would be occasioned to the county, or because the county justices would not like the interference

of the borough?—I think that that has a great deal to do with it. I do not think that they like a divided authority, or the interference of strange magistrates. I think that there is very considerable jealousy between the borough and county magistrates.

It is desirable that a large borough, such as Birmingham or Hull, should have its own asylum; but when we come to very small boroughs, it is perhaps hardly desirable; the number of patients is so small that it would put them to very great expense to have a very large staff for a very small number of patients, because the staff that is good for 100 would be wanted for 50.

I suppose that your Lordship finds where lunatics are kept together in large numbers, the management is much more economical, and the medical superintendence is far superior to what it is when they are confined in very small numbers? Precisely so; for instance, we think that a medical man can manage, as we said in 1844, 250, and it might go so far as 300, but beyond 300 I am perfectly convinced that it is impossible for any medical man to pay adequate attention to every case; for unless in the management of lunatics, you have what the Germans call the individualising system, viz., that the medical man should know every patient, and see every patient, and constantly direct his attention to him, you cannot effect any great or permanent cure.

It would seem to follow that whenever a borough has not 300 lunatics to provide for, it is better for the lunatics, and more economical for those boroughs, that the lunatics should be confined in the county asylum? where the number is not very large—I think so certainly.

And therefore a power of annexation should exist in the Secretary of State?—Yes, I think so.

I should just like to suggest that there should be a clause, making it a part of the duty at the quarter sessions to read openly in court the "entries" which are made by the Commissioners at their several visitations once a year. The Commissioners go down to an asylum, and they make very full reports; they state all that they see worthy of commendation, and they state also what they see that ought to be altered, and sometimes they make most important suggestions, and I really think that the reports of the Commissioners ought to be made known to the public at large and to the ratepayers, and I know no other way of doing that than by insisting that they should form a part of the public business at quarter sessions, and in all cases

be read. I know that in some places the parties do so ; in one or two instances I believe they do so ; but I think that it should never be dispensed with. In one or two instances, in one particularly which has occurred very lately, the most important reports of the Commissioners were positively suppressed to this extent, that the medical officer of the asylum was not allowed to see them. Upon application he was refused, and the medical officer came to our office the other day, and we gave him authority to read the reports that we had made. His remark was "I am exceedingly glad that you have let me see them, for they contain some very important remarks, and I now understand why I was not allowed to see them, it was because you have strongly recommended that there should be a great increase in the medical staff. I have always said the same thing, and if I had had the support of the Commissioners in Lunacy, that increase must have been granted. I have been left out of it for a number of years." Therefore I think that there ought to be a clause, making it imperative that our reports should be published for the general information of the country.

If a visiting physician were also appointed to an asylum, would not that in some degree effect what your Lordship wishes to arrive at?—No ; I should say that in nine cases out of ten, a visiting physician is very objectionable, and I do not think it would be at all agreeable to the Superintendent, for it would divide the responsibility. A visiting physician could only come in occasionally, and if he does come in, it is to interfere with the system. I do not think that a visiting physician would in the least relieve the labours of the Medical Superintendent, but that it would tend very much to impede his course of treatment, and certainly not a little to lighten his responsibility. But depend upon this, that if you increase the salaries of these gentlemen, you must take care to affix to them the most serious responsibility, and that you do not allow any person to come in who can in the least divide that with him.

I wish to express my opinion, that the period for the superannuation of the attendants and the medical officers should be fixed, and that it should not be left optional to the visitors ; at present, it is not to be allowed under 20 years. If it is not a fixed period, it is optional with the visitors whether they will or not grant a superannuation at that time, and I think it is but just that persons engaged as the Superintendents are in these most onerous and serious duties, should have before them

a certainty of the time at which they can retire ; and there is another reason for it, it has been found to operate injuriously ; it operates very beneficially for the useless and the idle, for a man of that character will feel that when his period of 20 years is up, the magistrates will say, " We may as well get rid of this idle man and get a better ;" but if there happens to be a really valuable man who is to them almost indispensable, they will say, " Well, but he is too good to lose ; we will keep him on for a year or two longer ; we cannot part with him." A medical man of great eminence said to me the other day, " I have known it to happen in the case of a very valuable servant, when his period of superannuation has come round, he would be put off for a year or two years."

Do you propose that every officer or servant of an asylum should after 20 years' service be entitled to claim his superannuation if he wishes to do so ?—Yes, if his character were good.

Would you retain the limitation of the right to persons of 50 years of age ?—No, I think that would be very hard indeed ; and reference must be had to the peculiar nature of the duties they have to perform ; it is not like the ordinary work in a banking house, or in a Government office, nor even is it like the toil they have to undergo in military or naval service ; but the wear and tear upon the nervous system of the attendants and the Medical Superintendents is such, that it may be considered almost a standing miracle that so many of them can bear it for the whole 20 years, before they arrive at the period of superannuation. I have received accounts from the attendants and from the medical men themselves, and their statements go to show that in proportion to the whole number, there are more cases of insanity arise among the medical men who are so employed, and the attendants who are so employed, than from any other class. The Committee can well imagine what it must be to be perpetually in the presence of lunacy, some of them in the most exalted state, and some most despondent, but never hardly to pass a night in which they are not disturbed—never to associate with others, nor to have any holiday or recreation, or any relaxation of any kind—to be perpetually in the presence of these lunatics—it has the most lowering and most miserable effect upon the nervous system.

Is it not the fact that the Act gives a discretion to the magistrates, not only to the time when the superannuation may be given ; if an officer is 50 years of age, and has served

20 years, but also as to the amount of the superannuation. Would you take away the discretion in both cases, allow every officer and servant in a lunatic asylum to demand, after 20 years' service, a fixed amount of superannuation?—No, I would not go to that extent; I think that a discretion might be left with the authorities, and I have no doubt they would act with liberality. I would not make it imperative that the officer must have attained 50 years of age, but I should propose that the period of superannuation should be fixed at 15 years instead of 20.

You would give to every officer a right to claim superannuation, subject to the discretion of the magistrates, as to the amount, after 15 years' service?—Yes.

Have any cases occurred in which a Medical Superintendent has wished to retire after 20 years' service, and has not been allowed his superannuation?—I know of no case within my own knowledge, but I think that there must have been some, from the communication that was made to me by a Medical Superintendent.

Is there any particular reason which induces your Lordship to press this upon the Committee?—Because I think it would tend to improve the status of the medical men.

What is your Lordship's opinion as to clause 4?—That is entirely a new proposition, and everything that is said with regard to metropolitan examiners will be applicable to the provincial examiners.

Does your Lordship approve of that clause?—I cannot say that I do altogether; it is a new principle.

I believe that clause was suggested by the Commissioners?—Yes, but it was suggested as a substitute for another which was proposed to us, and which we considered altogether impracticable; but knowing that the public opinion was such that something must be proposed to meet it, it was suggested to the Secretary of State at that time, but it was suggested only as an expedient, with a view of satisfying public feeling, and not with any hope that it would be really effective. But when it was suggested, there was no intention that the medical examiner should be a person to assume a status, and become a permanent officer, and make more visits than one; the object was that the medical examiner should make one visit.

You were stating the object of the recommendation of the Commissioners with regard to the appointment of examiners?—Yes; I judged that the Secretary of State was anxious that

a patient should be seen as soon as possible after his admission into some licensed house, and the proposition was, that it should be done by the Commissioners themselves, or under their authority, but I think we showed that it would be almost impossible for them to do it, and if a body of inspectors were appointed, the expense would be very great, and, after all, the work would be imperfectly done; it was therefore at once set aside, and this was suggested as a substitute, which will have the effect of introducing a medical examiner into the house, who will, in all probability, see the patient within the first 24 hours of his or her incarceration; but there is a great doubt whether it would be of any value. I am sure that no medical man would say that any person, seeing a patient within a very few hours after his or her admission, would be able to form any estimate whatever of the condition of that patient. It is just possible, supposing that a person who was as much in possession of his senses as any gentleman sitting at this table had been seized and shut up in an asylum, that if he could retain his equanimity and composure, and might be able to state the case to any person who came to see him, it is possible that the examiner might say that he ought to be set at liberty. In 99 cases out of 100, no medical man could give an opinion upon the state of a patient within 24 hours after his or her reception.

That he is not required to do by this Bill?—But he must see the case within seven days and report.

Is this medical examiner to go into the houses where there is already a resident medical practitioner?—Certainly.

What is the object of it?—The object is, I believe, that some independent party, some person who had not signed the certificate, and had no connexion with the patient, should go into the house and see what was the state of the patient, and make a report thereon to the visiting justices, and to the Commissioners in Lunacy. This is done in order to guard the public against possibility of any person being unduly confined.

Does that apprehension arise out of any evidence which the Commissioners have obtained, that the certificates which have been given, and upon which patients have been confined, have been incorrect, and that persons have been improperly confined?—I think I stated to the Committee some time ago, that in all our experience we had not found more than one or two instances in which that had taken place without some plausible grounds for shutting up a person; but we believe that in many instances patients have been detained

beyond the time at which they could have been set at liberty. I believe that there are but few improper incarcerations. Even at first we had scarcely any instances whatever, and we believe that the certificates have been a very considerable protection, and that they have done their work.

Then, what is the necessity for the appointment of these medical examiners in London and throughout the country, to form an additional check upon the improper admission of patients into lunatic asylums?—I do not see any necessity for it. The Honourable Member says, that the suggestion came from me. It is true that it did so, because the Secretary of State submitted to the Commissioners the project of a Bill in which it was provided that the Commissioners should, either by themselves or by paid inspectors, see a patient within a very short time after his or her admission. The Secretary of State seemed to consider it indispensable, and as we found we could not do it as he suggested, I suggested that it might be done in this way. I have since heard that it has given very great offence indeed to the proprietors of the licensed houses. In order to do the thing well, the medical examiners must generally be persons residing in the neighbourhood of these houses, and if that be so, almost in all cases they will be pretty nearly of the same class as the man who signs the certificate; and I doubt much whether their opinion would be a bit better than that of those who sign the certificates. The medical examiner might not be under the same influences, but I do not think that he will do any good; his opinion will hardly be worth having, because most people when the opinion comes, will say he cannot know much about it; he has had very little time to form it. I do not think it would be of much value for the protection of the patient, neither do I think that the proprietors of the licensed houses ought to take such exception to it, for I do not believe it will cause them any annoyance whatever. The Bill is so carefully worded, that the medical examiner going into a house can only just see the patient and report on him; he makes no report upon the other patients, nor upon the house, and I do not see what injury could arise to the proprietor, nor do I see any benefit that will arise to the patients. It would be very objectionable that the medical examiner should be allowed to make a second visit; he would acquire thereby a certain status in the neighbourhood, and a certain species of authority, like a public officer put there to control the asylum.

It has been stated, that either the Commissioners or others

acting for them should discharge that duty for the protection and care of the patients ; but if the labours of the Commissioners are so increased, would your Lordship deem it preferable to have an increased number of Commissioners, acting solely upon their own responsibility, instead of deputing to others the power which they themselves possess ?—I think it is of very great importance that all duties of visitation, and the duties of seeing patients, should be executed by the Commissioners themselves ; it is a matter of the greatest importance that persons having authority and position should be the persons to visit the houses ; and I am sure, if ever it were to grow into a system that it were to be done by delegates and inspectors under them, that we should not possess one-half of the efficiency, nor have one-half of the influence over the houses that we visit ; therefore I would object to any such body of persons being appointed ; if these duties were imposed upon the Commissioners, there is no doubt that an additional number of Commissioners would be required ; but I am in great hopes that if the duties which we now have of visiting the workhouses be no longer assigned to us, and either the workhouses be put under proper superintendence, and converted into real lunatic asylums, or the patients be sent to the county asylums out of the workhouses, and we are relieved of that duty, the Commissioners will be equal, not only to the work they now have to perform, but to a great deal more ; and if, in addition to that, the proposition that I have made of instituting public asylums for the middling and other classes were carried into effect, not only would the Commissioners be equal to their duty, but in the course of a very few years they could reduce the staff to one-half what it now is. As it is, we can perform all the duties that are now assigned to us, and the additional duties which appear upon the face of this Bill, provided we have not to go through the duty of visiting the workhouses ; if that be continued, and it must be done by somebody, I think the Committee will be satisfied, after the statements I have read to them, that we shall not be able to do it.

When your Lordship speaks of additional duties, by the 12th Report it appears that there were 1,070 new admissions into the metropolitan licensed houses, and 1,253 into the provincial licensed houses. I understand your Lordship to suggest that instead of having medical officers, you would have the Commissioners make the visits ?—No ; we could not introduce any such system unless we had a staff of Commissioners equal in amount to a regiment ; we could

not have such a system as to enable us to see every patient within a few days of his or her admission. The number of admissions into the private asylums of England and Wales is nearly 2,000 every year, and it would be perfectly impossible for any small body of men, to see every patient within a very short time after his or her incarceration.

Does not it follow that the system of medical examiners is the only one which is practicable to carry out?—If you insist upon having the patient seen within a very short time, I see nothing for it but a system of medical examiners as proposed by the Bill.

Or an addition to the staff of the Commissioners?—Yes, a much larger addition. There are many objections to enlarging the staff of the Commissioners, and one will be clear to the Committee at once; we are already very considerable in number; there are six paid Commissioners and three or four unpaid. We constantly meet at the Board, and it begins to approximate to a parliament, and we all know what a parliament is.

Assuming that 2,300 is the number of patients admitted into these lunatic asylums, two visits are to be paid by these medical examiners, one within seven days, and the other before the expiration of three months; that would make 4,600 visits to be paid by the medical examiner; have you calculated what the expense of that would be?—Yes. With regard to an increase of the Commissioners, I think that we could not carry out the business of the Board when the numbers had been greatly increased. At present we work together with the utmost harmony; but that arises from there being two or three persons on that Commission who have been there from the beginning, and we have a traditional policy at the Board. The members belonging to it have not all been appointed at once, but they have been gradually added on one after the other, and there has been a perpetual nucleus round which they have gathered, and we have got into a system of working very harmoniously together. This Commission has subsisted for thirty years, and we never had but one division.

If this duty were imposed upon the Commissioners, would it not be performed by the medical Commissioners?—No; it might be done by them, but there again comes in the objection which I so strongly entertain, and I protest against bringing the medical profession so forward that they only are to be the judges of insanity.

Does not that apply to the clauses of this Bill, that require that the examiners shall be medical examiners?—Yes, because

the medical man is the only person in the neighbourhood of these asylums who is likely to have given any attention to the matter. You could not impose upon the magistrates or the resident gentry such a duty, but it must be put upon a person who is generally resident, who will take a fee for his duty, and a medical man is almost the only person to do it.

Could not you attain this object by insisting by law upon some religious care of the patients by some chaplain who could equally form a judgment?—I should have more distrust of the religious gentleman than I should have of the medical man, and I say that with the deepest respect for the ministers of religion. The difficulty of it would be incalculable if you were to throw the duty on the parochial clergy in the neighbourhood, who are already over-burdened.

In your opinion there is no necessity for this additional provision, as the system of certificates, as it at present exists, subject to proper visitation of the Commissioners in Lunacy, affords a sufficient check against improper detention of lunatics in asylums?—I think it does; but if the public feeling be so strong that something must be done to meet it, I think that this is as harmless a proposition as can be made; I do not think that it will do much good, and I cannot see that it will do any harm whatever to the proprietors.

What expense do you think it will involve?—I think it will be very small. Take any county, for argument sake, in which there are half a dozen private asylums. The magistrates in quarter sessions would appoint to each house an examiner, probably some medical man resident in the neighbourhood for convenience, and for the sake of economy. This gentleman would receive within a few hours of the arrival of a patient notice from the proprietor that there was a patient there, and he must go and visit him. He would charge the expenses of his journey, and his fee, £1 1s. I should suppose that these houses many of them would receive six, seven, or eight patients in the course of a year, say ten; that would be at the rate of ten guineas a house, and suppose there were six houses, about sixty guineas a year, besides the travelling expenses.

Are not the medical men required by this Bill to pay two visits?—Yes, and that would double the estimate, if they paid the second visit, which I think altogether unnecessary, and instead of being sixty guineas, it would be 120 with the other expenses.

Ought we not to consider the aggregate expense, and not the expense of any particular asylum, the whole number of admissions being, I believe, 2,300 a year?—Yes, and then I

think that you might fairly estimate that each admission would cost about two guineas.

In addition to the travelling expenses?—No; I would say about £5,000 a year altogether over all the counties.

We say that we know of no cases in which there have not been some good and fair grounds for the original incarceration, but we have heard of cases in which people have been kept beyond the time. I think the examination they undergo is as good as you can get, for the knowledge of lunacy among the great proportion of medical men in this country is so very small, that they are quite incompetent to give an opinion, except upon general principles and their knowledge of mankind; but in very few instances does it occur that a person has been shut up without some appearance of justice.

I understood you to say that persons are detained longer than they ought to be?—It has been so.

Therefore, section 4 would have no reference to that class of cases?—None at all.

Do not you think that there are many cases in which the medical examiner, never having seen a patient before, would be unable to determine upon one visit whether the state of mind was such as to require the patient to be detained in a lunatic asylum?—It is perfectly impossible, unless the case were manifest and unmistakeable, and that nobody would hesitate about it; for instance, if there were any doubt about it, no medical man would venture to give an opinion, and he would write to say, "I find the patient so and so; but whether the patient is sane or insane, I cannot say."

In those cases the visit would be perfectly useless?—Yes; and the only security that it might offer would be that the parties, fearing a third party might come in, might exercise more caution.

In giving the original certificate?—Yes.

Does your Lordship think, that if two medical men had signed a certificate a third medical man would not be very unwilling to set his authority against theirs?—I think that in many instances he would fall in with the certificate. There is always this danger, that the medical examiner in the neighbourhood might either be in a state of enmity or friendship with the keeper of the house.

Is there any advantage in these medical examiners being medical men; why not lawyers?—I would not object to that if we could find a person in the neighbourhood who being resident would take a fee for it.

As to the 26th clause, "Proprietors of licensed houses, and

persons having charge of single patients, to furnish information as to payment for patients"? That is a very important clause; for the proprietors and resident superintendents are always unwilling to give that information; but the Committee will see how indispensably necessary it is. We shall not pry into the fortunes or into the pecuniary circumstances of all the patients; but we have a right to know this. If we go into a house and see a gentleman, a patient there, we may think he is very poorly kept, and then we say, "Pray what does this mean?" and they refuse to tell. If his relatives were paying 5 guineas a week, and he were living at the rate of 20s, his treatment would be most cruel, and we have therefore a right to know the sum that is paid for each patient. There is another clause that I shall take the liberty of proposing to the Committee. It arises out of communications made to us relative to the corrupt agreements made between medical men and proprietors of asylums. We brought the matter before the Home Office, and lately we have received a communication from the Home Office, requiring us to draw a clause to that effect, and thinking it is a very important matter, we shall therefore suggest to the Committee a clause to prevent corrupt agreements between the medical men and the proprietors of asylums.

(To be continued.)

On the "Supplement to the Twelfth Report of the Commissioners in Lunacy to the Lord Chancellor." Ordered by the House of Commons to be printed, 15th April, 1859.

Without any wish to derogate from the dignity of human nature, or to question the capacity of the race for virtue and intellectual greatness, we, as lookers on in the world, and as reviewers of its principles and practices, are compelled to adopt that view of man and his transactions which every sound divine is called upon to pronounce from the pulpit, that imperfection and iniquity cling to him in all his doings. Individual self-examination exposes the spirit to the accusations of an internal monitor for shortcomings and misdoings; and when a just and searching inquiry is instituted into the