Asylums and their Neighbours. Can Neighbours help? By Rev. H. HAWKINS, M.A., Chaplain of Colney Hatch Asylum.

> "What can man's wisdom do
> In the restoring his bereaved sense?"
> KING LEAR.

The aim of this paper will be to endeavour to show that neighbours of public asylums for the insane—occasionally using the term *neighbours* with some latitude—may, under certain circumstances, contribute to the well-being of selected patients, by services of various kinds; moreover, that not only residents in the vicinity, but also friends at a distance, may have a share in alleviating the affliction, perhaps even of promoting the convalescence, of inmates of these hospitals. Among 65,000 persons approximately computed as the number of patients in asylums and other institutions, there are many who are absolutely friendless and unvisited. Some come from distant counties, or even from foreign countries, beyond the range of practicable visits; others have outlived their relatives and friends; or these have, in course of time, discontinued their intercourse; others, again, saddest case of all, are perhaps deliberately deserted, purposely shunned, from selfish apprehension lest responsibility of maintenance or of assistance should be incurred, or from reluctance that their acquaintanceship with an inmate of a lunatic asylum should become known. So, from one cause or another, there are not a few patients who become, abruptly or gradually, cut off from communication with the outside world, practically forgotten as "dead men out of mind." Yet, in many of these, there must surely exist yearnings after sympathy and that disinterested friendship which, "all for love and nothing for reward," would take a personal interest in themselves.

Could not these longings for friendship, in some cases at least, be gratified? Might not a patient, unvisited and friendless, yet capable of appreciating personal attention, be sometimes placed in communication with a kind-hearted sensible neighbour, willing, as it were, to adopt any solitary inmate who would be cheered by the sympathy of even volunteer friendship? In order that a relationship of this kind should be established between an asylum and its neighbours, it would be necessary that a mutual friend, acquainted, through official connection, with the institution, and with the circumstances

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of its inmates, and intimate also with the neighbouring residents, should act as a link between the two.

Before referring to some of the ways in which a kindly-disposed neighbour might pay considerate attention to selected patients, it should be premised that it is assumed, as matter of course, that all volunteer action must be carried on with the concurrence of the authorities, and in strict conformity with regulations. Only thus would amateur aid be acceptable, or, indeed, tolerated. The lady visitor (usually it would be a lady) must claim no exemptions or special privileges. She must accept precisely the same conditions of attendance as the humblest friend of any poor patient.

She must visit on appointed days, within prescribed hours, in the common room, and, in all other particulars, must pay careful attention to the rules for visitors.

On such terms how much real good might be effected by a self-constituted friend, conscientiously abiding by the requirements of the institution with which she might be associated.

To a patient who rarely or never had been visited, what a novel pleasure it would be to find some one from the outside world taking friendly interest in herself. How greatly would any unaccustomed little gift be appreciated. The prospect of another visit, even after a long interval, would help to relieve the monotony and dulness of asylum life. It is not too much to assert that such sympathy might impart fresh interest to existence, and, in some cases, accelerate recovery, or render less wearisome continuance within hospital walls during the period of necessary sojourn.

Others, however, might be willing to shed a ray of light into the gloom of some solitary heart, who yet, either from distance or other cause, could not pay *personal* visits. Could not the post be made a substitute? The writer knows instances in which a kind letter from an *amie inconnue*, whose face has never been seen, has brought no trifling delight to a patient. A Christmas, Easter, or birthday picture-card, an almanac, a book, a few stamps, a ribbon—trifles of small cost, or great value, would be welcome gifts to many. A newspaper, especially if illustrated, would almost always be acceptable. For to many, now, as in Cowper's days—

> "'Tis pleasant through the loopholes of retreat,
> To peep at such a world, to see the stir of the great Babel,
> To hear the roar she sends through all her gates."

To some a communication through the post might come almost as an angel's visit.

We will now consider the sad case of friendless convalescents. It is not, probably, a mistaken assumption that convalescents, after mental illness might sometimes, if not frequently, be sooner restored to society if they had either home of their own, or friends able and willing to receive them, or to provide them with suitable situations. Many, now in asylums, might perhaps be discharged with profit and comfort to themselves, if occupation adapted to their strength and capacities, together with kindly treatment, could only be ensured for them on leaving. This supposition, no doubt, implies that there are patients who, after having become, to a certain point, convalescent, are yet still retained under treatment. But what is to be done? Take the case of delicate females, who having regained their sanity have no suitable home to which they can resort, or friends who would afford them temporary shelter. Such convalescents are often physically unequal to the effort of struggling for daily bread, and if they made the attempt, would almost certainly fail in the endeavour. Besides, in addition to other impediments, the prejudice caused by their residence in an asylum must be taken into account. There is, indeed, that *perfugium miseris*, the Workhouse, and it is just because that refuge would be their sad alternative, that authorities of asylums, from motives of humanity, sometimes continue to afford shelter to friendless convalescents—young women without relatives or friends, deserted wives, respectable widows, governesses, sempstresses and others—rather than consign them to the Workhouse.

In a well-ordered asylum, convalescents of weakly physique enjoy many privileges which, those especially of gentle nurture, would grievously miss if they were transferred to the "House." The social classification, the comparative privacy, the comforts and refinements, the recreations and indulgences which alleviate the sadness of their position, might not be attainable there.

Of course, the large majority of convalescents are discharged, and return to their houses and occupations. The difficulty is with those patients of feebler organisation, who, having regained their mental health, have no private resources, and are unable to earn their living.

For such as these, a House of Rest, between the hospital and outside world, would be simply invaluable. The Conva-

lescent Home, as supplementary to the asylum, is still a missing link. Who will help to supply it? Might not neighbours of public asylums become their benefactors by providing, for some at least of the friendless invalids on their discharge, temporary rest, and opportunity of resuming, at less disadvantage, their place in active life?

> "'Tis not enough to help the feeble up,
> But to support him after."

That invitation of the Saviour to His harassed followers is wonderfully soothing—"Come ye yourselves apart and rest awhile."

To suggest another mode of possible usefulness. Would it be quite out of the question for neighbours, under special circumstances, to give a trial as domestics in their households to female convalescents, of whose complete recovery and fitness for service they might receive a confident medical guarantee? The question of their reception must obviously in each case be entertained with caution. But a generous venture, in offering work and a home to one upon whom, from the nature of her recent malady, many would look askance, would be an act of real benevolence.

It has been suggested that residents in the vicinity of asylums might occasionally show no little kindness by inviting well-behaved convalescents to spend a few hours away from the hospital.

By communication with the authorities, such a treat might be feasible. A genial welcome, the use of a room, a comfortable tea, some pleasant conversation, would afford genuine pleasure, and the hope of a renewal of the invitation would be cherished as a prospect of an agreeable change from the monotony of their ordinary surroundings.

Indirect yet efficient help might be given to asylum work by the recommendation of the vocation of attendants to intelligent and respectable young men and women in quest of situations. Instead of dissuading qualified persons from taking employment as attendants, their advisers might render good service by directing attention both to the honourable character and the responsibility of the duties, and also to the reward and prospects attached to their efficient discharge.

Some neighbours might, in other kindly ways, express their sympathy with their afflicted brethren, lying as it were at their gates. Choice fruit and flowers from hothouses and gardens, presents of game (how characteristic is the Queen's

remembrance of the hospitals!), musical instruments, pictures, books, permission to selected patients to walk in their parks or grounds; such-like attentions, besides conferring pleasure, would furnish welcome proof that, by the donors, the claims of neighbourhood were not forgotten.

There is yet another mode in which help might be given—by assistance rendered to the amusements of the inmates. The offer of an entertaining lecture, of a reading, or a song at an evening's entertainment, might be cheerfully accepted.

The writer of this paper is able to testify to the gratification afforded by "neighbours' help" in many interesting missionary addresses—in numerous sermons by various preachers. It is obvious that the ministrations of strangers must be peculiarly welcome to congregations, usually restricted to the services of the clergyman of the institution, and debarred from seeking in "pastures new" occasional variety. Many who have thus visited asylums have been pleased beyond expectation with the orderliness and attention of their hearers, and doubtless have conveyed to others their favourable impressions.

Might not gentlewomen in search of employment, and maintenance in some cases, find their vocation in the wards of asylums? The work even in the lower departments would be more congenial to many than domestic service, which has been suggested. There are, in the larger institutions, various offices of higher and lower grades, in which a lady's cultivation and refinement would exercise wholesome influence, both upon the patients and her fellow-attendants. She would find no work which has not already been undertaken by Christian women for love's sake. The tenure of office is more certain, less dependent upon contingencies and upon the will of individuals, than in private households. Wages are, of course, proportionate to the position held, and gradually rise to a certain point; after long meritorious service there is prospect of a pension. Education, intelligence, and good behaviour would probably ensure promotion to the higher posts. The hours of daily duty, though long, are definite; there are intervals of leave and an annual holiday. Work in the wards offers unusual opportunities of ministering comfort to the afflicted, and is commended to the consideration of gentlewomen in quest of occupation by which they could earn their living.

Communities of women already occupy usefully various fields of labour within the English Church. For several years

past important London hospitals—University, King's, Charing Cross—have availed themselves of the services of Sisterhoods or religious communities in their wards. The day may come when their work will be welcomed in and for asylums also, as supplementing the labours of those who are otherwise working on behalf of the mentally afflicted. As prevention is proverbially better than cure, neighbours' help might often be usefully given in promoting the health, in the full meaning of the word, of those whom their counsel would be likely to benefit. Friendly hints, for instance, by district visitors and others, on the importance of temperance in all its bearings—of fresh air, personal and household cleanliness, cheerfulness, domestic comforts and embellishments—might sometimes lead to results which would be safeguards, to some extent, against mental disturbance.

But, if in no other way, could not neighbours help the asylum by their prayers? Could they not offer, with special application, petitions for the mentally afflicted? The remembrance of "the afflicted and distressed in *mind*," in one of the Church's prayers, touched the heart of poor Charles Lamb. Supposing that aid of other kinds were not in a person's power to offer, or, if offered, were not accepted, still an affirmative reply might be given to the question, "Can neighbours help?" if heed were given to Hooker's remark, "When we are not able to do any other thing for men's behoof, prayer is that which we always have in our power to bestow, and they never in theirs to refuse."

If this brief paper has succeeded in any degree, in showing that communities within asylum walls, and their neighbours outside, might stand towards each other, not only in kindly, but also in helpful relationship, it has not missed its mark. Asylums and their neighbours may be *mutual* benefactors. For asylums are not only harbours of refuge, but beacons of warning—of warning against all violations of the laws of moral and physical health; moreover, they are monitors of the blessing of sanity. There is a line in a modern poet which asserts that "the world 's a room of sickness." It is no mean privilege to illumine, by benevolent words or deeds, or by the secret influence of intercession, one of its darker recesses. Many persons, gifted with kindness and discretion, living in the neighbourhood of public asylums would, it is believed, be found willing—with the sanction and under the control of the authorities—to be fellow-helpers in their work.

Before concluding, allusion may be permitted to one or two objections which might be taken, by some persons, to the introduction into asylums of volunteer visitors. It might be feared that they would have a tendency to interfere with the discipline of the establishment, by not strictly conforming to its rules. Their honorary share in the work might cause amateurs (as some might apprehend) to consider themselves privileged to act, more or less, independently of ordinary regulations. In so doing they would become hindrances instead of helps. For, clearly, asylums for the insane are no places for the exercise of undisciplined guerilla ministrations.

But, in reply, it may be sufficient to remark that the good sense of such neighbours as would presumably be invited to become visitors might ordinarily be relied on, to respect and adhere to prescribed requirements; and if, in any instance, a volunteer deviated from the instructions laid down for the guidance of visitors, he or she would be amenable to the usual consequences of breach of rules.

Another objection which might present itself might, perhaps, arise from a fear lest the visits of amateur friends should be too emotional. Not having, like relatives and old acquaintances, subjects of mutual interest in the past for topics of conversation, it might be supposed that the very strength of sympathy which would induce such persons to be willing to visit, would, occasionally, cause them to address themselves unduly to the emotions of patients. But, in fact, many of the patients' own friends, by indiscreet allusions to personal or domestic incidents, would often be far more likely to do harm, than visitors more remotely connected. Moreover, the same authority which would check any breach of discipline, would be in readiness to repress the exercise of any injurious influence which a visitor was known to exercise. It is, however, confidently maintained, as the result of some experience, that, with due care and proper selection, the benefit of neighbours' friendly visits would gradually be found to constitute no inconsiderable item in the comfort and happiness of those patients who, in this manner, became recipients of "neighbours' help."

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