

THE JOURNAL OF MENTAL SCIENCE.

[*Published by Authority of the Medico-Psychological Association
of Great Britain and Ireland.*]

No. 145. NEW SERIES,
No. 109. APRIL, 1888. VOL. XXXIV.

PART 1.—ORIGINAL ARTICLES.

*On the Present State of Lunacy Legislation in Scotland; a
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(*Read at Meeting of Medico-Psych. Assoc., held in Edinburgh, Nov. 10, 1887.*)

The object of the present paper is to bring under the notice of this meeting the present state of Scotch Lunacy Legislation, especially as it affects our Chartered Asylums. For some years back efforts have from time to time been made to introduce various Bills into Parliament, calculated, more or less, to interfere with the present position of these institutions, and during the past Session one of these Bills has passed into law. It was evident to those who took any interest in this measure, that a strong feeling existed in regard to the extent to which Parochial Boards had control over their patients, and it was evident, sooner or later, that more extensive and more comprehensive legislation would ere long be forced on the notice of the public. That we should be prepared for this, it seems very desirable that we should know exactly our position, or how existing institutions are likely to be affected by such legislative efforts. But to understand this thoroughly, it will be necessary to consider the changes which have taken place in the Statutes affecting lunacy in Scotland since these were enacted in 1857, and this I will now do as briefly as possible.

It is unnecessary to go minutely into the origin of the Lunacy Act of 1857. Shortly, it may be stated as follows: Public attention having been directed to the treatment of the insane, and especially the insane poor, in private asylums, a Royal Commission was appointed to examine into the whole subject, and their report confirming in a great measure the grounds for complaint, the Lunacy Act of 1857 was passed,

whereby the management of the insane poor was in a great measure transferred from Parochial Boards and placed in the hands of Independent Boards, chosen out of the Prison Boards elected by the Commissioners of Supply and Magistrates of Burghs. These District Boards were empowered to erect and manage the district asylums wherever it was found necessary to provide them. But at the time of the passing of this Act certain asylums were already in existence, which had been discharging for many years the functions of the district asylum, but on the footing of hospitals and charities, and so in order to protect these institutions, certain clauses were introduced into the Act, preserving the independent management of these establishments and arranging for the District Boards of the counties in which such institutions existed to contract with these Royal or chartered asylums, to the extent of the available or possible accommodation, before proceeding to assess for the erection of district accommodation. Forfarshire was in the unique position of having within its boundary two such asylums, those of Montrose and Dundee, affording ample accommodation for the whole county.

It is of importance that this transference of the care of the insane poor from the Parochial Boards to Independent Boards, specially elected for the purpose, should be kept carefully in view, for it is from this that much of the subsequent Lunacy Scotch Amendment arose, in the efforts from time to time made by the Parochial Boards, to recover the control of the insane poor of which they were then deprived. But it is of importance also that we should clearly understand what patients or persons were comprehended under the term lunatic, previous to the passing of the Act of 1857, and we find valuable information on this and similar subjects in the report of the Royal Commission, published in that year. From this it would appear that the insane poor were regarded as divisible into three varieties—the insane, the fatuous, and the weak-minded; and in the Poor-Law Amendment Act 8 and 9 Vic., c. 33, it was enacted that “whenever any poor person, who shall have become chargeable on any parish or combination, shall be insane or fatuous, the Parochial Board of such parish or combination shall, within 14 days of his being known to be insane or fatuous, provide that such person shall be lodged in an asylum or establishment legally authorized to receive lunatics;” but

the weak-minded persons were regarded as suitable to be placed in poor-houses, as they were regarded as among the persons for whose accommodation such buildings were erected. But it seems, farther, that with the consent of the Board of Supervision, Parochial Boards might have the power of dispensing with the general rule of sending pauper lunatics to asylums, when they were of opinion that such lunatics did not require to be confined, and to provide for them in such other manner as should be sanctioned by the Board of Supervision. Doubts and uncertainty, however, existed as to these powers, and as these doubts were never authoritatively settled, they unquestionably led to the unsatisfactory results which the investigations of the Royal Commission laid bare, or at least largely contributed thereto. But again we find that "until the passing of the Act for the amendment of the laws relating to the relief of the poor, in 1845, there were comparatively few poor-houses in Scotland. Those existing, however, seem to have been all, more or less, in the habit of receiving insane or fatuous paupers, without any warrant from the Sheriff." The practice thus established, was in some instances continued to the date of the examination by the Royal Commission, so that at the time of their inspection, in some of the larger poor-houses "a considerable number of insane and fatuous patients were found, none of whom were under warrant" (p. 128). Again, "After the passing of the Poor-Law Act many new poor-houses were erected, chiefly with a view of affording a test for poverty, and thus diminishing the amount of out-door relief." And in these poor-houses many of the Parochial Boards provided or set apart accommodation for the insane poor, in the expectation of saving expense and avoiding the necessity of sending them to public asylums or licensed houses or private asylums. In some poor-houses these patients were mixed with the ordinary poor, in others separate wards were provided for the insane. When mixed with the ordinary poor, the patients were generally of the harmless and imbecile class, but where there were separate wards all sorts of cases, recent and chronic, were received; and the wards thus appropriated for them became in a measure lunatic asylums.

But it would appear that legally it remained with the Sheriff of the county to determine what kind of cases might be received into the poor-houses, although the practice

varied in different counties. Some ruled that only harmless and incurable cases should be admitted to poor-houses, others trusted to the cases being selected by the Board of Supervision, and so abuses gradually crept in. The Sheriffs seem generally to have relied too much on the certificates of the parochial surgeons. Thus, though in one county "the certificate granted by the parochial surgeons declares that the patient is incurable and harmless, and not in a condition to be benefited by being sent to an asylum," the Royal Commission found it to be not an uncommon practice in that county to send recent cases to the poor-houses, to retain them if quiet and manageable, and to send them to asylums only when they became refractory and violent. Indeed, they were informed that the very cases sent away were principally those that were incurable and unmanageable, and that recent cases in which there was hope of improvement were retained, to save cost of transmission and the greater cost of maintenance in an asylum (p. 131).

But in some poor-houses, insane and fatuous paupers were received without any license from the Sheriff, and in one it was found that the patients were admitted not only without a license, but even without a medical certificate. The Report, indeed, points out that there was "scarcely a poor-house in the kingdom in which there was not several insane persons who have been irregularly admitted in the same way. The cases thus received were not by any means always harmless, nor of such long standing as to be considered incurable. On the contrary, they were frequently violent and occasionally recent. Such cases were most commonly found in those poor-houses in which ostensibly only incurable and harmless patients were received. It was a common practice, for instance, to send an individual who had been suddenly seized with mania to the poor-house for temporary care, with the intention of transmitting him to an asylum as soon as the necessary arrangements were made. But when once he was placed in the poor-house it was not unusual to detain him there until it was seen what form the malady would assume" (p. 133).

Another matter closely bearing on this, and to which the Royal Commission specially directed attention, was the question—Who were entitled to remove unrecovered patients from asylums? At the time of their investigations "the person by whom the patient had been placed in the asylum,

and who was responsible for the payments, alone possessed the power to remove him before recovery, which he might do in opposition to the opinion of the medical superintendent; and in regard to pauper patients, the custom of the medical superintendents of the chartered asylums was to refuse every application for removal in such cases, even by the friends and relatives of the patient, unless made by the inspector himself. This was by no means universal, however, "but it was a frequent custom of inspectors themselves to remove patients even against the most strongly expressed opinion of the medical officer of the asylum. In so doing they acted on their own responsibility, or on that of their Parochial Boards, and independently of any authority derived from either the Sheriff or Board of Supervision. In this way large numbers of patients, including many of very dangerous character, were removed from the chartered asylums to licensed houses, private asylums, poor-houses, or their own homes. The motive for removal was solely that of economy" (p. 221). And they further pointed out that "the inspectors of the poor, acting in the name of their respective Parochial Boards, practically assume an unwarrantable power over pauper patients; in keeping them at home or placing them in the houses of strangers, in selecting asylums for them, in removing them from asylums, in transferring them from one asylum to another, and generally in contravention of the Statutes, from a public asylum to a licensed house, and in transporting them, when English or Irish paupers, to the country of their birth. Neither the Board of Supervision, the Sheriff, nor the managers or medical superintendents of chartered asylums, who may collectively be considered as the guardians of the insane poor, practically exercise any check on this inordinate power assumed by inspectors" (p. 253).

Now these particulars are instructive. They represent the evils which the Act of 1857 was passed to correct, but all history shows that social states and conditions are very apt to move in circles, and it seems to be a question well worthy of consideration, whether under the recent lunacy amendments we are not rapidly drifting back into the original state of matters. The patients chosen for the lunatic wards of the Dundee poor-houses, although certified by the parochial medical officer, are virtually selected by the governors of the poor-houses and the inspector of poor, and

in this selection they are guided almost entirely by the consideration of the manageableness of the patients. At the time of the Royal Commission inquiries, the means of providing for the insane poor consisted of three sorts—chartered asylums, private asylums, and wards attached to certain of the larger poor-houses; and one of the first difficulties experienced by the Scotch Lunacy Board was to ascertain how far the last of these were legally to be regarded as public asylums or statutory accommodation for detaining the insane poor, and how far they could be looked on as permanent accommodation. On the subject of lunatic wards of poor-houses, the Board of Lunacy gave no uncertain sound—for in their earliest records it was clearly pointed out that such were not then regarded as permanent means for the treatment of lunatic poor. In considering the meaning of the term public asylum, in their first report, at page 7, it is stated: “We are of opinion that the lunatic wards of poor-houses could not be comprehended under this definition, and in this view we were confirmed by the opinion of eminent counsel.” And in farther considering how far they had power to license such lunatic wards, it is said (p. 8): “All doubts as to the powers of the Board on this head were removed by a short Amendment Act passed on 2nd August, 1858, by which we were empowered to grant licenses for the reception of pauper lunatics into wards of poor-houses for a period of five years, from 1st January, 1858, as it is expedient that provision should be made for the custody of pauper lunatics till district asylums are ready for their reception.” And the report continues: “It thus follows that the term existing accommodation is applicable only to public and private asylums, but as the licenses to private asylums receiving paupers are granted only until district asylums are provided, the term ‘existing’ accommodation is practically limited to that afforded by public asylums.” This opinion, however, was not acquiesced in by certain parishes, as it was claimed for the Edinburgh City Poor-house and Barony Poor-house, Glasgow, that they were included as existing accommodation, and although the Barony Parish applied for a license for their wards they did so “on the stipulation that this step shall not be held as implying an abandonment of their claim.”

But the view then entertained by the Board of Lunacy is even more clearly brought out in their remarks on poor-

houses (p. 64). Considering lunatic wards of poor-houses as a mere temporary measure, they refused the application of the Dundee Parochial Board, to license part of their poor-house for the reception of fatuous cases, and wrote as follows: "We desire particularly to direct attention to the fact that the Legislature draws no distinction between the different classes of lunatics, and does not in the remotest manner countenance the view that poor-houses are to be considered and licensed as proper places for the reception of incurable or harmless lunatics. The only reason assigned for conferring on the Lunacy Board the power to license these wards at all is, that they may be available for the reception of patients until the district asylums are erected. Accordingly we are clearly of opinion that we would be departing from the course traced out to us were we to license any poor-house in a district in which there was already sufficient asylum accommodation, and it was on this account that we refused to grant a license to the poor-house of Dundee on the application of the Parochial Board of that parish. But, apart altogether from the instructions conveyed or implied by the preamble of the Amendment Act, we entertain the firmly rooted conviction, founded on our experience of the nature and management of the lunatic wards of poor-houses which we have seen in operation, that the extension of this form of accommodation for the insane poor is very far from being desirable, and it was with great unwillingness that, yielding to the pressure for accommodation, we granted our licenses to poor-houses even in those districts in which the necessities of the public imperatively demanded the concession. At the same time we must explicitly declare that we are very far from holding the view that all the insane poor should be placed in asylums, if these establishments are all to be included under one category and conducted in the manner that has hitherto prevailed. On the contrary, we admit that it may be expedient to provide different kinds of accommodation for patients affected with different forms of insanity, and we have advocated this view in various preceding parts of this report. We are, however, most decidedly of opinion that it is not desirable that any class of the insane poor should be placed in establishments under the immediate jurisdiction of Parochial Boards." And as a sort of explanation of this view they add: "The lunatic wards of poor-houses owe their origin, not so much to any

wish to provide for the proper care and treatment of the insane poor, as to the idea that their institution would involve a saving to the parish. We are desirous to give all due weight to the argument of economy, and we, therefore, at once admit that it is the duty of the Parochial Board to provide for the insane poor in the cheapest manner consistent with the proper care and treatment of the patients. There is, however, only too much reason to fear that economy obtains from Parochial Boards more than its due share of consideration, and consequently that the interests of the patients are too often sacrificed to those of the rate-payers" (p. 65). It is of the utmost consequence that the views entertained and the position then taken up by the Legislature should be thoroughly understood, because it is the clue to all the subsequent changes which have been effected, and that principally by parochial influence, by the various Amendment Acts.

As early as 1860, it would appear that the system of licensing lunatic wards was looked upon with greater favour, for in the second report of the General Lunacy Board, at p. 90, it is said that "Although desirous to see the practice checked of converting the wards of poor-houses into substitutes for asylums" they were not prepared to recommend that the power of licensing wards in poor-houses should be altogether withdrawn from them, as the accommodation which some of them afforded was "sufficiently appropriate, and the spirit displayed by the Parochial Board sufficiently liberal to warrant their being continued under certain restrictions." "We would, however, propose that they should be licensed for the reception of selected cases only." This question was, however, further complicated by the doubt which arose whether patients not in asylums (especially apparently the fatuous and weak-minded) should be regarded as lunatics at all, or whether they should not be handed over to the care of the Board of Supervision. We accordingly find the Board of Lunacy (p. 4, 1861) writing: "By Statute our Board is made responsible for the proper care and treatment of all pauper lunatics who it is enacted shall be sent to the asylum for the district in which the parish of the settlement of such pauper lunatic is situated; but we are at the same time authorized to permit a Parochial Board to dispense with the removal of any pauper lunatic to an asylum, and to provide for him in such other manner and under such regulations as

to inspection and otherwise as we may sanction ;” and they suggest that “all dubiety on this point would at once be removed by making the definition of lunacy include any person certified by two competent medical men to be a lunatic, an insane person, an idiot, or a person of unsound mind.”

This was given effect to in the Interpretation Clause of the Amendment Act of 1862 (25 and 26 Vic., Cap. 54), the same Act which rendered legal the opening of lunatic wards of poor-houses for the reception and detention of such pauper lunatics only who are not dangerous and do not require curative treatment. The importance of the changes here introduced cannot be overrated. In the first place the definition of the term lunatic in the Act of 1857, and which, based on the Scotch law, meant and included “any mad, or furious, or fatuous person or person so diseased and affected in mind as to render him unfit, in the opinion of competent medical persons, to be at large, either as regards his own personal safety and conduct or the safety of persons and property of others, or of the public,” was changed so as to include “every person certified by two medical persons to be a lunatic, an insane person, an idiot, or a person of unsound mind,” terms evidently taken from the English Lunacy Statutes, and having no meaning as interpreted by Scotch Law, and the existence of these mental conditions were to be established, not by the state of the patient, but by the certificates of two medical men; and, in the second place, poor-houses, which were originally built for the poor and weak-minded, were to have wards specially and permanently set apart for the reception of the insane and fatuous, hitherto regarded as proper occupants of lunatic asylums; but only when these were found not to be dangerous and not to require curative treatment.

We accordingly find that one of the principal subjects referred to in the Commissioners’ Report of 1863 was the permanence given to the lunatic wards of poor-houses by this Statute. Thus, at p. 46, they write: “The disposal of the insane poor in lunatic wards attached to poor-houses, which hitherto has been a question of only temporary importance, from the period of their legal recognition having been limited by the Legislature to five years from 1st January, 1858, has now become one of much greater moment from the permanent character given to such accommodation by the Lunacy Amendment Act of last Session.” “By the

3rd Section of this Act," they write: "we are authorized to license lunatic wards in poor-houses for the reception and detention on the order of the Sheriff of such pauper patients only who are not dangerous, and do not require curative treatment, subject to such rules and conditions as the Board may prescribe; but it is also provided that we may, if we shall be satisfied that good reason exists therefor, continue all licenses that have already been granted to lunatic wards of poor-houses," and the 4th Clause of the Act "empowers us to sanction the reception of pauper lunatics into lunatic wards of poor-houses without the order of the Sheriff, according to forms, and subject to regulations approved of by the Board." But while the Board are careful to point out that "it is thus clearly enacted that all future licenses to lunatic wards of poor-houses not already licensed shall authorize the reception *only* of such patients as are not dangerous and do not require curative treatment," they seemed to think an exception against such restriction existed in the case of poor-houses already possessing licenses for the reception of patients suffering from all forms of insanity, and afterwards officially known as parochial asylums, such as the Abbey and Burgh parishes of Paisley, Barony, and city parishes of Glasgow, and the parishes of Greenock and Falkirk. But while acknowledging the powers, as it were, thus forced upon them, the Board continue to deplore the distinction attempted to be drawn between patients who are not dangerous and do not require treatment, and those who, beyond all doubt, belong to the opposite category, inasmuch as such attempts tend to encourage the belief that safe detention is all that is required for the proper care and treatment of the former class. "No idea," they write, "can be more unfounded and none more pernicious to the welfare of the insane. Under judicious management and provided with proper means of occupation, the great mass of the insane are capable of being actively and usefully employed, and in a manner calculated to afford them positive enjoyment in life. In these respects there is no difference between the so-called dangerous and non-dangerous class, or between the curable and incurable. It follows, therefore, that before we can separate patients into distinct categories, for which different kinds of accommodation should be provided, we must regard the incurable as beyond the pale of humane and enlightened treatment. Such a

result would be most deplorable, but it is one which is directly encouraged by the system of attaching lunatic wards to poor-houses. The chief motive of Parochial Boards in providing such accommodation is undoubtedly economy. They are of opinion that the rate of maintenance in poor-house wards will be less than in asylums, but this belief can be realized only by limiting the appliances of treatment and restricting the comforts and enjoyments of the patients, or by selecting only those patients who require no special attendance, nor any particular care." In the sixth Report of the General Board we find all lunatic wards of poor-houses admitting patients for curative treatment formally recognized under the name of parochial asylums, and by this term they have ever since been known; and from the same Report we learn that although it was expressly enacted that the lunatic wards of poor-houses were licensed for the reception of such patients only as were not dangerous and did not require curative treatment, yet a table is given showing that in 1863, 14·3 per cent. of the male, and 10·6 per cent. of the female admissions into these wards were discharged recovered. So early did this piece of legislation from this point of view prove a failure.

But other signs of defective legislation soon appeared. In the seventh Report the important fact is referred to that "in the ordinary wards of poor-houses" there were "many paupers who, in a medical point of view, ought to be intimated to the General Board as lunatics, and to this fact they directed the attention of the Board of Supervision; but as the Statute declared that the term lunatic shall mean and include any person certified, said the Board did not consider itself called on to consider as lunatics such paupers as have been placed in poor-houses through inability from mental disease or incapacity to take care of themselves, and who are persistently detained notwithstanding their request to be discharged, provided they have not been certified as insane in terms of the Statute." So early do we find the altered definition leading to results only to have been expected.

In Forfarshire the development of the lunatic-ward system received an impetus from the transition state in which the Dundee Asylum then was, for although there was ample accommodation for all the pauper lunatics in that county in the Montrose and Dundee Asylums, yet the Dundee parishes were put to considerable inconvenience in consequence of the

want of convenient accommodation in the Dundee Asylum, the directors of this asylum being unwilling to increase their accommodation in view of having shortly to remove the whole buildings to another site. This was used as a lever for the establishment of lunatic wards, by the parishes interested, and at last successfully; although with great reluctance on the part of the General Board, who were further constrained to grant their license by the want of a regular contract between the District Lunacy Board of the asylum. "Had a contract existed," they wrote (p. 10), "binding the asylums to receive all the pauper lunatics of the district, the necessity of providing accommodation in lunatic wards of poor-houses would probably not have been felt, and this retrograde measure might then have been avoided." Be that as it may, the licensing of these wards retarded the erection of the Dundee New Asylum by at least ten years.

And now the steadily increasing accumulation of the pauper insane in asylums and lunatic wards of poor-houses began to attract attention, for although the boarding-out of patients in the country with relatives and strangers was much discussed, up to the last few years but a very small percentage of the insane had been thus disposed of, as will be seen from the accompanying tables. These tables have been rearranged chiefly from the General Board of Lunacy Reports, because, according to the tables there published, in the earlier reports patients in parochial asylums are classed under the lunatic wards of poor-houses, in the later reports under public and district asylums.

From this it will be seen that between the years 1859 and 1888 the number of pauper patients in Scotland has risen from 4,737 to 9,406; that the number of these patients placed in district and chartered asylums has risen from 1,594 to 4,965; that the number of those in institutions under the immediate management of Parochial Boards, namely, lunatic wards of poor-houses and the so-called parochial asylums, has increased from 833 to 2,301, of the latter number 857 being in lunatic wards of poor-houses, and 1,444 in parochial asylums. That of the 526 pauper lunatics in private asylums in 1859 none have been so disposed of since 1877. But while 33·4 per cent. of the pauper patients in 1859 were boarded out either with relatives or strangers or were staying alone, this percentage fell steadily to the year 1880, when it reached only 17·9 per cent., and has since been rising again till it

reached 22·7 in 1887. There can be no doubt that the decrease in the percentage of patients boarded-out was in a great measure the cause of the increase of patients in asylums, and it is interesting to consider the means devised for lessening this accumulation. These were principally introduced in the Act of 1866, and the first that deserves notice is that curious Clause 7 of 29th and 30th Vic., c. 51, whereby the detaining power of the Sheriff's warrant after three years can only be continued by an annual certificate granted by the medical officer of the asylum. It will be within the recollection of many of us that this clause was so little regarded as necessary by the officers of asylums that when the Act was passed many omitted to grant the necessary certificate, and so additional Parliamentary power had to be obtained to render the detention of many patients legal; and in the following year the Commissioners report "that the certificates were regularly granted, and in no single instance has a patient been discharged from an asylum through the refusal of the superintendent to certify that he was a proper person to be detained."

This was in a great measure only to be expected. For my own part, as yet no patient has ever left the Dundee Asylum through the operation of this clause, because, holding as I do that a superintendent of an asylum in Scotland is only justified in detaining a patient so long as he is a lunatic in terms of the common law of Scotland, as soon as he ceases to be dangerous to himself or others, or offensive to public decency, as the case may be, and that however weak-minded he may be, otherwise he ought to be discharged, and so to my mind this clause has always appeared useless. Indeed, the introduction of this clause would appear to have been an attempt to imitate the French practice, "where the magisterial authority expires every six months, but with this difference, that whereas in France the prolonged authority to detain a patient is, or was, every six months, a new magisterial act in Scotland, it is simply a continuation of the original order." It appears to me that it would have been much sounder legislation to have made the determination of the Sheriff's order complete after three years, and the renewed detention possible only under new and independent certificates and Sheriffs' orders.

Another and more important means for lessening the accumulation of pauper cases in asylums was the power con-

ferred on Parochial Boards by Sect. ix., 29 and 30 Vic., c. 51: "At a duly constituted meeting to direct that any pauper lunatic (not being a lunatic committed as a dangerous lunatic), with whose maintenance it is chargeable, and who is detained in any asylum or house, shall be discharged or removed therefrom," unless this is stopped by the superintendent appealing to the General Board of Lunacy that the patient is dangerous or otherwise unfit; and by Sect. ix., 29 and 30 Vic., c. 51, conferring similar powers on Parochial Boards to remove from the poor-roll any pauper lunatic in any asylum or house for whose maintenance it is responsible, and to entrust the disposal of such lunatic to any party who shall undertake to provide in a manner satisfactory to the Parochial Board for his care and treatment subject to the same restrictive action on the part of the superintendent as above.

But it cannot be said that these various means of procedure at first tended much to lessen the accumulation of the insane poor, as from the Commissioners' Report for 1874 we find that while 128 private patients and 21 paupers were removed from asylums by the friends, 99 only were removed by minutes of Parochial Boards. Of late years these have been more numerous. In 1886 126 private patients were removed by friends and 411 by minute of Parochial Boards; 256 remaining pauper lunatics and 156 being removed from the poor roll, when in 1887 the corresponding numbers were 122 private and 370 paupers so removed, 204 remaining pauper lunatics.

But another question now presented itself for consideration, namely, in what light ought the parochial asylums to be regarded, and the erection of the Lenzie Asylum forced this on the notice of the authorities. In referring to Glasgow District and the increased accommodation provided by Lenzie, and the probable means of further extension, the Commissioners (17th Report) write: "Such accommodation may be provided either by Parochial Boards in parochial asylums or lunatic wards of poor-houses, or by the Directors of the Royal Asylum in an extension of Gartnavel, and failing either of these courses being adopted, it will be incumbent on the District Board to erect a new district asylum. The approaching opening of the New Barony Parochial Asylum has led us to consider very seriously the position occupied by parochial asylums. Hitherto these

institutions have stood in a subordinate position, being, as it were, mere portions of the poor-house, and under the same management. This new asylum, however, constitutes a complete independent establishment. It is situated at a distance of several miles from the poor-house, is larger than any of the district asylums hitherto erected, and possesses a greater extent of land than any of the district asylums, with the exception of those of Inverness and Argyll. In theory, however, the asylum remains part of the poor-house. Again, it is a question whether a Parochial Board, which is annually elected, and which does not possess the same elements of stability as a District Board, will be found well calculated for the proper management of an establishment which has so different a sphere of usefulness from that of a poor-house, and which, instead of being used as a test for poverty, must be conducted on the principles of liberality, which the treatment of the insane demands." Whatever answer was found to this, there can be no doubt that the erection of the Lenzie Asylum was an eminently successful step, from the parochial point of view, in enabling the Barony Parish to retain the complete management and control of all their patients, and no doubt incited other parishes to the same line of action. But the erection of these parochial asylums led to results which did not seem to have been foreseen, namely, that before being free from assessments for the erection of district asylum accommodation, these asylums would have to secure the position of being district asylum accommodation, and the Parochial Boards managing them be constituted District Lunacy Boards. It was this difficulty that led the Barony Parish to apply to Parliament during the past Session for *inter alia* powers, that for the purposes of the Act of 1857 the Barony Parish should be disjoined from the Glasgow District, and should form a separate district; that the Woodilee Asylum should be a district asylum for that district with the Parochial Board, with respect to the Barony District, to be the District Board as defined by the Act of 1857. The necessity for this Bill was superseded by the introduction of the District Lunacy Bill, which passed through Parliament, and which provides that the General Board of Lunacy shall have power, on the application of the Commissioners of Supply of any county interested, or the magistrates of any burgh interested, or the Parochial Board of any parish or combination interested, to alter or vary the said districts,

either by combining or dividing counties, or parts of counties, and where any such altered or varied district shall consist of one parish only, to appoint the Parochial Board of such parish to be the District Board of such district. We have here the concession desired by the Barony Parish granted, subject to the approval of the General Board and sanction of the Secretary of State. This will no doubt satisfy the large western parishes, but there are signs already making themselves visible that other Parochial Boards are not satisfied, and that especially where they are concerned with chartered asylums a strong feeling is being manifested that they should have something to do with the management of these institutions by being represented on their directorate. Whether such an addition to the asylum managers would really affect the functions of these institutions must be regarded as very doubtful; but it would certainly be one step further in conceding to the Parochial Boards the control of their patients which it was the object of the original Act of 1857 to guard, and it may well lead us to inquire whether these continued concessions, which have characterized every Amendment Act since 1857, are not calculated to break down the whole protective features of that Act. It seems clear that further legislation, and of a much more comprehensive character than we have had since 1857, will soon be attempted, and it will be well for all connected with chartered asylums, if not also the district asylums, to be ready to act. One point seems certain—the question of how to provide for the gradual accumulation of the chronic insane is one which will soon force itself on public attention. The attempt to meet this by the system of lunatic wards in connection with poor-houses, as practised in Dundee, seems to me little better than a violation of the principles of the Act of 1857. I have elsewhere pointed out that the patients selected for removal, are in many instances those who would benefit most by being left in the asylum, and that in other instances many are removed before their curability can have time for being tested, and further that the principle which regulates their selection being merely that of their manageableness has led to the shuttlecock treatment of many cases to which reference has been made in the last report of the Dundee Asylum.

Appended are three tables of interest in connection with the above remarks :—

I.—Distribution of Pauper Insane in Scotland.

Year.	Total number of Pauper Lunatics.	In Chartered and District Asylums.	In Parochial Asylums.	In Lunatic Wards of Poor-houses.	In Private Asylums.	Boarded with Relatives.	Boarded with Strangers.	Staying alone.	Per cent. in Chartered and District Asylums.	Per cent. in Lunatic Wards of Poor-houses and Parochial Asylums.	Per cent. Boarded out and with Relatives.
1859	4737	1594	—	833	526	1135	358	91	33·6	17·6	33·4
1860	4980	1687	—	795	621	1482	330	65	33·9	15·9	37·7
1861	5226	1859	—	864	656	1432	354	61	35·5	16·5	35·3
1862	5257	1946	—	841	683	1384	328	75	37·0	16·0	34·0
1863	5289	2020	—	838	690	1338	334	69	38·2	15·8	32·9
1864	5283	2019	—	878	707	1274	343	62	38·2	16·6	31·8
1865	5320	2122	490	420	671	1226	361	50	39·5	17·1	30·7
1866	5392	2299	497	428	559	1168	389	52	42·6	17·1	29·8
1867	5490	2354	436	572	560	1133	384	46	44·9	18·3	28·6
1868	5594	2607	440	558	441	1081	417	50	46·6	17·8	27·7
1869	5745	2950	437	570	267	1067	414	40	51·3	17·5	26·5
1870	5994	3163	451	573	307	1031	433	36	52·7	17·1	25·0
1871	6197	3547	553	574	54	986	446	37	57·2	18·2	23·7
1872	6286	3572	544	630	77	963	461	39	56·8	18·7	23·2
1873	6368	3609	561	615	94	960	496	36	56·6	18·4	23·4
1874	6472	3676	670	556	82	930	519	39	56·8	19·0	22·9
1875	6539	3698	748	565	77	875	562	—	56·6	20·1	22·0
1876	6661	3934	760	573	7	843	544	—	59·1	20·0	20·8
1877	7191	4083	1038	651	1	858	560	—	56·8	23·5	19·7
1878	7426	4304	1092	644	—	857	528	—	57·9	23·2	18·7
1879	7690	4496	1139	657	—	865	530	—	58·4	23·4	18·2
1880	7899	4569	1229	676	—	855	560	—	57·9	24·1	17·9
1881	8238	4666	1342	714	—	906	610	—	56·6	24·9	18·4
1882	8575	4939	1350	718	—	950	618	—	57·6	24·1	18·3
1883	8710	4924	1377	716	—	916	777	—	56·5	24·0	19·4
1884	8889	4961	1398	719	—	949	862	—	55·8	23·8	20·4
1885	9036	4991	1435	748	—	935	926	—	55·2	24·1	20·6
1886	9306	4967	1445	836	—	967	1091	—	53·3	24·5	22·1
1887	9406	4965	1444	857	—	972	1168	—	52·7	24·5	22·7

III.—Showing number of Pauper Patients removed to the Lunatic Wards of the Dundee Poor-houses during various years from 1864 to 1887 from Dundee Royal Asylum, average annual number of Pauper Patients resident in the Asylum, and proportion of Patients removed to Resident Population.

Year.	Removed to Lunatic Wards.	Average Resident Pauper Population.	Per cent. Removed to Average Resident Population.
1864	6	150	4·0 per cent.
1865	66	130	50·8 „
1866	28	115	24·3 „
1867	9	123	7·3 „
1868	8	135	5·8 „
1869	—	144	—
1870	37	131	28·0 „
1871	8	123	6·5 „
1872	11	133	8·3 „
1873	16	139	11·5 „
1874	21	139	15·1 „
1875	12	148	8·1 „
1876	16	166	9·7 „
1877	27	181	14·9 „
1878	18	191	9·4 „
1879	21	192	10·9 „
1880	13	202	6·4 „
1881	15	235	6·4 „
1882	15	264	5·6 „
1883	18	277	6·5 „
1884	39	280	13·9 „
1885	92	254	36·2 „
1886	25	233	10·7 „
1887	45	240	18·8 „
	566	4325	= 13 per cent. of whole average resident population.