

THE MENTAL AFTER-CARE ASSOCIATION.

THE ANNUAL MEETING of the Mental After-Care Association was held in the Apothecaries' Hall on February 24th, 1922, under the Presidency of Dr. W. F. R. Burgess, O.B.E., the Worshipful Master. Sir Claud Schuster, K.C.B., K.C., Secretary to the Lord Chancellor, in moving the adoption of the annual report presented by Dr. Henry Rayner, Chairman of the Council, said:

It falls to my lot to move the adoption of this report.

I could have wished that the task had fallen to other hands. Someone, who had actual personal experience of asylum administration or of the cure of mental diseases, could have from the depths of his knowledge impressed upon you the lessons of the report with greater power of conviction.

Someone who was not in any way connected with the administration of the lunacy laws could have spoken with greater freedom.

Someone who was trained to speech rather than to silence could have pleaded the cause with an eloquence which I cannot summon to my aid.

It is my fortune and your misfortune that I have to address you as a bureaucrat—that is to say, a person, as I gather from the papers, of limited mental horizon, small intelligence, and closely restricted sympathies, or to speak more frankly, one whose acquaintance with this subject is derived in the main from books and papers and reports and the conversation of other men.

Now to one who depends for his knowledge in the main on the reports of the Lord Chancellor's Visitors and of the members of the Board of Control, what would be in this respect of the subject the most salient characteristic?

There is an old and hackneyed quotation which should be inscribed in the room of every bureaucrat, in letters I sometimes think of gold, and I sometimes think of lead.

“For forms of government let fools contest;
What e'er is best administered is best.”

I do not suppose that even when those lines were written they were intended to be—and I am sure that they now could not be—taken without some qualification. If you include in forms of government those rigid rules which appear in the Statute Book as regulating the law relating to lunacy, many of you think, I know, that they are capable of improvement—that in their endeavour at once to safeguard the community and to provide efficient protection for the liberty of the subject, they lay insufficient stress upon those curative influences to the use of which modern science looks forward with so much hope. On these matters I must touch but lightly, and I only do so at all for a purpose which will appear hereafter.

But with regard to the second limb of the maxim, in lunacy administration, as in many other fields of administration, it is certainly capable of being expressed slightly differently. Perhaps the poet would have expressed it differently had he not been constrained by the exigencies of metre. I think it might read—“What e'er is administered in the best spirit is best.”

What strikes me in the reports of the men of whom I have spoken is the spirit in which their work is approached, and the intense sympathy, descending even to the most trivial detail of personal comfort, which they evince in everything which concerns the welfare of those unhappy beings who are under restraint.

Such a spirit is the first essential—whether the restraint be exercised at home, in private institutions, or in the largest public mental hospital. No one says that the administration is not capable of improvement—that there is no carelessness, no hasty word, no neglect. In so difficult and anxious a service it would be wonderful if there were never cause for complaint. When we are dealing with creatures so helpless it would be tragic if no complaint were ever made.

Still, the essential fact remains that so long as a mental patient is under the charge of the law, his every act and deed is watched, his every need provided for.

Consider what it means when a human being, who has passed through a paroxysm of this awful disease and is pronounced cured, or sufficiently recovered to be discharged from custody, receives his liberty. Think how helpless he must be when he re-enters the world from which he has been secluded. If he was engaged in business, he has probably lost it during his seclusion. If he was a worker with his hands, he has lost touch with his old associations, in some sense he has lost

some of his former skill, and if this stood alone, he would then find it more difficult than most men in obtaining employment.

Unhappily, it is not these causes alone which retard henceforth his progress in the world. There clings to him the stigma of lunacy. He was probably a trouble to his family and to his friends before they had to have recourse to the law to take his guardianship.

And then such patients—even those who have partially, or perhaps wholly, recovered—are not as a rule the most efficient citizens; they are not pleasant persons to deal with. They are too often whimsical, uneasy, restless and exacting. Sometimes the temptations to which they gave way and which led to their affliction are unpleasant in their consequences, and those temptations are only too ready to present themselves again when the restraint has been removed. Again, lunacy, through all the ages, has been looked upon by the world at large, who suppose themselves not to be lunatics, with an almost equal mixture of disgust and derision. When Shakespeare or Eurypides present us with the great tragic figures of Lear or of Hercules, they do indeed tend to purge our emotions with pity and with terror. But it needs the hand of some such great master to remind most of us of the awful nature of the affliction, and of the share which those so afflicted have in our common humanity.

Lastly, think how over all these poor people there hangs the personal fear of a recurrence of the malady. Think what this means. When some great shock, some great sorrow or bereavement comes upon any of us, the first unconscious cry is "I shall go mad," deprecating the extreme calamity which can fall upon a sentient being. Think what it must mean to go on day by day with the knowledge that in the past one has gone mad, with the haunting fear that one may go mad again, and to do this while struggling, with enfeebled frame and reduced resources, to earn one's own living, to recover one's self respect, to make oneself again an efficient and respected member of the community.

It is for these people that this Society exists and to their service that the efforts of its workers are devoted. There are many of them. In the last year for which figures are available, 7,206 persons were discharged from restraint as recovered, and 3,276 were discharged not recovered. Many of these people depend—if they are to retain the sanity which they have recovered—upon such assistance as the Society can render to them to put them on their feet again, and set them on their road to normal life.

Nor is this all. Medical science, as I understand, is more and more sanguine of the possibilities of recovery if the patient is treated in the early stages of the malady. If medical science is right in reaching that conclusion, an inestimable boon will have been conferred upon humanity, when opportunity offers to put the theory to the test. We shall have fewer permanent inmates of mental hospitals and homes, and fewer in single care. But, from the point of view of the Society, we shall greatly increase the numbers of those who are discharged and who have become objects for the Society's care. It may be said that, to some extent, they will not suffer the same disabilities as those who are discharged from certificates. I am not wholly confident that that result will follow. The mere association with the mentally afflicted, the mere fact that it has been found necessary to place a man—even at his own request—under institutional care, will, I greatly fear, put him under disadvantages in after life.

For all these people, then—those who have been already discharged, those who are now under care and will be discharged hereafter in due course, and those who, if the new system is put into operation hereafter, return to the world after but a short period of treatment—we appeal for help, and with that object I now move the adoption of the report.

Other speakers were—Sir James Crichton-Browne, F.R.S., Lieut.-General Sir John Goodwin, K.C.B., Dr. C. Hubert Bond, C.B.E., Mr. C. Marriott and Mr. Lionel Faudel-Phillips, and grateful references were made to the work of the Secretary, Miss E. D. Vickers, to whose untiring efforts the successful working of the Association is largely due.
