

THE ASYLUM CHAPLAIN'S COLUMN.

Religion, and its Influence on the Insane.

By the Rev. THOMAS DOWNIE, Chaplain, Royal Edinburgh Asylum, Morningside.

(*Abbreviated.*)

The principal work of the asylum chaplain is to preach and conduct the other exercises of worship in the institution, and, in his visits among the different wards, present the truths and consolations of religion to such of the inmates as are capable of comprehending them or being influenced by them. This is not, indeed, his whole work. If he is worthy of his position he will ever seek to be the friend of the patients, sympathizing with them in their troubles, talking with them on any matter in which they show an interest, and inviting their attention to such subjects as may divert their thoughts from themselves. But the chaplain must always remember that his distinctive ministerial duties constitute his main work. An idea, I find, prevails largely in the outside world, that religion is one of the prominent causes that lead to insanity. Frequently is the remark made to me by clergymen and others when reference is made to my work in the asylum, *Many of the patients will have had their reason upset by religious influences.* My reply to such an assertion is that, in very rare instances indeed, have I found religion the real cause of insanity. The origin of the widespread idea, to which I have referred, is not difficult to trace. When the brain, which is the organ of the mind, is in a diseased state, all subjects that come under contemplation are presented in a distorted or topsy-turvy aspect. It is therefore not surprising that religion, which appeals so powerfully to the intellectual and emotional part of man's nature, should sometimes be viewed by the insane with feelings of gloom or terror, the reverse of those which it awakens when the mental faculties are in their normal condition. The morose or depressing views which some patients take of religion are, I believe, in the vast majority of cases, the result and not the cause of their insanity.

All whose work calls them to minister to minds diseased know how powerfully the truths and consolations of religion

oftentimes exert a sustaining and enlivening influence on the patients of an asylum for the insane. It is true, indeed, that the mentally afflicted often show an utter indifference to religious subjects or are incapable of taking any interest in them. Some, again, will become rude and insulting in their language at the bare mention of religion in their hearing, and, in such cases, the chaplain will act wisely by guiding the conversation into subjects that have no religious reference. But, in many instances, the truths and comforts of religion are addressed to welcome ears, and often exert a soothing and curative influence. Frequently have patients who had recovered from their illness, and were about to leave the institution, expressed to me their gratitude for the benefit they had derived from the religious services held in it.

As illustrating the impression with which some patients, after they leave the asylum, look back on the religious exercises conducted in it, I may give a short extract from a letter which I received from a gentleman of high intelligence and culture, who had been for some time in the asylum, but had recovered. "I cannot close," he writes, "without expressing the pleasure I had, during my stay at Morningside, especially in the Sabbath services, which were to me like streams in the desert, or rather, I should say, like wells of living water. I am much impressed with the importance of your sphere there, and the noble opportunity of serving the Master in a position requiring much tact and wisdom. I know that not a few there are looking to you for spiritual advice."

I conclude by stating that I consider it most desirable that the religious services connected with an asylum should be conducted in a church or chapel, specially set apart for the purpose, and detached from the other buildings of the institution. When I began my work as chaplain at Morningside, divine worship was conducted in the amusement hall. To this arrangement I often heard the patients object as incongruous. A church was afterwards erected in the grounds, and the result has been most satisfactory. The walk out to church, instead of, as formerly, passing from one compartment to another—the sound of the Sabbath bell, and the sight of the pulpit and pews, all tending to call up the associations of bygone days, have had a quieting influence on the patients, and invariably the utmost decorum pervades the service.