Occasional Notes.

Female Nursing of Male Insane.

THE question of the adaptability or suitability of the method of female nursing of male patients in asylums, which is the all but universal practice in general hospitals, if not exactly what might be termed a "burning" question, has been forced into unexpected prominence during the present crisis of affairs. The military and naval requirements of a great country fighting not merely for a great ideal, but for, if perhaps the less noble, certainly the more urgent and so to say personal object of maintaining its own existence, necessitated the raising—and at very short notice—of our two great services to their maximum strength, and, therefore, a demand on the male population of the British Empire of such magnitude as has never been experienced before. This demand has, as we know, been promptly and liberally responded to, and by no class of men perhaps more readily than those serving on an asylum staff, over 3,000 of whom, as shown in the Journal of October last, have joined the colours. Such a drain on the at no time very ample nursing resources of these institutions could not fail to cause very serious inconvenience. The shortage occasioned had in some way or other to be compensated for, if even to only a limited extent. In some cases men of mature age have been employed to replace those who have left, but these are probably not procurable in any great numbers owing to the demand for middle-aged men for munitions and other work connected with the war, and also for doing the enormous amount of business-trade, agriculture, etc.-which must be carried on throughout the country generally. Consequently, resort to the employment of women as substitutes for male nurses has had in many instances to be adopted.

The time and the hour, therefore, were not inopportune for a discussion on this subject, not merely with respect to the propriety or otherwise of initiating a radical change of this kind in asylum nursing during circumstances of exigency, as at present, but as regards the merits and demerits of the deliberate and permanent adoption as a matter of principle of such a departure from the recognised practice, which still obtains in the large majority of asylums in all parts of the world, and independently of any compulsory influence such as just now exists. Dr. Robertson's paper has, in fact, appeared at just the psychological moment when minds are more or less in a state of preparedness to give the subject favourable consideration.

At a meeting of the Scottish Division at Larbert Asylum in November, 1901, Dr. Robertson read a paper on "Hospital Ideals in the Care of the Insane," in which he gave a sketch of the methods of nursing which had been adopted, and were in actual operation, in that institution for some two years previously. The nursing of male insane patients by females, although not an absolutely novel proceeding—for sporadic attempts in that direction of a tentative nature had been already essayed but not persevered in—seems to have been for the first time seriously and successfully employed in the Stirlingshire Asylum. At the commencement of his paper Dr. Robertson emphasised what he termed the dominating principle, which actuated him in his adoption of this system, namely, "the desire to make the asylum a medical institution, worked on the same medical principles and with the same nursing ideals as our great general hospitals." The measures which he proposed to himself, and which we may add he has successfully carried out, were, briefly: the abolition of single rooms, and the substitution of associated dormitories (single rooms he regarded as a relic of the old prison-like organisation of asylums); continuous personal supervision by night as well as by day, with a large increase of the night staff; the employment of female nurses on the male side, supplemented by a number of assistant matrons to supervise them, and to "do duty within the wards and among the patients," these officials to be well paid and regarded as filling highly responsible posts to which prestige and authority were attached, and to be selected from the ranks of trained hospital nurses. This last proviso he regarded as absolutely necessary, on the principle that "one can no more be a skilled mental physician without studying general medicine than a skilled mental nurse without studying general nursing." The new system seems to have worked smoothly and satisfactorily from the first, and after two years' experience of it Dr. Robertson was in a position to state that he had "no accident to record, no assault to describe, no scandal to report."

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In the discussion which followed the reading of the paper it is to be noted that, while there was some difference of opinion as regarded the details, not a single speaker expressed himself as opposed to the principle of the methods of nursing advocated by Dr. Robertson. The late Sir Thomas (then Doctor) Clouston, a clinician, as we know, of the very first rank, whose opinion must be estimated as second to none, mentioned how, when going round the wards of the Larbert Asylum at night with Dr. Robertson, he had been deeply impressed with the quietude, and with the practical success of the system which he saw in operation. He related one striking little incident: "Dr. Robertson had the bad luck to get one or two of the worse patients in Morningside. He was beyond measure astonished and exceedingly pleased to find a woman, who, when in Morningside, was a homicidal dangerous inmate and a most objectionable woman, and who when there never slept out of a single room, lying calmly and sweetly asleep in one of the big observation dormitories."

At the annual meeting in London, July, 1905, Dr. Robertson again brought the subject before the members in a paper, only a part of which was published, on "The Employment of Female Nurses in the Care of Insane Men in Asylums." His experience in the method had by that time become considerably extended, and so far from his opinion as to its value having been shaken as time went on, his belief in its excellence was stronger than ever. If support for his arguments was needed, it was ready to hand in the fact that a number of asylums in Scotland had adopted the system, and in none of those where the experiment was made had the practice been abandoned. One point that was brought into prominence on this occasion, both in the paper and in the discussion that followed, was what Dr. Bond called the "crux of the matter," viz., that to insure success the staff must be entirely female, and not mixed. In the early stages of the movement, when only tentative measures were being tried, at first attendants' wives were employed to take charge of the male patients along with their husbands; and, later, a mixed staff independently of any such relationship between the sexes. Each plan in turn proved more or less a failure. Hence Dr. Robertson came to the conclusion expressed in his paper, that "it is only when women are in complete and responsible

charge that the full benefits of the system of female care and nursing can be enjoyed."

A good deal of water has flowed under our bridges since then; and now, for the third time, the writer of the paper already referred to has come before the Association and presented the results of a more lengthened period of observation, and a riper experience of this method of nursing in all its details. The project is no longer a mere bantling of tender growth, as in the early years of its adoption; it has developed into a full-fledged scheme, gradually elaborated into its present condition of complete and thorough organisation. And no one who listened to Dr. Robertson's narration of facts regarding the high state of nursing efficiency which obtains in Morningside Asylum could be surprised at the warmth with which he advocated a trial of the plan in other asylums, could doubt for a moment that his efforts to achieve his object have been crowned with success. For many years, even in Scotland, Dr. Robertson had to fight an uphill battle before the system, which in his hands had proved so efficient, succeeded in winning the approval of his confrères and leading them to favour its adoption in the institutions under their charge; and the contrast between medical opinion on this subject such as prevailed in those early days (when the nursing of male insane patients by females was stigmatised by an eminent member of the specialty as "preposterous," and the adoption of hospital principles in asylums as "a great fad"), and that which is almost universally accepted in Scotland at the present time is best expressed in Dr. Robertson's own words: "This method of nursing is now as distinctive and as firmly established a feature of the Scottish system of care for the insane as the well-known Boarding-out System. It is employed in some measure or other in all but two of the important asylums of the country, and in these the superintendents have so far failed to introduce it, not because they were opposed to it on principle, but on account of structural difficulties with regard to supervision, housing, etc. This wonderful unanimity of opinion and practice amongst Scotsmen, whose national proclivities do not tend to concord, is remarkable testimony in its favour, and points to the manifest practicability and overwhelming merits of the system." He speaks in glowing terms of the beneficial results that have followed the employment of hospital-trained nurses in asylums, and does not hesitate to divulge the nature of his ulterior aim, and what he means to be the acme and crowning achievement of the task he has set before him, in these words: "The trend of events in Scotland has been such that this employment of female nursing in the male wards, when seen in its proper perspective, is found to be only a part of a much greater scheme or ideal that has flowed like a tide over the land—that of the Hospitalisation of the Asylum."

It is not a matter for surprise that a thesis such as this should be regarded by not a few as embodying views that are revolutionary in character, and to a great extent impracticable. And yet, there is the broad salient fact staring us in the face, that the system as advocated has been in practical operation for some years past in most of the asylums in Scotland, that there, at least, it can be demonstrated to be an unqualified success, and—a most important consideration—that none of those who have made trial of it would, on any account, revert to the old order of things. That one hard fact alone goes far to discount most of the objections which have been advanced against it, and to attach a merely academic value to unfavouraable criticism. And it was, perhaps, fortunate that in the discussion which followed the reading of Dr. Robertson's paper the expression of adverse opinion was in the hands of such able speakers as Doctors Soutar and Brander, than whom few, if any, are better qualified to take a rational view of any question that may present itself for their consideration, and to express their ideas in a fair, unprejudiced, and convincing manner and Dr. Robertson would himself be the first to welcome criticism from such a quarter. And yet there was no objection advanced by them which is not capable of being met and overcome in the practical working of the system. There is room, no doubt, for difference of opinion as to the relative superiority of male and female attendants, and there are few who would not be willing to admit that the male staffs of asylums at the present day, on the whole, discharge their duties in an excellent manner. But even if this were universally true, and if every individual male attendant were, as regards his capacity for the care and management of patients, on a par with an asylum nurse, still that would not invalidate the claim that as a system female nursing

is preferable. The chief difficulty is, perhaps, to be found in the fact that many, if not the great majority of, asylums are so constructed that the necessary adaptation for such a radical change would hardly be feasible. This is certainly a formidable obstacle, and in some cases probably insurmountable. Still, it might not be impossible to make such alterations in most of them as would admit of the new methods being even partially adopted. And in the case of new asylums being erected it ought in future to be made a prime consideration that they should be so constructed as to afford facilities for such a scheme of organisation in the nursing department. As a matter of fact it is scarcely correct to regard this method of nursing as exclusively Scottish, as since the year 1902 a system of nursing male patients by female nurses has come into operation in several of the London asylums. It was first started at Bexley, and was subsequently adopted in the Epileptic Colony, at Horton, and Long Grove. The villa system would be the ideal one for such institutions, each of the component buildings forming a unit in itself, having its own independent arrangements.

The sexual difficulty, on which sometimes stress is laid, cannot really be said to exist. As regards patients with propensities of this kind no one proposes that they should be put in the charge of females; in their case everyone is agreed that male attendants are necessary.

On the whole it is probable that most, if not all, of those who approach this subject in an impartial spirit and with unprejudiced minds, will come to the conclusion that Dr. Robertson has proved his point, and that the experience of Scottish asylums has established beyond cavil the advantages of a system which, without hazarding too confident a prediction, is not unlikely, sooner or later, to be generally if not universally adopted throughout the asylum service.

Part II.—Reviews.

National Association for the Feeble-minded. Annual Conference Report, 1915.

"The Methods of Examination best Adapted to Ascertain the Presence, or otherwise, of Mental Defect," formed the subject of