

ment, noticed by Dr. Alison, were remedied in England in 1876, but not yet in Scotland.

8. Scotch poor-law is in advance of English in allowing questions of chargeability to be adjusted between different localities in Scotland, without a removal, and so contains germs of total abolition of removal.

In conclusion, I would repeat what I said on this question some seven years ago, in a paper before the Statistical Society of Ireland. "The prestige of our legislation would be strengthened if we were able to have laws, like those relating to poor removals that affect the labouring classes in the whole three kingdoms, assimilated and reduced to an enlightened and beneficent code, by collecting what is best out of each of our laws in England, Scotland, and Ireland. A large cause of discontent would be removed, if we were able to say to the migratory labourers of these kingdoms: 'No matter what is your race or place of birth—no matter where you labour—your relations to the state in any calamity that overtakes you will be the same at Belfast, at Glasgow, and at Liverpool—in Dublin, in Edinburgh, and in London.'"

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X.—*On the Use of Education and Training in the Treatment of the Insane in Public Lunatic Asylums.* By Joseph Lalor, M.D., etc., Resident Medical Superintendent of Richmond District Lunatic Asylum, Dublin.

PINEL, who, in 1792, did so much to advance the disuse of mechanical restraint, and the substitution in its stead of moral influence and of kindness, has, with other valuable principles enunciated by him in reference to the treatment of insanity, made the important statement, that thirty years' experience had taught him "that a striking analogy subsists between the art of educating and teaching the young and that of managing the insane." Itard, in the early part of the present century, appears to have been the first to have tried the effect of education and training on an imbecile. The subject of his experiment was supposed by him to have been a savage, but Pinel more correctly considered the patient to have been an idiot. What has been done since the experiment of Itard, or what is being done for the education and training of idiots and imbeciles, in England and elsewhere, it is needless for me to say; and such institutions as Earlswood, Clapton, Lancaster, Colchester, Larbert, and others, do not stand in any want of my poor praise.

Dr. Earle and Dr. Brigham, of the United States, may be mentioned as amongst those to whom the introduction of school teaching of the insane in American asylums was due. Somewhere about 1835 Dr. Brown commenced his labours to promote mental culture and literary teaching amongst his patients at Dumfries. It appears by a statement at pages 92 and 93 of Dr. Brown's lectures styled *What*

*Asylums are and ought to be*, published in 1837, that the Richmond Asylum of Dublin had 130 out of 377 contributing to the support of the institution and their own restoration, and that in that establishment another principle, that of tuition, was directed against insanity, and that twelve were learning to read. Dr. Conolly, in his Report of the Hanwell Asylum for 1841-2, stated "that all his experience, obtained in the attempt at the instruction of the insane in that institution, was of a nature to encourage perseverance and an extension of them." From a paper published by Dr. Conolly in the *British and Foreign Medical Review*, January, 1845, schools for the insane and the idiotic appear to have been in very successful operation in the Bicêtre and Salpêtrière for some years previously and then. It would therefore be a mistake to suppose that education and training have been systematically applied to no other class of the insane than idiots and imbeciles, and that they are applicable only in their case. In more recent times so-called criminal lunatics have been recognised as a distinct class of the insane. I consider that education and training are most valuable agents in the treatment of the insane of all classes, whether simply lunatics, or idiots and imbeciles, or criminal lunatics, and that it expresses in name and substance what has been long known in reference to lunatics in general as to their moral treatment.

I propose to consider in this paper some of the general principles on which the education and training of the insane of the above classes can be dealt with most advantageously; starting with the proposition that education and training form the basis of the moral treatment of all classes of the insane. Commencing with the last-named class—that of so-called criminal lunatics, I adopt the division of criminal lunatics into two classes proposed by Dr. Orange of the Broadmoor Asylum:—(1) Those whose offences have been the direct result of their insane state, and who up to the time of the outbreak of insanity have in many cases led honest and industrious lives; and (2) those who have been certified to be insane whilst undergoing penal servitude in convict prisons, and who consist chiefly of habitual criminals whose offences against law and order are part of their every-day life, their habitual actions being anti-social. The first class may, I think, be very properly treated in district lunatic asylums, and not dealt with as a distinct class. As regards the second class, there are unquestionably great disadvantages in mixing them with the general inmates of a lunatic asylum. But systematic and skilled education and training are obviously called for in the case of all inmates of asylums, who whether from insanity or criminality may be classed more or less as criminal lunatics, and who are prone to breaches of the moral laws. That there are large numbers of the class referred to in the district lunatic asylums of Ireland is well known, as is also the great insufficiency of the means of educating and training them.

The Charity Organisation Society of London, after very prolonged inquiry, conducted with peculiar advantages for obtaining information, have come to the conclusion that voluntary charity has not proved equal to providing a remedial machinery for the training of imbeciles and idiots coextensive with the evil, and that such provision cannot be made without the intervention of the state. The

society recommends that the administration of such provision should be conducted by governing bodies composed of representatives of the local magistrates, representatives of the guardians and persons appointed by the crown, and that its cost should be met partly out of local rates and partly out of the public revenue. I think municipal bodies should be represented on the governing boards; and whilst I concur in the other views above set forth by the Charity Organisation Society, I dissent entirely from an opinion which they have expressed, that idiots and imbeciles should be treated distinctively from other classes, and that they ought not to be associated with lunatics in asylums. Indeed, I would disapprove of the introduction of any system that would make provision for the care and training of idiots and imbeciles of the poorer classes, distinct in the organisation of its administration and mode of support from that for the insane afflicted with other forms of insanity.

It is much to be wished for that some system may be devised by which the due care and treatment of the insane poor, labouring under the different forms of insanity, may be dealt with, so that they should be recognised in law as belonging to one abnormal family or group; and that their interests, as well as those of the public at large, should obtain that increased and much needed advancement, which might be expected from the combination of existing diverse systems into one consistent and homogeneous whole, working with the full power which such union would confer.

Assuming that educational training is a powerful, improving, and ameliorating agent with all classes of the insane, it is important to bear in mind that it does not produce its full results, in many cases, until after the lapse of a very long period; and it has led, in the Richmond Asylum, in my experience, to most unexpected improvement, and even cure, only after its continuance for years. Hence I venture most earnestly to deprecate any such interference, by legislative enactment or otherwise, as would make its trial short and insufficient. I hope I will be believed when I say that it is not from any personal feeling that I will venture to lay before the Association some account of the system of educational and industrial training pursued for several years back in the Richmond Lunatic Asylum; but that I do so because I consider it necessary in advancement of principles which I think of great importance.

In the year 1857, on my appointment to the Richmond Asylum, I found with much pleasure that a schoolmistress was a member of the staff, having been appointed in 1854. At the time of my appointment she had a class of about 12 patients, and also gave elementary instruction to such of the nurses as required and wished for it. I have endeavoured to develop, extend, and strengthen systematic education and training as part of the moral treatment of all forms of insanity in this asylum, and I trust my efforts have been attended with some success.

It may not be without interest and advantage to give some of the details of the system of education and training as at present carried out in each division of this asylum.

There are six male divisions, viz., Nos. 1, 2, 4, 5, 7, and 9. In

Nos. 1 and 2, each with accommodation for 63 patients, and with 3 attendants each, there are night-schools only; and these are held on Mondays, Wednesdays, and Fridays, for one hour, from half-past six to half-past seven o'clock, p. m., and are conducted by one of the school teachers, assisted by the ordinary attendants and 3 monitors selected by the patients: 70 attend these classes. Those two divisions are occupied by the men who are employed during the day on the farm, or in the refectory and with the food van. In No. 4, with accommodation for 93 patients, and with 6 attendants, the schools are held daily, and 60 patients attend, between the hours of nine and one o'clock in summer, and ten and two o'clock in winter, one hour being allowed for recreation, about midway in school-time. There is 1 school teacher attached to this division, who ranks as an officer, and does not in any way act as an attendant, and he is assisted by a school attendant who has been a monitor in a school, where he was regularly trained to teach before becoming an attendant here. This school attendant also acts as an ordinary attendant, so far as minding the patients from their rising to their going to bed, but he has only the pay and allowances of an ordinary attendant. One of the other attendants of this division, who has been a soldier, conducts the drill and gymnastic classes; 1 is a tailor attendant, who looks after about 13 patients working in the tailor's shop; 1 looks after about 15 patients employed in masonwork and painting; and 1 is a carpenter attendant, who has charge of 5 patients employed at carpentry. About 12 of the patients who attend school during the day are employed in the afternoon of three days each week, for two hours, at farm work. In No. 5, with accommodation for 93 patients, and with 1 school and 3 ordinary attendants, there is 1 school-teacher, ranking as an officer and with duties similar to the teacher in No. 4. Of the ordinary attendants, 1 is a shoemaker attendant, who looks after patients employed at shoemaking, and 1 who has been a soldier conducts the drill and gymnastic classes. 77 patients of this division attend school daily, at the same hours as in No. 4 (4 act as monitors); 11 work at shoemaking, and 5 are employed in the storekeeper's office and with members of the staff. Of those attending school daily, 30 are occupied in the afternoon of three days in the week for two hours on the farm, similarly as in No. 4.

No. 7 is a large composite division, being for epileptic and suicidal cases, as well as an admission division. It accommodates 141 patients, and has 7 attendants. It has 50 epileptic and 30 suicidal patients. This association of epileptic and suicidal patients has arisen (as a matter of necessity, not of choice) as one of the results of the extensive fire that has occurred here. Nevertheless, there is an amount of school instruction and of industrial employment which could scarcely be expected in the classes of which it is composed: 60 patients attend school daily, and of these 30 are employed in addition on the farm, on the same evenings and at the same hours as those patients in Nos. 4 and 5 above referred to; 30 are totally unoccupied. Drill and gymnastics are taught by an attendant, formerly a soldier. There is one school-teacher, with position and duties as an officer, and

one school attendant, with the same antecedents, duties, and position as the school attendant in No. 4; 3 of the patients assist in teaching.

I consider the school attendants as most valuable in improving the habits, modes of thought, and powers of self-control of the patients, not only in but out of school-hours. Their previous training and education give them very great advantages for such a purpose. It will be seen that there is one school attendant in each of the male divisions, except the division used as an infirmary and hospital.

No. 9 is the hospital and infirmary division, by which is meant the division in which patients requiring medical treatment for bodily diseases and infirmity are placed. None in this division attend school, or are otherwise employed, except about 8 who carry out the domestic arrangements requisite in the division. This division accommodates 52 patients, and has 3 ordinary day male attendants, and 1 female day nurse, and 1 male and 1 female night attendant.

There are 7 female divisions, viz.: Nos. 11, 15, 16, 17, 18, 19, and 20. Of these, No. 11 is that in which the largest proportion of excitable and refractory patients is found. It has accommodation for 68 patients, and has in general few vacancies. It has 1 night and 5 day attendants, and of the day attendants 1 is a school and 4 are ordinary attendants. The school attendant in position and duties is similarly circumstanced as the male school attendants, and has the pay and allowances of female attendants of her class, and she is equally well qualified, in an educational point of view, as the male school attendants. In this division 10 patients attend school only, 34 attend school and are also employed industrially, (2 act as monitresses), and 22 neither attend school nor industrial occupation, being wholly unemployed.

No. 15 is the epileptic division, and has accommodation for 75 patients, of whom 30 are epileptics; 6 attend school only, 34 attend school and industrial classes (2 act as monitresses), 24 have industrial occupation only, and 2 have no occupation. There are 4 attendants in this division, one being a school attendant, occupying a position similar to the school attendant in No. 11.

In No. 16, with accommodation for 121, there is 1 school-teacher, with position and duties same as male school-teachers, and 2 school and 5 ordinary attendants; 95 attend school and industrial classes, and 24 have industrial occupation only; 3 act as monitresses. This is the suicidal division, and has at present 79 suicidal cases.

No. 17, with accommodation for 126, has 1 school-teacher same as in No. 16, 2 school attendants, as in Nos. 11, 15, and 16, and 4 ordinary attendants; 20 attend school only, 75 both school and industrial classes, and 20 industrial occupation only; 3 act as monitresses.

No. 18 is the hospital and infirmary division. There is no school in this division, and no school or industrial occupation except that 23 assist in the care of their fellow-patients and perform requisite domestic services. The head attendant of the division, however, conducted school and industrial teaching in a reformatory before her appointment here, and consequently is, in my mind, much better

fitted for her duties. There is accommodation for 95 patients, and there are 1 night and 6 day attendants.

In No. 19, with accommodation for 64, there are 1 school and 4 ordinary attendants; 10 attend school only, 20 attend school and are industrially employed (1 acts as a monitress), and 25 are employed industrially only.

In No. 20 the patients are chiefly young or of middle age. Some labour under the different forms of insanity, and some are congenital idiots or imbeciles. The division accommodates 46, and has at present 41 patients. There is 1 school-teacher, and 1 school and 2 ordinary attendants. The system of school teaching varies according as the patients may be ordinary lunatics or idiots or imbeciles. Out of school-hours all associate together, and the association of the imbecile and idiotic with selected cases of the insane, as in this division, has no disadvantage that I see, but possesses, with other advantages, this important one, that the lunatics selected to associate with the imbecile and idiotic, give good rather than bad example, and being more intelligent, are of great use in assisting as monitresses and caretakers of the idiots and imbeciles. They render the school singing and music classes superior and more attractive than they could be were the patients in the division composed of idiots and imbeciles alone, and they also are an important aid in industrial teaching and occupation. Two of the patients attend school only, 39 both attend school and are industrially employed, and 3 act as monitresses. It will be seen that there is at least 1 school attendant to each female division in which there is a school.

It is in No. 20 division that I have made my chief trial of educating imbeciles and idiots, of the younger as well as the more advanced periods of life, with selected cases of other forms of insanity; and thinking that a plain narrative of details, as I found them on a particular day, would present a fair and intelligible mode of giving strangers an idea of the system, I noted down on the spot, on the 17th May, the following particulars, as they presented themselves to me, and which I believe exhibited the ordinary and normal condition of the division in general so far as the point concerned. There were 41 patients in the division, their ages being as follows:—1, 11 years; 1, 12; 2, 13; 2, between 15 and 20; 5, between 20 and 25; 8, between 25 and 30; 14, between 30 and 40; 6, between 40 and 50, and 2 over 50. The forms of mental disease were:—imbecility, 9; idiotcy, 4; dementia, 5; simple mania, 12; delusional mania, 5; hysterical mania, 2; suicidal mania, 1; monomania, 1; and melancholia, 2; 20 were admitted as dangerous lunatics, 20 on house forms, and 1 as a criminal lunatic; 15 were in a class in which the first or lowest school book and object lessons are taught (3 of them having been in higher classes, were associated with those of weak intellect in this class, as an example and a help to advance the more feeble-minded and ignorant); 5 were in Third Book, 12 were in Fourth Book, and 9 in Fifth Book; 12 were learning to write; 20, who already wrote imperfectly, got improving lessons; 2 idiots had not as yet been got to try writing; and 7, who wrote well, assisted in keeping books and in teaching.

Of the 41 patients in No. 20, 32 were Roman Catholics and 9 Church of Ireland Protestants; all of them attended morning and evening prayers—the Roman Catholic patients in charge of Roman Catholic attendants, and the Protestant patients in charge of a Protestant attendant. On each Friday those who are fit receive catechetical or other instruction as their respective chaplains may desire, in the respective places of worship, which are distinct and separate buildings. The Roman Catholic school-teachers and attendants have the care of their co-religionists, and a Protestant school-teacher and attendant have the care of the Protestants. The industrial employment was as follows:—6 were employed in cleaning the house; 24 in needlework, viz., 12 making and 12 repairing clothes; 9 in knitting and crochet work, and 2 in making artificial flowers from papers of different colours. 5 play the harmonium more or less perfectly—1 in a very superior style, conducting, in fact, the singing classes. All join in singing. As means of amusement there were dolls, shuttlecocks, dancing, humming-tops, skipping-ropes, cards, and dominoes, indoor. Outdoor games: lawn-tennis, croquet, aunt sally, and toss balls.

Several of the records of the institution of great importance, such as returns of a statistical nature or otherwise (some of them intimately connected with the general educational system) are kept in this division, and in the keeping of them the patients give important aid.

I hope that these details may not be considered wholly unimportant and uninteresting, and that they will afford ground for such general conclusions as each person who reads them may be led to form from his own reflections. Having, I think faithfully, supplied the materials for judging some questions connected with that most important subject—the education of the insane, and particularly in associated classes of imbeciles and idiots with those labouring under various other forms of insanity—I will leave it to those who read my statement to judge for themselves. I will only make this further general remark, that the only reason why I have so few idiots and imbeciles here under twelve years of age receiving training and education, arises simply from the fact that, owing to causes for which I cannot account, the admission of imbeciles and idiots of that age is so little sought for, that I have no more to train in the house, except one epileptic, who is generally in hospital. I regret this much. I have no doubt that if I had more idiots and imbeciles in this division of a young age, the effectiveness of the division would be as great, if not greater; whilst an increased number of the poor neglected class of juvenile idiots and imbeciles would get the important advantage of skilled and systematic training.

In reference to the education or training of the insane, no matter of what class or age, I wish to state that I try to have the patients engaged in the same pursuit for not more than from one to one hour and a half consecutively. Monotony, whether of work, education, or recreation, appears to me to be injurious to the insane of all classes and ages. I consider the alternation of literary, æsthetical, moral and physical education, with industrial employment and recreation (so as to produce variety of occupation), to be of great advantage in the

treatment of the insane, whether the particular form of the insanity be mania, melancholia, monomania, dementia, idiocy, or imbecility.

The great want of further and better provision for the cure of recent and curable cases, and for the training of idiots and imbeciles in Ireland, has for several years received some attention, and the latter subject has been brought into still more prominent notice by the investigations and reports of the Charity Organisation Society of London. The most approved system of training juvenile idiots and imbeciles is founded, as appears to me, on the same general principles, and includes nearly the same details as those on which the educational system in the Richmond has been founded and carried out, until it has reached its present development.

By comparatively cheap structural changes, and the removal of a large number of quiet and incurable cases at present in district asylums in Ireland, who might be cared sufficiently well in one or more workhouses selected for and appropriated to such a purpose, and at less cost than in the present district asylums, I believe that accommodation might be made for some hundreds of juvenile idiots and imbeciles, and means presented for their receiving that education and training of which they are admittedly in urgent want.

In the district lunatic asylums of Ireland, the number of single rooms is, I believe, much larger than is called for by what I consider to be the most advanced opinions on the use of seclusion. As one of the fruits of a highly scientific commission of inquiry, nominated by the late Emperor Napoleon, the new lunatic asylums of Paris, judging from one of them which I have seen (St. Anne's), have only 20 single rooms each, with a general accommodation for 600 patients each. In some of the best managed asylums of England seclusion is very rare, and my own experience leads me to use it very sparingly. In fact, a very large proportion of the single rooms in the Richmond Asylum are occupied by the quietest patients in the house, with the view of putting into associated dormitories the class of patients often called refractory, for whom single rooms were formerly considered necessary. In my opinion, single rooms would not be wanted in a larger proportion than 1 for every 20 patients. From the thirty-fourth table of the Inspector's Report for 1872, which is the last return giving the number of associated and single rooms in the district lunatic asylums of Ireland, there appears to have been at that time about 1 single room on the average for every 4 patients, making about 2,000 single rooms in institutions with a total number of patients amounting to 8,000. The space occupied by single rooms and the connecting corridor, if converted into large rooms, would accommodate two for every one accommodated according to present construction, and a gain of 1,600 beds would thus be available for the accommodation of large classes of the insane at present in much need of suitable provision for their proper care and treatment. I am confident that the means of treating the patients in a way more conducive to their comfort and improvement would thus be obtained at a cost which I would estimate not to exceed £20 per head, or about one-fourth of what it would cost to build new asylums. The removal of quiet and incurable cases, and the conversion of single

rooms and corridors into large rooms, would in this asylum alone give means for the education and training of several hundreds of the insane who at present are deprived of such an opportunity. The present staff would, without increase of numbers or of expense, be sufficient, and the advantages thus offered on the score of experience, and economy of time and money, are obvious.

Preconceptions founded on insufficient data would, I think, be removed by an impartial examination of the system carried out in the Richmond Asylum, and it will always give me great pleasure to afford persons anxious to judge it by personal observation, the opportunity of doing so ; but I would suggest that such persons should visit during our school hours, viz., from nine to one o'clock, from the 1st April to 1st October, and ten to two o'clock, from 1st October to 1st April (vacations at Christmas, Easter, and Midsummer excepted).

Summarizing what I consider some very important items of our system here, I note that out of 479 male patients in the house on the 17th May, 400 were employed either at school or industrially, or both combined, and only 79 were wholly unemployed ; 45 of the unemployed were so in consequence of being under medical treatment, leaving only 34 men unemployed purely owing to their state of mind. Of 553 female patients in the house on the same day, 448 were employed either at school or industrially, or both combined, and 105 were wholly unemployed ; 89 of the unemployed were so in consequence of being under medical treatment, leaving only 50 unemployed purely from the state of their mind. In the management of the insane, it is of the first importance to keep them from mischief and harm ; and with them, as with the sane, there is no means of doing this so reliable or so good as healthful employment of mind and body. Morning and evening prayers are said in all the divisions of the Richmond Asylum, the Protestants and Roman Catholics being in separate rooms and in care of an attendant of their own religious belief (being a school attendant, when possible). The average number attending morning and evening prayers is 322 males and 486 females, making 808 of both sexes. On Thursdays there are religious exercises for one hour for the male patients of the entire house likely to profit thereby, and on Fridays similar exercises for the female patients. Those exercises are held for Roman Catholics in their own chapel, and for Protestants in their chapel, and are superintended by at least 1 school teacher, with the ordinary and school attendants from each division. For Roman Catholics those exercises consist chiefly of catechetical instruction, and for Protestants chiefly of biblical and catechetical instruction. The attendance at those religious exercises are : for Roman Catholics, 80 males and 192 females, or 272 in all ; for Protestants, 25 males and 44 females, or 69 in all.

On Sundays and holidays there are mass and benediction for the Roman Catholics in their chapel, with sacred music and singing ; for Protestants there is divine service in their chapel, with sacred music and singing ; and there is also divine service for the Presbyterians, of whom only 3 are in the house, in a small day-room. The school-teachers and other officers join with the school and ordinary attendants and patients in the sacred music and singing ; 273 men and

290 women, or a total of 563 patients, attend the Roman Catholic chapel on Sundays and holidays, and 42 men and 57 women, or a total of 99 patients, attend divine service in the Protestant chapel.

Our school staff at present consists of 3 male and 3 female teachers, who rank as officers, and of 4 male and 9 female school-attendants. The school-teachers receive the following salaries:—the first schoolmaster is non-resident, and receives £109 9s. 5d. salary, and no allowances. The second schoolmaster has £50, is resident, and has allowances valued at £59 9s. 5d. The third, also resident, has £30 salary and allowances valued at £54 17s. 11d. The 3 schoolmistresses reside and have, the first £47 10s. salary, with allowances valued at £61 6s. 5d.; the second £40 10s. with allowances of equal value as the first; and the third £25 salary, and allowances valued at £57 17s. 11d. The male school-attendants have the following wages:—one, £20; and the other three, £18 each; and the allowances of all four are valued at £43 19s. 2d. each. The female school-attendants have the following wages:—three, £16 each; two, £13; and four, £11 each, yearly; and the allowances of all the nine are valued at £40 2s. 6d. each. All the school-attendants reside.

In reference to the employment or occupation of the insane in this asylum, I consider that one of the advantages of the school system is that it provides an occupation for some, and leads to the occupation of others who would otherwise be wholly unoccupied. In reference to industrial employment, I wish to observe that I try to provide such as is most suited to the tastes or antecedents of the patients, and at the same time such as, with certain limitations, is most useful to the institution.

The total disuse of restraint, and the very infrequent use of seclusion—the freedom allowed to all our patients to exercise and have various sorts of games on the open grounds, in place of enclosed yards, are very gratifying features. The number and cost of our staff, estimated per head on the daily average number of patients, is less in this than in the other district lunatic asylums of Ireland, and this fact, taken in connection with our large teaching and training power, shows that education and industrial employment carried out, as they are here, systematically, by skilled hands, do not necessarily increase expense. The cost per head for salaries and wages here, estimated on the average number in the house, was for 1876 £4 0s. 5d., compared with £4 19s. 6d., the average cost per head of the staff in all the other district lunatic asylums in Ireland in the same year. Our staff of officers and servants was at the rate of 1 for every 8·8 patients—the staff of all other district asylums in Ireland was 1 to every 6·6 patients.

The amount of quietude and good order, of literary and industrial occupation, and of contentment, cheerfulness, and amusement here is very satisfactory. I consider that the large size of the asylum, of the divisions, of the day-rooms, and of many of the dormitories, contributes in no small degree to those satisfactory results. Having for several years been in charge of a small asylum at Kilkenny, with accommodation for only 150 patients, I feel no doubt that I have been able to obtain results here which I never obtained at Kil-

kenny, and which I believe never could be obtained by me or any one else in a small asylum, even at much more considerable cost, or in fact, at any cost, however large. I know of nothing which, in my mind, would tend more to the improvement of our asylums than increasing their accommodation; and I am confident that an asylum accommodating not less than 500 patients, affords greater means for the efficient treatment of the insane than one of smaller size.

In the number of the *Journal of Mental Science* for October, 1860, I published a paper, in which I advocated large in preference to small asylums, and any person desirous of doing so, can there see the reasons on which I grounded my preference. The experience which I have since had in the education and training of lunatics, makes me still more in favour of large asylums than I was in 1860, particularly in view of this question of education; and as the same general principles and machinery are applicable in their case, so far as training is concerned, as in that of idiots and imbeciles, it may be presumed that if the result of experience and reasoning has led to a decided preference for large over small training institutions in the case of the latter, it should favour a similar preference in the case of the former. The Earlswood Asylum, which had 184 idiots and imbeciles in training in 1857, and 599 in 1877, appears to have advanced in efficiency and public estimation as it has enlarged in size. The Charity Organisation Society and the Metropolitan Asylum Board appear to think 500 a favourable size for a training school for imbecile children. The Charity Organisation Society also states that—"Training schools and adult asylums, however they may differ in their internal arrangements, have mutual relations which often make it desirable that they should be in each other's neighbourhood, and under the same general superintendence." I coincide in this opinion, and I think it is from a wise forethought that a site has been selected at Darenth sufficiently large for an asylum for adults, in addition to the training school for 500 children, now near completion. It is probable that such an asylum, with accommodation for 2,000 adults, will be built at Darenth, and ample evidence is thus afforded, that extended experience and consideration is found to favour large and combined, in preference to small and distinct asylums.

Ever since physical repression and fear have ceased to be the principles relied on for maintaining even tolerable security, order, and quiet, and promoting recovery or improvement amongst the insane in confinement, medical and moral treatment have been brought more and more into requisition. Moral treatment is only another name for education and training. But the great defect in carrying out the recognized principles of moral treatment has been that the agents employed have not been sufficiently adapted to the object in view. It is absurd to expect that moral treatment can be efficiently carried out by a few resident medical and other officers, however intelligent and well-intentioned, through their direct and personal exertions, which are necessarily desultory. There must be an organization in connection with the object, analogous to that which is found essential for the education and training of the sane. In the

case of the insane, it is further obviously desirable that the educational agency, which has been found so efficacious in school hours, should not wholly cease after school hours are over. It would be contrary to sound principles to remit the moral treatment of the insane after school hours to the sole charge of attendants, not prepared by their antecedents for the discharge of such a duty. Every one with extended practical experience of the subject, knows that a very large proportion of the attendants in lunatic asylums have not received that instruction calculated to make them skilled agents in fulfilling the requirements called for in the moral treatment of the insane.

In each division there should be at least one such attendant, whilst at present I fear that there are many asylums without even one such attendant in the whole asylum. To carry out individual moral training in asylums, even of small size, appears impossible, even if it were desirable. Direct individual training is too likely to degenerate into argumentation, not calculated to influence an insane person beneficially. The problem to be solved is to break the habit of abnormal feeling and acting as much as possible, and this can be better done by indirect and class training than by direct individual training. In classes, the influence of the example of the large mass of the quiet and orderly on their more disorderly inmates multiplies the good result.

In instructing sane adult classes, whether in morality, in science, or in literature, the advantage of teaching in class becomes every day more fully appreciated and established. Singing, music, and amusements for the million are every day more called for by the public voice, and the opinion is, I believe, gaining ground, that religious instruction carries more influence when addressed to large than to small congregations. What reason is there for supposing that the powerful mental and moral lever of example should not be applied on the same principles to the insane as to the sane mind? Be this as it may, I think it will be admitted that any influence which is good should be as continuous as possible. To keep the mind free from insane or immoral impressions is an obvious desideratum. This result is to be sedulously sought for; and even in a negative form it opens the door for the introduction of normal thought. Normal action follows normal thought. To keep the insane from mischief, to themselves or others, is a chief reason for placing them in asylums, and I know of nothing more conducive to this end than healthful occupation of mind and body; and such occupation can only be efficiently conducted by trained and skilled hands.

It is generally admitted at the present day, that to be qualified to teach, literary knowledge alone is not sufficient, but that the teacher should also be trained to teach; and I believe that the same principle should be kept in view in selecting those who are to educate and train the insane, whether in or out of school. Those who have been trained as monitors and monitresses in normal schools and public establishments, are a class from whom persons well-fitted to act as attendants may be obtained, who, with a little additional special instruction, would become admirably suited to carry out the moral training of the insane in asylums, whether in school-classes or other-

wise. In Ireland there are a number of such persons suited and willing to take the situation of attendants on the insane in asylums, moderate as is the remuneration attached thereto. Their education—the habits and skill in teaching and influencing to good ends—which they have acquired, the knowledge of singing and music, and of directing industrial occupations, whether for males or females, which they often possess, present obvious advantages; and it is much to be regretted that many of this class (if I am rightly informed) take situations in their own country lower in value and position than that of an asylum attendant, or emigrate to our colonies or other countries. It is from this class that I have selected what are called school attendants in the Richmond Asylum; and my experience of them gives me no room for hesitation or doubt in recommending the example of this asylum, in this respect, for general imitation. The want of school-rooms is a difficulty sometimes alleged as standing in the way of establishing schools in asylums. But school-rooms are not necessary, and we have none here. Schools are alleged by some, who admit their practicability and value in the Richmond Asylum, to be impracticable in most other asylums, particularly where the patients are of a rude, illiterate, and agricultural class. But it is to be borne in mind, that the education and training of the insane is chiefly of use, not for the literary and industrial knowledge imparted, but as supplying the best means of restoring the mind to a healthy state, of teaching habits of good order and self-control, and of relieving the tedium of idleness, and so promoting contentment and even happiness. The ignorant as well as the educated present subjects capable of deriving benefit from that moral treatment which skilled education and training alone can adequately supply. Amongst the causes which lead to insanity as well as to crime, I believe ignorance to be one; and it should be noted, that out of 8,183 patients in the district lunatic asylums of Ireland, only 1,899 are set down as well educated and capable of reading and writing well, whilst there are 5,516 who can only read and write indifferently, read only, or neither read nor write. Whilst the insane in lunatic asylums are in general so deficient in education, it is noteworthy that 125 were students or teachers before they became insane. Here is a body amongst whom several are by no means incapacitated from teaching by their mental condition. In this asylum, out of 15 of this class, several give valuable aid in carrying out our school system. The 12 patients who were learning to read and write in this asylum, according to the statement published by Dr. Brown, in 1837, as already referred to, were taught, I should suppose, by a fellow-patient, as there was then no paid teacher in the asylum; and in 1852 a few of the female patients in this asylum received school instruction for some time, under the direction of one of the patients who had been a schoolmistress, and the result was satisfactory. The circumstances in the public asylums in England and Scotland are, I believe, at least equally favourable to the introduction of education and training of the insane of all classes as they are in Ireland; and the advantages would, I feel confident, be equally great.