Crime and Insanity.

The Report of the Departmental Committee on Prisons, the chief recommendations of which—so far as they affect the subject of insanity in prisons—we reproduce under the heading "Notes and News," contains much of interest to alienists, by whom it will be welcomed as evidence of reform and progress. The Report opens up a prospect of co-operation between asylum and prison workers, which cannot but make for a better understanding of the sources and relationships of crime and insanity, and promote our efforts to lessen the sum of unhappiness caused by the heedless propagation of these great degenerations. Too long, indeed, have the alienist and the criminologist worked apart, and a distinction, we venture to assert, quite unnatural has been drawn between their spheres of labour. We should be curious to learn how many instances could be adduced of co-operation between asylum and gaol medical officers, in those localities in which the asylum and the prison are contiguous; to what extent the medical officers of the one institution have taken advantage of the opportunities which offered to familiarise themselves with the cases to be found in the other. There may possibly be justice in the reproach that both our prison colleagues and ourselves have been remiss in not bringing before the notice of the proper authorities, with adequate persistence and force, the need for taking a common basis of study, and for associated labour. The desirability of keeping distinct institutions for dealing with insanity and crime might even be questioned by some. Wholly separate institutions for the study of the different abnormal and degenerative states of any given bodily organ, other than the brain, would assuredly be considered as unnecessary.

Turning to the recommendations of the Report, we early note one which strikes us as eminently desirable, namely, "That candidates for medical appointments in prisons should be required to show that they have given special attention to lunacy." As is truly observed, "The detection of disease in its earliest stages taxes the skill of the practitioner to its fullest extent, and in mental diseases this is especially the case. Here medical men of great skill and experience, but without any special training in this department of their art, are undoubtedly at a disadvantage." The Report goes on to allude to the Belgian system, by which experts are retained for the detection of insanity in criminals; and suggests that some step of the kind might be taken, with a view of

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nspecting convicts during their period of isolation. We are certainly of opinion that if the recommendations on this point are carried out much will have been done to prevent the punishment of the irresponsible. In Appendix III. of the Minutes of Evidence we find a Table, supplied by the Medical Inspector of Local Prisons, showing that, in the year ending March, 1889, the number of sentenced prisoners found insane upon reception amounted to 93; and he proceeds to observe that "it is evident from these figures that insane and irresponsible persons have been dealt with as sane and responsible; that is to say, they have been sent to prison under sentence." Although in London the committal of insane persons to prison is largely prevented by using Holloway Prison as a place in which accused persons of doubtful sanity can be observed and tested, it can scarcely be doubted that in the provinces instances of such committal are occurring not infrequently. Even in Holloway the facilities for giving thorough attention to individual cases, whereby alone just conclusions as to the mental state can be formed, would appear to be inadequate, since we find the Report (based in this respect, as in all others, upon the evidence of expert witnesses) advocating that "the medical staff in Holloway and other prisons similarly circumstanced should be strengthened."

Whilst referring to the subject of the early detection of insanity in prisoners, we offer the suggestion that it would be advantageous to consider the propriety of reforming the process by which the Treasury is informed concerning the mental condition of a prisoner. At present (we refer to the usual procedure) a report is furnished by the Superintendent of the local asylum. We think that the results would be more uniformly satisfactory if in all cases such prisoners were examined in addition by a consultant-expert, preferably one retained by the Treasury for that purpose. If, finally, we could be spared the primitive course by which a local practitioner is permitted to present his opinion in court, upon behalf of the defence, in respect of a questionable case of insanity, in opposition to that of the Superintendent of the Asylum—a procedure by no means instructive or dignified—an appreciable saving would be effected in the time of the court, and the way cleared for the introduction of more advanced methods.

Another recommendation to which we would refer is that the various members of the prison staff should go "through a course of systematic and scientific instruction. Lectures

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should be given by experts in criminal anthropology," etc. We have no sympathy with those connected with asylums and prisons in this country who deride the work of Lombroso and his pupils. Even though we are unable to agree with much that is taught by this school, we accept such investigations as being in the proper spirit, and should deem it evidence of progress if the same lines of inquiry were systematically followed in this country. Prison officials, like their asylum *confrères,* are in danger of losing the light of research amidst the murky details of administrative duties. We are glad to note the Report recommending that prison officials should be instructed in their work "over and above the formal discharge of routine duties."

Other recommendations refer to the treatment of the weak-minded class, of habitual criminals, and habitual drunkards. Separate treatment is recommended for all these. With reference to the first-named, we find the somewhat naïve remark, that it is "a question whether the epileptic and obviously weak-minded class should be sent to prison at all." We hasten, however, to add that the humane and enlightened tone of the Report leaves no room for doubt as to the manner in which, in the opinion of the committee, this question should be solved. In the case of habitual drunkards, the recommendation of the Committee on Inebriates, that magistrates should have power to commit for lengthened periods, is confirmed.

The Report closes with a memorandum on Insanity in Prisons by Dr. J. H. Bridges, a member of the committee. He has no difficulty in rebutting the sensational statements made by a writer in the *Fortnightly Review* for April, 1894, and by others, to the effect that the existing prison system promotes insanity.* In the vast majority of cases of insanity recorded in local prisons during a given year the disorder was noted on admission or within one month of admission; and the probability is that careful inquiry, with due knowledge of the history, would have shown the existence of the seeds of the disease in several of the few cases remaining. The fact that the insanity is thus early detected, pointing clearly, as it does, to the existence of the malady prior to imprisonment in a large number of the cases, is an obvious argument for the early examination of accused persons by specially trained physicians, with a view to determining the question of responsibility prior to committal to gaol.

* See also Dr. Baker's article on "Insanity in English Local Prisons," *Journal of Mental Science,* April, 1896.

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