Criminal Insane in Ceylon. By J. W. Plaxton, M.R.C.S., Medical Superintendent of the Lunatic Asylum, Colombo, and late Assistant Medical Officer, West Riding Asylum.

"He that is strongly of any opinion must suppose (unless he be self-condemned) that his persuasion is built on good grounds, and that his assent is no greater than what the evidence of the truth he holds forces him to, and that they are arguments and not inclination or fancy that make him so positive in his tenets. Now, if after all his profession he cannot bear any opposition to his opinion, if he cannot so much as give a patient hearing, much less examine and weigh the arguments on the other side, does he not plainly confess it is prejudice governs him?"

John Locke.

Many concurring circumstances have turned my thoughts of late towards crime done by the insane, and to insane criminals. Notably so the reading of the last July number of the "Journal of Mental Science."

I am more especially concerned as to their treatment when they shall have entered the doors of the asylum.

Before accepting my present post, the question of the treatment of the inmates of criminal lunatic asylums had not obtruded itself on me.

Unfortunately, I had never visited an asylum for the criminal insane, nor, I am ashamed to say, had I sought information in other ways. Now, at this distance from centres of vitality, when one's bookcase fails, information is far to seek.

Granted that certain insane are to be distinguished from the rest as criminal, the question of the necessity for differential asylum treatment necessarily arises, and would seem to have been decided in the affirmative, inasmuch as special asylums are built for them in many places.

In other places, fortunately or unfortunately, such special provision is not made, but the two genera are herded together in one building, and no adaptation, if such be necessary, is made to their wants.

It is much to be wished that an authoritative voice should make known the received lines to be followed in dealing with the criminal insane in their treatment, medical and penal, as well as in the buildings.

My own experience is that, having referred an insane to the genus criminal, we are too apt to think of him as criminal to the full connotation of the term. We do not wait to assign

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him to his proper species, and, worse, deal with him as we think.

The term criminal lunatic includes those who—

1st. Have committed crime, being insane.

2nd. Are charged with crime, but found insane at their trial.

3rd. Those becoming insane after sentence for crime done when sane.

Putting aside the gravity of the offence, in actual life a better classification would be—

1st. The habitually lawless.

2nd. The habitually law-abiding when sane.

It would then be found that the majority of the first and second species of the first classification come under the head of the "habitually law-abiding," and the majority of the third under the head of the "habitually lawless."

The two great classes of criminal lunatics should be separated. Dealing with the sane, to herd together the "habitually law-abiding" with the "habitually lawless" is recognised everywhere as a wrong—in theory, at least.

It is not less wrong when dealing with the insane.

Of the "habitually lawless" too many find their way from gaol into ordinary lunatic asylums.

I well remember how, in my old *Alma Mater*, the advent of such a one caused disgust, his residence trouble, and his exit general congratulation.

The fate of the insane, criminal but "habitually law-abiding," is more especially what I seek to know. Where is the information to be obtained?

In many cases there must be so little to distinguish him from the inmate of an ordinary asylum. True, he has been guilty of a crime, perhaps the greatest of crimes; but accident may have determined his fate—the weapon and opportunity to hand, or he was friendless, and there was no one to intervene between him and his intent.

Society awards him perpetual seclusion, penal treatment, perhaps. It is impossible to question the justice of the seclusion. The individual must bow to the primarily important law of the security of the community.

Contrast the lives of two men—smitten alike by the fellest disease man can know. One in his friendlessness commits homicide; one is shielded by friends. One may awake to find himself a prisoner, who knows not the end of his imprisonment. He is detained during Her Majesty's pleasure. The other, more fortunate, on awakening returns to freedom and all that makes life worth living.

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Nevertheless, the fact of the crime remains. The guilt should be the measure of the punishment; and, by howsoever much the imprisonment fails, by so much should the punishment be increased.

It is the whole question. Given a crime done by an insane person, to measure his guilt and his punishment.

Opinions differ. No full, and limited responsibility have, or have had, their adherents. The French law says, "There is neither crime nor misdemeanour in an action, otherwise culpable, committed at the moment when the accused was in a state of insanity."

The English law measures the guilt by the knowledge of right and wrong.

The late Lord Chief Justice of England says, "There are forms of mental disease in which, though the patient is quite aware he is about to do wrong, the will becomes overpowered by the force of irresistible impulse."

The regulations of the Ceylon Lunatic Asylum recognise limited responsibility. They say—

"No further relaxation should be allowed of the stringency of imprisonment and penal discipline, and of prevention of communication with each other, and especially with visitors or other inmates of the asylum, than due medical treatment requires. It is only in comparatively rare cases—such as idiocy—that a person is wholly devoid of the power of self-control and of the consciousness of wrong, and, therefore, wholly free from legal and moral responsibility for criminal acts. In a very large proportion of cases insanity, as is well known, is only recurrent or temporary, and not continuous; and is definitely limited to some special range of ideas or emotions; and this especially occurs in cases where there is only lesion or disease of some portion of the brain organ."

Under the French law penal treatment of the insane is out of the question.

Under the English it is enforced.

The penal treatment of criminal lunatics in criminal asylums is the point of my enquiry.

[We shall be glad if Mr. Plaxton's suggestive paper calls forth another on the subject from some of those who have the charge of the criminal insane in this country. Mr. Plaxton will find an article in this Journal on the question, in addition to that he refers to, in the July number of 1879. Dr. Nicolson's papers on the "Morbid Psychology of Criminals," appeared in Vols. xix, xx, and xxi; and on "Responsibility in Criminal Cases, in Vol. xxiv. Why does not Dr. Nicolson reprint these valuable papers?—EDS.]

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