sense, nor insane in the scientific sense of the term: he was a deliberate criminal, both in the legal and scientific sense of that word.

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*On the Means of Extending the Public Asylum System; a Sequel,**

by C. L. ROBERTSON, M.D. Cantab., &c., &c., &c.

IN the 'Journal of Mental Science' for January, 1865, I published a paper containing a few remarks 'On the several means of providing for the yearly increase of Pauper Lunatics.'

By an unlooked-for coincidence the *Société Médico-psychologique* were, at the date of the publication of my paper, engaged in the discussion of the same question: '*Les divers Modes de l'Assistance Publique appliquée aux Aliénés*' (the several means of providing at the public cost for the care of the insane).

At the meeting of the *Société Médico-psychologique*, held at Paris on the 31st October (see the '*Annales Médico-psychologiques*,' January, 1865), M. Jules Falret read a report which he had been commissioned to draw up, on a paper published in the November number of the same journal, by M. Auzony, on 'Asylum Farms.' M. J. Falret, in this report, included the consideration of the several questions which, in my paper, I had endeavoured to solve from our English experience. These questions thus raised by M. J. Falret, from his examination of "the several means of providing, at the public cost, for the care of the insane," were brought before the *Société Médico-psychologique* as subjects for discussion.

M. Jules Falret's conclusions are thus given:—

I. *The Insane in Private Dwellings.*

"1° *Séjour de certains aliénés dans leurs propres familles*, avant leur entrée dans les asiles, ou bien après y avoir résidé plus ou moins longtemps,

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* 1. "Des Fermes-asiles, ou de la Colonisation des Aliénés," par M. le Docteur Auzony, Directeur Médecin de l'Asile public d'Aliénés de Pau. 'Annales Médico-Psychologiques.' November 1864.

2. "Discussion sur les différents Modes d'Assistance des Aliénés."—Ibid. Jan. 1865.

3. "On the several Means of Providing for the Yearly Increase of Pauper Lunatics," by C. L. Robertson, M.D. Cantab., Medical Superintendent of the Sussex Lunatic Asylum, Haywards' Heath.—'Journal of Mental Science.' Jan. 1865.

4. "Sur les divers Modes de l'Assistance Publique appliqué aux Aliénés;" Discours prononcé dans les séances de la Société Médico-Psychologique à Paris, le 26 Décembre 1864, et le 16 Janvier 1865. Par le Docteur J. Mundy, de Moravie, member etranger de ladite Société et de celle des Aliénistes de Grande-Bretagne et d'Irlande. Paris, 1865 (*pamphlet*).

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lorsque le médecin de l'asile juge possible de les renvoyer chez eux, comme inoffensifs ou incurables, moyennant une rétribution annuelle. C'est là un mode de secours à domicile pour les aliénés."

II. *Extension of the Public Asylum System by the erection of Asylum Cottages, and of detached blocks on the County Asylum Estate.*

"2° *Placement de quelques aliénés choisis par le médecin dans le voisinage des grands asiles,* chez des paysans, des infirmiers ou des habitants des villages voisins, sous le contrôle du médecin-directeur. C'est là, à peu près, ce que les Anglais appellent le *Cottage-system,* que l'on peut subdiviser en deux parties, selon que ces habitations isolées sont situées dans l'enceinte même de l'asile ou au dehors.

"3° *Création de fermes agricoles* enclavées dans les grands asiles, ou simplement annexées, dont les constructions, l'organisation et les règlements donneraient aux aliénés plus de liberté relative, plus de bien-être, et un genre de vie plus rapproché de celui de l'homme en société."

III. *Agricultural Lunatic Colonies.*

"4° *Création de villages d'aliénés,* semblables au village de Gheel, pour les malades incurables et inoffensifs, ou même pour tous les aliénés sans exception d'après certains auteurs."

They accord alike in their subject and in their arrangement with the heads under which, in my former paper, I divided the several means at our disposal for providing for the yearly increase of pauper lunatics in England. I there said that the means at our disposal for providing for the yearly increasing number of pauper lunatics may be thus classed:—

I. *Single Patients; the Insane in Private Dwellings.*
II. *Extension of the Public Asylum System, by the enlargement of the existing buildings, by the erection of Detached Blocks, and also of Asylum Cottages on the County Asylum Estate.*
III. *Agricultural Lunatic Colonies.*
IV. *Licensed Lunatic Wards in Workhouses.*

The latter division of licensed lunatic wards in workhouses was not discussed by the *Société Médico-psychologique.* It is not my intention here to review the long debates, not yet concluded (10th March), which followed the reading of M. Jules Falret's report. My present object is simply to add a few words in illustration of my former paper, and particularly with reference to my views on the extension of the Public Asylum System, and which appear to have sadly displeased and disappointed the adherents of the lunatic colonization system of Gheel.*

* Thus, in the 'Aehrenlese' for February—a journal which usually contains communications on the Gheel question, evidently sent by Baron Mundy—a note on my paper in the 'Journal of Mental Science' for January attributes my adverse opinions on Gheel (the first time, by the way, I ever gave an opinion on the question) to a weakness of character which one would not—the writer is good enough to add—have expected from so well read and sensible a man!

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One of the speakers, and not the least distinguished, at the debates which followed the reading of M. J. Falret's report and conclusions, was my friend Baron Mundy, M.D., of Moravia, who having also read my paper in this Journal for January 1865, did me the honour of making mention of my views on the questions then before the *Société Médico-psychologique* in two elaborate speeches (*discours*) which during this discussion he delivered, and which he has subsequently published in the shape of a large pamphlet. He there passes in review the several means which I have enumerated as applicable to the extension of the public asylum system, and, as I should have beforehand guessed, condemning them one and all, and finishing with his oft reiterated tale of "Gheel—*le mot magique, le shiboleth de ma question,*" as he calls it.

I. *The Insane in Private Dwellings* (*Secours à domicile des aliénés*).

Baron Mundy pronounces the system of placing the insane poor in their own homes as a visionary remedy—*une de ces panacées illusoires**—and a fruitless attempt—*pium desiderium impossible*—to lessen the increasing number of the inmates of the public asylums in the different countries of Europe. Yet a system which relieves the asylum of the charge of 18 per cent. of the insane poor in England and Wales, and of 32 per cent. in Scotland, and which under proper precautions, admits of further extension, can hardly be termed a visionary or fruitless remedy. These terms belong, in truth, to another system.

Baron Mundy argues that this system fails alike in France, and in every other country in Europe from the insurmountable obstacles opposed to its adoption. "Il y a donc (he writes), en premier lieu, des impossibilités qui s'opposent à ce mode d'assistance publique. Ces inconvénients insurmontables, que je vous ai prouvés par des examples tirés de votre pays, vous les rencontrerez dans toute l'Europe. *C'est donc un principe qui n'est applicable nulle part;* mais il faut y ajouter encore de nombreux obstacles d'une nature sociale, économique et médicale."

In reply to this assertion that the system of the insane in private dwellings, is no where applicable, I am content to remind Baron Mundy of an essay† which he has often quoted to me with approval,

* "Ce mode d'assistance publique, sanctionné non-seulement en France, par la loi de 1838, mais légalement admis dans presque tous les Etats d'Europe et en Amérique, avec des restrictions plus ou moins accentuées, est encore une de ces *panacées illusoires* que l'on reproduit de nos jours, de temps en temps, comme moyen d'arrêter l'accroissement outre mesure des malades dans les asiles." Baron Mundy's panacea of Agricultural Lunatic Colonies (Gheel) has already, with more truth, been thus similarly termed "*the day dream of benevolent enthusiasts unversed in the real life of the insane.*"

† 'The Insane in Private Dwellings.' By Arthur Mitchell, A.M., M.D., Deputy Commissioner in Lunacy for Scotland. Edinburgh, 1864.

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and in which Dr. Mitchell records, much beyond my more modest expectations, the success, theoretical and practical, of the system in Scotland of placing the insane poor as boarders in private dwellings.

That this system of placing certain classes of the insane as boarders in private dwellings admits, in England, of farther extension, *under proper supervision*, was a point on which I dwelt. At present in England and Wales, the condition of these patients—18 per cent. of the total number—is not on a satisfactory footing. I would, as I suggested, transfer their care (by a slight modification of the existing law) from the guardians of the poor entirely to the committee of visitors of the county asylum, and I would place their supervision, including the amount of the sum, and its payment, for their maintenance—and which might be charged to each union in their quarterly accounts with the asylum—entirely under the control of the visitors. The occasional inspection of these patients by the medical superintendent of the county asylum would tend to keep the local practitioners—to whom the visitors might entrust the medical charge of these patients—up to their work, and would in time secure to them fit and enlightened treatment. By such a system the county asylum would become the centre of all the lunacy business of the county, while the standard of treatment, alike in the union-houses and in private dwellings, would gradually be so raised, that they would tend more and more to relieve the asylum of the chronic lunatics who now are year by year there accumulating, simply because these outlets are, by the inefficient manner in which they are conducted, as yet closed against them.

II. *The Block and the Cottage Asylum Systems* (*Création de fermes agricoles; placement de quelques aliénés dans le voisinage des grands asiles*).

Baron Mundy proceeds to notice the second means which I stated to be at our disposal for providing for the great increase of pauper lunatics, viz., the erection of detached blocks and asylum cottages on the county asylum estate, and with which M. Jules Falret, in his report to the *Société Médico-psychologique*, classes the 'fermes agricoles'—the asylum farm, either as surrounding the asylum or detached.

I need hardly add that Baron Mundy summarily condemns these several means of extending the public asylum system. "De ce mot seul (he says), on peut déjà tirer la conséquence que cela ne constituerait pas une réforme efficace, quand même cette réforme serait réalisable en pratique."

I shall say here one word on his objections to these two means of extending the public asylum system, viz., by block buildings and by the erection of cottage asylums.

a. The Block System (*fermes agricoles*). Dr. Bucknill, I observed in

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my former paper, has given us in these detached blocks a means of asylum extension capable of infinite application, as they may, of course, be indefinitely multiplied. They afford a bright, quiet home to the working patients and to the feeble and demented—removed as they are from the bustle and discipline of the main building. The detached blocks are supplemental asylums, differing only from the main building in greater simplicity of structure and less appearance of restraint. The principles of treatment in the isolation of the patients from the external world, and in the discipline of asylum life, remain the same in the main building and in the detached block.

Baron Mundy gives in his speech an excellent description of the block system:—

"Un autre système," he says, "que le célèbre docteur Bucknill, actuellement un des visiteurs des aliénés qui dépendent du lord-chancelier d'Angleterre (*chancery visitor*), a surnommé et introduit le premier, c'est le *Block-system*. Ce système consiste en différentes maisons détachées de l'asile, construites, le plus souvent, dans son enceinte. Suivant les principes du docteur Bucknill, ces *blocks* doivent être d'une architecture et d'un agencement très-simples. Chacun doit avoir sa cuisine, ou bien une cuisine commune est établie pour tous les *blocks* détachés. Ces *blocks* ne contiendront que de 30 à 100 malades du même sexe, et ne doivent coûter que 1000 fr. par tête de malade."

He also admits the value of the block system in the large reduction in the cost of construction—£50 instead of £150 per patient—which has followed its adoption. Yet he urges that because he saw a block building at the Essex Asylum which cost more than £100 per bed, that, therefore, the block system in England is degenerating by the cost which it entails. "Cependant," he says, "le *block-system* commence à dégénérer en Angleterre, quant aux frais qu'il entraine; il devient, par conséquent, préjudiciable sous le rapport économique."

If the block buildings, as Dr. Bucknill practically demonstrated in his "New House," at the Devon Asylum, can be built under £50 a bed, it is foolish to say that because the visitors of the Essex Asylum thought fit to spend more than double on their block buildings, that, therefore, the system has begun to fail owing to its inherent costliness.

Baron Mundy further objects to an expression I use in describing the block system as differing only from the main building, in greater simplicity of structure, and *less appearance of restraint*. For once the singularly accurate knowledge which Baron Mundy possesses of the English language, is at fault. The "less appearance of restraint" is clearly applied here to the absence of strong windows, corridors, and galleries, which characterises the new house of the Devon, as contrasted with the original asylum. I need hardly assure the Baron—what my writings for many past years will bear out—that I am as strong an advoca te, and as zealous in the practice of the

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English non-restraint system, as even our revered friend "*Dr. John Conolly, l'illustre héros de Hanwell.*"

The "*fermes agricoles*" of M. Auzouy, M. Jules Falret classes as a part of the block-system. Under the more familiar name of the asylum-farm, it has long been the chief curative agent in all our English county asylums. Its introduction, however, in France is of more recent date. M. Auzouy in his paper in the November number of the 'Annales,' gives an interesting account of the farm (under the absurd name of the *Colonie agricole de Saint-Luc*), lately purchased for the asylum at Pau, and on part of which the new departmental asylum there is to be built. M. Auzouy gives a decided preference to a farm surrounding the asylum, rather than to a distant or detached farm establishment; an opinion I should think shared by all practical men.

The *fermes agricoles*, even when known as the *Colonie de Saint-Luc*, please Baron Mundy as little as either the block system or the cottages, or other efforts to extend the public asylum system. He declaims in the following style against all such attempts:

"Ici, à la fin de mon appréciation de la quatrième question de M. votre rapporteur, je demande *quel changement a été produit dans l'ancien système* par ce *système des fermes* en Angleterre et en Amérique, où presque chaque asile peut disposer d'une ferme magnifique, annexée le plus souvent à l'asile? Absolument rien! On discute toujours, là aussi, la nécessité d'une réforme; on propose, en outre, le *Cottage-system* et le *Block-system*. Et même, chez vous, n'y a-t-il pas beaucoup d'asiles possédant des fermes parfaitement montées, comme, par exemple, Alençon, Leyme, Saint-Gemmes, Saint-Luc, et, avant tout, Fitz-James, sans compter beaucoup d'autres? Cela vous empêche-t-il d'employer, contre les aliénés, la séquestration sans distinction, continuellement, et, pour ainsi dire, perpétuellement? Vos 'fermes agricoles' ont-elles eu pour effet d'amener chez vous l'adoption du système anglais du *non restraint?* Non, certainement non! Trève donc à toutes les belles espérances d'un bonheur fictif et des avantages pratiques du système des fermes agricoles. En réalité, *le principe de l'ancien système reste toujours debout dans sa roideur inflexible;* les avantages offerts par les fermes agricoles ne peuvent modifier *que très-faiblement* cet ancien système, de manière que cela mérite à peine d'être appelé un progrès!"

I am unable to reply to such vague assertion. My limited space does not permit me to indulge in similar adverse tirade, nor indeed do I care to do so.

b. Cottage-asylums (*Placement de quelques aliénés choisis par le médecin dans le voisinage des grands asiles, chez des paysans, des infirmiers, ou des habitants des villages voisins, sous le contrôle du médecin directeur*).—This third method of extending the public asylum system, and referred to both by M. Jules Falret and myself, offers to the patient a further curative agent, the value of which is so truly insisted on by the advocates of the Gheel system—that of living under the healing influences of the family life.

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Such cottage-asylums consist of an ordinary cottage in which two or three patients reside, under the care and with the family of one of the married attendants of the asylum, or of some one similarly qualified. The 79th section of the English Lunacy Act sanctions the placing of the patients as boarders there, the certificates remaining in force.

I gave in my former paper several extracts from Dr. Browne's essay on 'Cottage-Asylums,' and to which I would now refer my readers.

The cottage-asylum stands midway between the asylum wards and the private dwellings, and combines, to my judgment, the advantages of both. The asylum discipline is to some extent upheld, and while the patient is readmitted to the domestic circle his cottage home is on the asylum grounds, and keeps him still under the supervision of its officers, and enables him to share the advantages of the general dining-hall, at least for the principal meal, a point on which I would set considerable store. It places the lunatic again in the family life from which his disease had alienated him, and is thus an addition to our curative appliances, as well as a means of extending the accommodation in our public asylums.

That this system of cottage-asylums will spread and fulfil, as far as is practicable with the insane poor, the aspirations of family treatment of the advocates of Gheel, I have already officially recorded my opinion in the fourth annual Report of the Sussex Asylum, and I have seen no reason to alter this belief. On the other hand, I cannot understand how any one could interpret this opinion into an advocacy on my part, of the impracticable scheme of lunatic colonization on the Gheel model. At any rate, I take this opportunity of distinctly denying that on any occasion, in public or in private, did I give my adherence to the application in England, of the vague day-dreams of the advocates of the Gheel system, as a means of providing for the yearly increase of our insane poor. On the contrary, as I said in my former paper, I believe it to be utterly impracticable—and if practicable, not very wise—to attempt to found such a colony as Gheel in England.

With reference to the cottage-asylums, Baron Mundy speaks of the extreme difficulty of carrying out this partial approach even to the Gheel system; and illustrates this by the history of a small experiment of mine, related in my annual report for 1864. It is quite true that I had many difficulties to contend with through the prejudices of the neighbourhood and of the landlord of the cottage, who refused to continue to let it to me for such a purpose! The patients, also—whom Baron Mundy often visited—tired of the plain fare of the cottage family-table, and sighed for the fleshpots of Egypt, and the well-regulated comforts of the asylum. I, therefore,

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for the present, have given up the experiment, as I stated at the last annual meeting of our Association.

One result of my experience, was the small number of patients whom I found fit to be placed in these cottage asylums. Out of 250 female patients, I had always difficulty in finding 6 whom I could thus place. I had also frequently to change them, as when the novelty wore off the patients were many of them urgent to return to the asylum. Contrary to my expectation, the system worked better with the chronic than with the convalescent patients. The cost also was rather above that of the asylum. On the other hand, the cottage-asylum system must not be judged of by so limited a trial. To answer our expectations, the cottages must be the property of the asylum, whose tenants then the occupiers would be.

Baron Mundy does not, however, allow these difficulties to dete him from the advocacy of the system of cottage-asylums on the wide scale of agricultural lunatic colonies. "Pour éviter tout malentendu," he says, "nous devons ajouter ici que le projet de mettre quelques aliénés chez des paysans, des infirmiers ou des habitants des villages voisins aux grands asiles, diffère tout à fait d'un autre système, c'est-à-dire de la création de villages d'aliénés, destinés exclusivement *ad hoc*, que nous traiterons dans notre exposé sur la 3e question de M. votre rapporteur."

I would in conclusion, therefore, pass to the consideration of the third division of these remarks.

III.—*Agricultural Lunatic Colonies* (*Création de villages d'aliénés, semblables au village de Gheel*).

On the subject of agricultural lunatic colonies, I made in my former paper the following remark :—

"A few words are necessary here on the question of agricultural lunatic colonies detached from the asylum—and only a few. For the last two or three years the agricultural lunatic colonies of Gheel and of Fitz-James have been persistently forced on our attention, as the only remedy for the ills of over-crowding which we are now suffering. The limits of this paper entirely preclude my discussing so voluminous a subject in detail. I would merely say that, after a very careful examination of the whole question, I am led to the opinion that it would be utterly impracticable—and, if practicable, not very wise—to found such a colony in England. Among the mass of literature which the Gheel controversy has produced, I would refer those further interested in this subject to three papers—one by Dr. Sibbald, which appeared in the 'Journal of Mental Science' for April, 1861; one by Baron Mundy, M.D., of Moravia, reprinted from the (late) 'Medical Critic' for July, 1861; and, lastly, to a very important paper in the same Journal for January, 1861, by Dr. Browne, Commissioner in Lunacy for Scotland. I leave this question, then, with the simple remark, that agricultural lunatic colonies do not appear to me to offer *any present aid* towards relieving the pressure on our county asylums, the subject which I am at present discussing."

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Baron Mundy divides his defence of this system of agricultural lunatic colonies into three heads:

1. Their social advantages. 2. Their economical results. 3. Their curative results. "La base de cette question," he says, "repose sur trois principes, savoir: 1° Le principe social; 2° Le principe économique; 3° Le principe médical."

I shall in conclusion very briefly notice this system under Baron Mundy's three divisions.

1. *The social advantages of agricultural lunatic colonies.*—Certainly the public mind in England is not yet sufficiently moved by the baron's missionary efforts to realise the idea of abandoning the public asylum system,—so successful beyond all hope in its results,—in order to replace it by a series of outlying villages like Gheel, with its 10,000 inhabitants, and 1000 lunatic patients, while, if we look to the social advantages to be derived by the patients from such a system in increased comforts, greater liberty of action, and extended facilities of employment, I assert—as against Baron Mundy's assertion — that the advantages all lie on the side of the public asylum system.

2. *The economical results of agricultural lunatic colonies.*—These in England would, I am sure, be found utterly fallacious. Even, if it were practicable, to buy up a sufficient territory to construct such a village thereon, the price would be beyond computation, in an island where land sells almost like gold. Baron Mundy, under the economical advantages of this system, also says:

"Le principe économique exige que les frais d'entretien et de traitment des aliénés soient réduits au *minimum*, et que ces frais soient couverts, *s'il est possible*, par le produit seul du travail des aliénés, après l'introduction complète et rationnelle de la réforme."

I reply that no one, familiar with the real life of the insane, would venture to promulgate so unlikely an idea as that of there being any possibility of the product of their labour sufficing to pay the cost of the maintenance, and treatment of the insane poor. I submit this opinion with confidence to the judgment of all men of experience.

3. *The curative results of agricultural lunatic colonies, (le principe médical).*—I accept Baron Mundy's definition of the medical principle involved in the treatment of the insane. "Le principe médical" (he says), "a pour but 'de guérir le malade curable le plus promptement, et avec douceur s'il est possible; et de rechercher les moyens de procurer le meilleur sort possible aux malades incurables.'"

These results, I hold, are best attained in a public asylum for the insane. I cannot think that in any cottage—be it ten-fold better than those of the Belgian peasants—the varied appliances required in the curative treatment of mental disease are to be found. No

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advocate of Gheel has, however, asserted that agricultural lunatic colonies are fitted for the treatment of all forms of insanity.

"La création des villages d'aliénés" (says Baron Mundy), "*pour tous les aliénés sans exception*, est donc, sans une infirmerie, un centre (un petit asile, si vous voulez) inadmissible et impossible . . . . Il m'a été impossible de trouver un auteur qui eût prétendu *que tous les aliénés, sans exception, peuvent être placés et traités dans les villages.* Tous les défenseurs de ce système ont réclamé une *infirmerie* pour les aliénés *qui ne seraient pas aptes au traitement familial.*"

Now the public-asylum system professes to be, and is, capable of treating all forms of mental disease, and so far has a manifest advantage over this system of colonisation which it is desired to substitute for it.

Let us look at the several classes of mental disease in their relation to the agricultural colonisation system. He would be a bold theorist who would assert that recent acute cases are best treated in a peasant's cottage in the midst of the wife and family. Yet to such lengths does Baron Mundy go in his advocacy of Gheel! 'Un nombre considérable,' (he says,) 'et même une *bonne partie des cas aigus* peuvent, d'après l'expérience et ses résultats, être soignés paisiblement et avec toutes les garanties nécessaires dans les villages d'aliénés.'

One cannot argue with such an assertion save to say that he who makes it is "unversed in the real life of the insane." I would submit my opinion with confidence to any medical man, to say, whether he considers the asylum ward with its trained attendants, its baths, its padded rooms, its secured windows, &c., or the unprotected fireside of the cottager the fitter place for the treatment of acute mania?

Next, take the cases of dementia and those of dirty habits. How are they to be broken of their depraved habits, and drilled into some approach to the form of humanity in a labourer's cottage? Here, also, any one familiar with the real life of the insane must know, what constant labour and supervision, at all hours of the day and night, this reconstructive treatment demands, and how large a proportion of our patients are the objects of it. "The mistake," (writes Dr. Sibbald), "of sending unsuitable cases for treatment is, to my mind, the most fruitful cause of the present defects of Gheel. Demented patients, of dirty habits, form a considerable proportion of the population, and, from what I saw, I have no doubt of the impropriety of subjecting them to cottage treatment. Proper attention to them at night is impossible, and I satisfied myself by observation that their beds are by no means so cleanly as those for similar patients in any well-regulated asylum. The condition of these patients during the day must also be unsatisfactory, as there are no baths in which they can receive that thorough daily cleansing which

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is indispensable to their health and comfort." "These patients at Gheel" (writes Dr. Stevens), "are left very much to follow their own instincts; the melancholic to sit and brood over his melancholy, or to wander about by himself; the chronic maniac with all his varied tricks and depraved habits here has full scope for his perverted ingenuity, varied mischiefs, and dirty practices; the want of care and control, or the so-called liberty in his case aggravating his disorder, and often tending to the enfeeblement of his vitality. The demented drag on their miserable existences to outward seeming very much as they do elsewhere, and so do the paralytic and idiotic, but what is their lot as to warmth, cleanliness, and healthy exercise?"

Lastly, as to the vaunted liberty of the patients under the colonisation system. Possibly the state of the violent and dangerous lunatics at Gheel may accord with continental ideas of liberty. I know not. Yet at Gheel one cannot (writes Dr. Stevens) move one hundred yards without observing the price at which this so-called liberty is obtained; the helpless, purposeless, wandering imbecile is fettered like the hedge-side vagrant donkey; straps or irons around each ancle, and these are united by a strap or chain; one poor wretch was observed with a piece of wood fastened between his legs to check a habit he had of passing out of his homestead by a breach in the hedge; many suffering from more active madness were seated in chairs to which they were tied or strapped, &c.

Of the 800 patients at Gheel (writes Sir James Coxe), 68 are subjected to some degree of mechanical restraint, but in 51 of these cases this is restricted to anklets connected by chains about a foot in length which are worn to prevent escape. About 15 patients wore leather girdles to which their arms are attached by short chains, &c.

And yet Baron Mundy advises us to go to Gheel in order to study the lunatic under a system of liberty! "Une chose que je ne puis pas proclamer à voix assez haute, *c'est qu'il faut avant tout étudier l'aliéné en liberté, et l'étudier pendant longtemps, pour se convaincre s'il mérite la liberté et s'il est possible de la lui accorder.*"

I strongly hold that it is in England rather than at Gheel that means of further extending the liberties of the insane are to be studied, and that it is in the extension of our public-asylum system, in the manner I have previously indicated, rather than in the founding of agricultural lunatic colonies, that further advance in the treatment of mental disease is to be sought for and happily yet attained.

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