Continuity of Work under Altered Conditions. By the Rev. H. HAWKINS, late Chaplain Colney Hatch Asylum.

THE time at last comes when, sooner or later, the old work has to be given up—work of various kinds in different cases. But the special sphere of occupation referred to is that in which the *Journal of Mental Science* is chiefly interested.

One cause or other, failure of health, age limit, fresh employment, or other occasion, brings to an end the active work carried on, perhaps, during many past years. The change of habits and routine, which have become a second nature, is in view, and has to be faced.

The purpose of this brief paper is to suggest the question whether, on retirement from the long-continued work of asylum life, in one or other of its departments, a cessation of interest in the employment of former years is preferable, or whether, under altered circumstances, a continuity of the work which has been the responsibility and happiness of a lengthened period in the past is desirable and practicable. In one aspect the continuity of professional, as of private life, is not altogether optional.

Whether voluntarily or not, memories are revived, the scenes of former labours, *e.g.* infirmaries, wards, etc., present themselves to the "mind's eye." Old familiar forms and faces, many of valued friends, are vividly recollected, and at times memorable events in the past official years are recalled. Though the old vocation has been laid aside, its remembrance cannot be, nor should be, altogether effaced. In any new phase of life there should not be a hiatus as regards the employments of past years.

New occupations to a certain extent take the place of old, according to individual tastes and opportunities, but there should not be, even if it were practicable, entire severance from the work of past professional life.

The case comes to recollection of a distinguished surgeon, a President of the College, who passed his latter years in the country improving his property, regularly visiting London from time to time to fulfil some special medical engagement. It seems almost unnatural, on the termination of the active duties,

https://doi.org/10.1192/bjp.46.194.469 Published online by Cambridge University Press

e. g., of asylum life, even to wish abruptly to cut off communication with the past, to turn one's back upon the scene of past labours and varied associations without any desire henceforward to take some part under new conditions in former occupations, and still to maintain kindly associations with days that are no more.

Of course any sympathetic interest shown in the work taken up by a successor, any slight service rendered in furtherance of objects which formerly engaged one's attention and energies year in and year out, would become on retirement the service and interest of an extern, an outsider, standing aloof but not unconcerned.

Reviewing past errors, deficiencies, neglects, etc., an outgoing official would discover ample cause for suppression of self-complacency, and maybe for frank recognition of greater efficiency in his successor's administration.

But the main purpose of these lines is to consider whether, and in what directions, there may be continuity of the kind of work referred to under altered conditions. And here the question presents itself whether, in the case of those officials whose retirement is accompanied with a pension, the honorarium would not to many be more pleasant and welcome if it were viewed not merely as a recognition of past service, but also as a motive and stimulus for continued interest in former work, and as an acknowledgment of the graciousness of rendering some *quid pro quo* on the part of the recipient. Moreover an honourable feeling would be cherished in the pensioner of still being, in a degree, an active, and not a mere sleeping partner of the corporation.

A few suggestions may be allowable as to some ways in which useful interest may be shown in work no longer actively engaged in. Real pleasure would often be given to an intelligent patient by the receipt from some former member of the staff with whom, perhaps, the inmate has been in daily communication, of some slight but valued memorial—letter, newspaper, book, memento of a birthday or season of the year. A sympathetic visitant of an asylum ward often becomes a patient's friend, a relationship which should be sustained after separation ; and some kindly token, indicating "not forgotten," would pleasantly respond to the question which may have arisen, " Does my old friend remember me ? "

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Looking along his bookshelves volumes may catch the eye, books which are never taken down for the owner's perusal, and which might be profitably forwarded for the instruction or recreation of the inmates of asylum wards. By such contributions continuity of interest and of service might in a very useful way be maintained. And some books not considered likely to be appreciated might find interested readers.

A late distinguished alienist was once referred to as the historian of his speciality. The learned leisure of retired members of his profession might, perhaps, oftener (it is respectfully suggested) find congenial occupation in contributing to the cure or relief of mental maladies by means of treatises upon the writer's speciality, and of communications to professional journals—the valuable result of wide and ripe experience. Such literary employment would be for a certain class of former asylum workers congenial continuity of service.

Again, associations on behalf of the infirm in mind, and of those who minister to them ("after-care," "asylum workers," etc.) would become better known, and rendered more efficient by the attendance on their committees, and by the counsels of former asylum officials, who, prevented from being present at meetings even kindred to their official work during the laborious years of acting and exacting professional life, might yet have both leisure and inclination to do so in a subsequent period of comparative leisure.

Not unremembered by the friend who once was in daily communication with them, are many patients who miss his or her familiar presence or kindly greeting on departure; might not sympathy with mental patients be extended by endeavours to induce (it has been done successfully) kindly disposed persons, here or there, to befriend, by visits or through the post, lonely inmates of asylums? Not only would the lives of these be brightened and cheered, but also the desire to relieve one of the saddest of maladies might be communicated to others. This is certain, that kindly intercourse (of course, under due regulations) between selected patients and friends outside the walls would result in mutual advantage.

Another example of "continuity" may be instanced. Both the harmonious management of asylums and the well-being of their patients largely depend upon the character and efficiency of the main body of the working staff—the attendants and

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nurses. Few persons would be better judges of the suitableness of young men and women in quest of such employment on the staff of an asylum than former officials in the service.

Occasions might arise when an applicant with aptitude for the special work might advantageously be introduced to the management, and thus a double service, both to the staff and to the candidate, rendered.

"Continuity" of work from a religious point of view would be valued by many. Not a few of the afflicted in mind in asylums—there to remain, perhaps, during life's residue—have become familiar friends to former members of the community.

Some of these, on retirement, would wish to preserve remembrance, before God, of those to whom they had become attached. The words of a graceful living writer are suggestive: "You go over the dear names, sweet beads of the heart's rosary, telling one by one to God, with their several wants and needs." No doubt there may be more especial reference to a closer relationship than exists between an official and a patient. Yet there are those who appreciate, in its degree, the relationship.

The foregoing suggestions may perhaps serve feebly to illustrate the design of this paper to plead for continuity of service, with particular reference to one branch, under varied conditions and altered circumstances.

It would be appreciated as partial compensation for the inevitable discontinuance of the daily routine which afforded in bygone years active employment for mind and body.

Moreover, continuation in some shape of former work would diminish the feeling of professional *isolation*. In retirement there would be agreeable consciousness of still being "in touch" with the work and workers of other days. And though more recent interests and occupations would take their place in the foreground, yet, by the continuity referred to, the completeness of a career would be better maintained.

No doubt the prospect of severance from former companionships and associations is to some natures exceedingly painful. After very many years of service an honoured medical superintendent described his withdrawal from office as a "screw-wrench."

Might it not be the wiser course, in many cases, on retirement from official life not to acquiesce in *entire* estrangement between past and present, but, in entering upon a fresh phase of existence, which well employed brings its own special bene-

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fits in their season, to endeavour to be still of some slight use on the field of former labour by "continuity of service under altered conditions"?

An Analysis of One Thousand Admissions into the City of London Asylum.(1) By ARTHUR E. PATTERSON, M.D., Senior Assistant Medical Officer, City of London Asylum, Dartford.

IT is obvious that it would be quite impossible within the short limit of time at our disposal to enter into a full and complete account of all the data collected with reference to these admissions, which commenced on January 1st, 1892, and terminated on December 31st, 1899; I will therefore confine my remarks to the more important features presented by them.

The very great majority of rate-paid patients admitted here have previously been found wandering in the City of London, having come not only from various parts of England, but from all quarters of the globe; and they therefore show the most diverse and interesting forms of mental disease, whilst almost every nationality is met with amongst them.

We first commenced to take private patients on January 1st, 1892, and the first patient of this class—a lady who is still with us—was admitted the very next day. The reception of private patients has been attended with marked success, and there can be no doubt that the accommodation for them is highly appreciated, as is proved by the fact that we often have to refuse cases simply from want of room; this taking of the private class also tends very much to elevate the general tone of the asylum, and not only acts beneficially on the rate-paid, but instils greater interest in those responsible for their care. Whilst on this subject it may be of interest to state that during the eight years under notice 120 males and 158 females were admitted as private patients, 33 males and 7 females being subsequently transferred from the rate-paid to the private class, making a total of 153 males and 165 females, or 318 of both sexes under treatment as private.

https://doi.org/10.1192/bjp.46.194.469 Published online by Cambridge University Press