THE POOR LAW MAGAZINE
AND
LOCAL GOVERNMENT JOURNAL.

THE INCREASE OF PAUPER INSANITY.

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REGISTERED Pauper Insanity in Scotland has, as shown by the Reports of the Commissioners of Lunacy in Scotland, steadily increased from quinquennium to quinquennium to an enormous extent within the last 40 years. This increase is undoubtedly most alarming at first sight. There are, however, many factors involved in the production of this increase, and a careful consideration of these reveals facts that are reassuring, as well as facts that are disquieting. I propose to deal with the various aspects of the question of the increase of pauper insanity as they present themselves to my mind, hoping that my ideas may prove suggestive.

The treatment of the insane on a humanitarian basis is very modern, and their treatment from the scientific point of view, which regards insanity as a more or less curable disease of the brain, is a thing of very recent years.

In the Middle Ages the insane were regarded as beings possessed by devils, cursed of God, something lower than the beasts that perish, and like wild and injurious beasts the insane poor were thrust away from human haunts to live or die as God pleased. The insane of monasteries, or of rich families, were imprisoned under the care of priests or nuns, and subjected to rigorous discipline directed towards driving out the evil spirits.

Bethlehem Hospital, in 1547, became the first hospital devoted to lunatics, but it was a prison, not an hospital, and should rather be described as a human Zoological Garden, for the people went
to see the unfortunate lunatics, who were chained to the back walls of their iron cages, slept on straw, and were often without necessary clothing, as to a show. The treatment of the insane was scarcely better than this in Great Britain until the end of the 18th century, when William Tuke founded the Retreat at York for the curative treatment of insane members of the Society of Friends. In "Hard Cash," published in 1868 by Charles Reade, we have a fair description, somewhat exaggerated however, of the lunatic asylums of that date in too many cases. Lunacy statistics in Scotland began about 1860, the Lunacy Board having entered on its functions 1st January, 1858.

Since 1860, there has been a steady growth in the numbers of insane paupers in Scotland, both absolutely and relatively to the population. In other countries, so far as I can ascertain, there has been nothing to compare with this increase, and the proportion of insane persons to the general population is generally much smaller in other fairly prosperous civilised countries, with the exception of Ireland, where it is still larger. In 1890 in the United States, the actual number of insane persons to every 100,000 of the general population, omitting idiots, was 170. In Scotland in 1891 it was 259. In 1880, in Austria, it was 135; in Hungary, 81; while in Scotland in 1881, for pauper lunatics alone, it was 209 on the average of the ten years preceding, and in 1885 it had grown to 232. In Prussia in 1880 the number of insane of all classes, including idiots, was 243 per 100,000, and the corresponding figure for France in 1879 was 252. Including idiots, there were in the United States in 1890, 323 insane persons per 100,000 of the general population; in England and Wales 1891, 336; in Scotland 1891, 384; in Ireland 1891, 450; in Austria in 1890, 217. In this connection it is only fair for the credit of Scotland to give other figures to her credit and to note that in France the suicide rate, in the period 1871-80, was 161 per million, and it had risen to 212 in the period 1885-88. In Prussia 1871-80 the rate was 153, and in the period 1885-88 it was 204, while in Scotland 1874-94 it was 55, in England and Wales 1858-83, 67, and in Ireland 1881-90 it was 23.

Among European nations, Great Britain, with a high rate of insanity, has a low rate of suicide, though probably the figures are too small for the latter, as juries are loath to bring in a verdict of felo de se if it can be avoided. The French suicide figures are for the same, and much more powerful religious reasons, much too small also, large as they are. On the discredit side is the fact that, in the United States, while the average ratio of cases of alcoholic insanity is 7:7, 12:2 in males and 3 in females of all cases of insanity; among males, whose mothers were born in Scotland, the proportion is 19.8, and among males born in Ireland 19.1. According to some authorities this rate is at least 20 per cent. in Scotland.

On the whole, it appears that Scotland has a most unenviable predominance as regards the production of insanity among civilised nations, and compared with an ancient race such as the Egyptians, the proportion of insane persons in Scotland appears quite extraordinary. Egypt with a population of six millions has one lunatic asylum containing 600 patients. Scotland with a population of 4,025,647 in 1891 had no fewer than 10,477 pauper lunatics on 1st January, 1899, 15,399 lunatics of all classes and on 1st January, 1901, 15,663. Since 1858 the ratio of ordinary paupers to the general population has fallen considerably. In 1858 it was 2,630 per 100,000 of the population; in 1892 it had steadily fallen to 1,400, its lowest point; the following year showed a rise of 48, and it has risen gradually until at the present time it is 1507. Since 1858 the number of lunatics of all classes has risen from 5,824 to 15,399 on 1st January, 1899, an increase of 164 per cent., the increase of population being only 41 per cent. That the major portion of this increase is in pauper lunatics, the ratio of admissions shows, there having been placed on the register as private patients in 1858, 406 patients; in 1898, 581; an increase which does not correspond to the increase of population, when the great increase of wealth in the country is taken into account, but it must be remembered that all private patients are not in asylums and registered; they may, however, be safely assumed to be registered to at least one-half of their number I think. The corresponding figures for paupers are 1,042 and 2,936, i.e., an increase of 175 private patients on 406, or 43 per cent., while the increase of pauper lunatics is 1,884, or 180 per cent. on the number in 1858; thus the increase of attacks of lunacy in paupers is four times greater than that of private patients, according to the figures.
and even if we assume as previously suggested that only one-half of the private patients are registered, an assumption which does not err on the side of insufficient allowance, I believe the number of first admissions is twice as great in pauper lunatics as in private lunatics. It is clear that there must be causes at work in increasing pauper lunacy, which are not operative in private cases. Mental stress produced by modern life at high pressure must, therefore, be eliminated, as this would be more likely to bear hardly upon the rich than the poor. Moreover, the increase has been much more marked in country than in urban districts, and still is so to a large extent, with the single exception of Haddington. In this case special circumstances account for the difference. Thus in Argyllshire the annual average of pauper lunatics from 1861 to 1895 has increased from 273 per 100,000 to 529, and is in 1901, 571. In Inverness the increase is from 228 to 491, the number in 1901 being 549; Ayr is 122 to 254 and 284; Bute, 218 to 413 and 433; Caithness, 240 to 450 and 502; Orkney, 171 to 339 and 399; Shetland, 152 to 402, but decreased to 398 in 1901 Elgin, 201 to 438 and 446. In general the more sparsely populated and least civilised counties have suffered most, Edinburgh having increased its proportion from 226 to 247 and 264 Aberdeen from 185 to 280 and 304; Dumfries, 191 to 235 and 263; Lanark, 106 to 220 and 247; Stirling, 141 to 226 and 250. At the present moment the highest proportions of lunatics are to be found in such counties as Argyllshire, Bute, Caithness, Elgin, Inverness, Ross, Shetland, Sutherland, Perth, Kinross, Nairn, Orkney. It is precisely these counties that were most backward in civilisation until railways came. In the most northern districts even 50 years ago, the condition of the people, as distinguished from the gentry, between whom and the poor there was a deep gulf fixed, was deplorable; and 100 years ago, in all material conditions of life, they were not far removed from their state in the days of St. Columba. Until the advent of steam communication and the manufactures that steam has made possible, and the mining following on the wants of steam, Scotland was an extremely poor country. In the days of Queen Mary when France and Belgium were rich and prosperous countries, which had many splendid public and private buildings, and convenient residences for the middle-class traders, Scotland was a poverty-stricken, wild, and semi-barbarous country, whose towns were composed of mean houses huddled together, in which nothing but the barest necessaries of life was to be found. Compare Inverness with Antwerp or Rouen! There is no building in Inverness that claims any interest of antiquity. Were it not for the railway, what would it still be?

It is well known that sudden prosperity is apt to unhinge a man's brain. The millionaire, who has made his money rapidly and risen from nothing, very frequently becomes insane. May it not be the same with communities as with individuals? Revolutions of the political kind are fertile in producing insane persons, both during the revolutions and in the children born afterwards. A social revolution, far reaching in its effects and bringing enormously increased prosperity in its train, has taken place in Scotland within the last 50 to 60 years. Is it not extremely probable that the greatly increased prosperity of the country, resulting in luxury unheard of before, may have affected the sanity of the people? We have seen that in the places most prosperous before, such as Edinburgh, where the change in living has not been so great comparatively, insanity has not increased more than is to be expected in a city which is crowded and is increasing at a very rapid rate. In Argyllshire, and other counties where the prosperity of the people has increased by leaps and bounds, insanity has increased enormously. I know not how far prosperity, including a much richer diet, may be a cause of insanity generally, when it follows a youth of penury, but I have known at least one case where this was so, in the family of a farm labourer who had ten children and nine shillings a week wages. The children went to a manufacturing district, and got high wages as domestic servants and otherwise, as they grew up, and one eventually became insane, while two others were apparently on the way to become so. They were not at all alcoholic. The change from a black hut in the Island of Harris, for instance, to life in a gentleman's house in Edinburgh for domestic servants, is the change from the 13th to the 19th century. It would be instructive to know how many of the enormous number of pauper lunatics now chargeable in the northern counties have been returned to their parishes insane after having transferred their
residence to large towns. In the Appendix to the 17th Report of the Board of Lunacy for Scotland, 1875, Sir John Sibbald dealt with this question, and he shows that among the numbers of lunatics in country places in 1875 were many lunatics who had become insane in towns where they had not acquired a settlement, and had been returned to their native parishes which they had left long years ago. Thus the lunatics placed on the Register in 1872, classified as belonging to the principal towns by chargeability, were 638, or 54 per 100,000; classified as belonging to the principal towns by residence, there were 732, or 62 per 100,000. In a parish in Argyllshire there were lunatics chargeable, but only 6 of these became insane while living in the parish.

Prosperity also brings in its train increased power to purchase harmful luxuries, such as excessive stimulants.

There is another element in the growth of pauper lunacy which is of great importance. It is in the parts of the country which have been longest supplied with lunatic asylums that the increase is least. Insanity is emphatically a hereditary disease. In places where the insane have been for a considerable time placed under restraint the hereditary cases should naturally be fewer. Insanity seems always to have been prevalent to a very large extent in Scotland. It is well known that, before the days of systematic registration of lunatics, hundreds of these poor creatures were allowed to wander about the country as 'gangrel bodies' and village 'naturals.' No one knows how many there were who were looked upon merely as weak-minded or eccentric in the past generation—and who were allowed to go free and to perpetuate their kind, whose descendants are now increasingly crowding our lunatic asylums. In this view the increasing number of lunatics who are brought under care should be a cause of thankfulness, and the next generation should see a decrease in their numbers which should continue in an increasing ratio.

‘Kay’s Portraits’ do not give one the impression of being those of a very sane generation, and the histories of old times show that many persons were received in society, and their eccentricities tolerated, who would be regarded as insane at present. ‘Cockburn’s Memorials’ are an illustration of the argument.

It is impossible that the excessive drinking of the end of the 18th century and the beginning of the 19th should not have left its mark upon the nation. There are no reliable statistics regarding the prevalence of drunkenness anywhere. The numbers of convictions are a very uncertain guide, as everything with regard to them depends upon the state of public opinion among the surrounding population, and the consequent estimate of the governing body as to what constitutes drunkenness considered as an offence against law and order.

Drunkenness and immorality have been for generations the favourite sins of the Scottish people, and both are fertile causes of insanity, both in the parents who commit them, and their children who suffer for the sins of the parents. I think it can scarcely be pure coincidence that a high rate of insanity accompanies a high rate of illegitimacy in many counties, and that in counties where the rate of insanity is low the illegitimacy rate is also low in many instances.

There is another reason for the increase of pauper lunatics, and that is the tendency for chronic cases to accumulate in asylums. In many cases chronic lunatics may be more appropriately and economically maintained in private houses, but unless Parish Councils are alive to their duties, and exercise vigilance over their officials, cases are allowed to remain in asylums, at a heavy cost to the ratepayers, who might be boarded out in the country as invalids at very much less expense, and to the benefit of the patients. Also many senile dementia cases could be more cheaply maintained in ordinary poorhouse hospital wards than in asylum wards; but having been sent to the asylum at the more violent period of the disease they remain there, unless the parish should take them into the poorhouse, because they cannot be discharged as cured, and are not fit to be sent to the care of private persons.

It is becoming the rule among working people to refuse to retain moderately insane relatives in their houses. Parents who have become childish and troublesome, and children who are, as it is called, 'wanting,' are brought to the parish authorities without scruple, where formerly they would have been allowed to go in and out of the house or sit by the fire, and share the family meals.
There are various reasons for this. One of the most important is undoubtedly the expense of house accommodation in towns, and the narrow space in which families are condemned to live from this cause. It is not possible in a one or two roomed cramped house, probably up a stair, and possibly three or four stairs up, to find proper space for the insane member. That being so, the patient is sent to an asylum, and the rate of board in asylums having become far too high for any ordinary working man to meet, still less a working wife, the patient becomes chargeable to the ratepayers in whole or in part. Pauper insanity has increased, while ordinary pauperism has decreased. This is owing to the fact that many persons, who would not allow ordinary infirm or old relatives to become chargeable, are unable to pay the lowest rate of private board—i.e., £40—for an insane relative, and consequently have to allow him to be put on the pauper roll, even where they pay the greater part of the cost of his maintenance, which is on the lower scale of the pauper lunatic.

I think the system of flats is not good for the mental health of the community. In the first place, there is more wear and tear of temper from the restricted space. In the second place, there is much less fresh air, as the air that enters from a stair is different from the air that enters from a cottage door, and the very poor do not open windows. Indeed, it is not so long since houses for well-to-do people in Scotland were built with windows that would not open, and till a much later period they only opened from the bottom. Fresh air is as essential for brain health as is wholesome and sufficient food, and it is to be feared that the poor, the mothers especially, get little of either in our slums. Fresh air and porridge, though a bare enough diet, has produced sturdy mothers, hence their children suffer. Women's wages are very small in Scotland generally, the textile industries excepted. The average rate of pay for women in Edinburgh, for instance, is about one-third less than the average of women's wages in Lancashire. This affects the physical condition of women before marriage when they have no fathers to supplement their earnings, and thus reacts on their children. They are very ignorant as to how to care for their children, either in food or general hygiene. They send their infants down to the street in charge of an older child, and let them injure their brains with exposure to sun in summer, and their lungs with exposure to bitter wind in winter, and still worse, they injure their brains directly with giving them sleeping draughts to keep them quiet, or even spirits. The children of the slums grow up with impaired constitutions, and in their turn bring
children into the world who are more degenerate than they are themselves. It has been shown again and again that the population of the towns is kept up by continual drafts from the country.

In the East-end districts the fourth generation of a London family is not to be found. The people come from the country, and by the fourth generation the family is extinct. The slums of a large city form a hole down which the country people fall and disappear, and before the complete extinction of the family, some have become insane.

On the whole, country life produces less insanity than town life, where the question is not complicated with other considerations, as in parts of Scotland. It would seem reasonable therefore in view of the very large proportion of insanity in cities, that measures should be enforced to minimize the evils of town life, as far as that can be done, in the interests of our city ratepayers.

There will always be a much larger proportion of insane people among the poor than among the well-to-do, however. Bad conditions of life, working at monotonous occupations where there is a continual strain on the attention, as in the case of railway servants, dangerous trades, accidental injuries to the head producing insanity, alcoholic excess, dyspepsia from bad food, anaemia from want of food, poisoning from drains and bad air, lack of mental control from defective training acting on inherited nervous instability, and in women the insanities due to sex conditions, or to defective nutrition and bad sanitary conditions, are naturally much commoner among the poor.

Relapses are more likely to occur among the poor owing to difficulty in obtaining work after discharge from an asylum, and I do not think that parish authorities have realised that they have any special duty to perform towards the cases discharged from asylums. Timely help would be a most economical thing.

Further, when a rich man shows signs of nervous breakdown he is sent away for a sea voyage, or to some quiet country place where he can vegetate till his jarred nerves can regain tone. The poor must continue where they are, and struggle on under all sorts of trying conditions till they actually cross the borderland and go to find the rest and peace in an asylum, which, could they have obtained them earlier, might have saved them from entering its doors. This is being ‘penny wise and pound foolish’ to the last degree. We have not yet sufficiently realised that insanity is an illness like other illnesses only more incapacitating. When a man is threatened with liver or lung disease, or when such disease has actually begun, the doctor is called in, and if he thinks it wise, he may send the patient to the hospital, either the public hospital or the poorhouse hospital according to circumstances, for a rest. Rest in commencing brain disease is very much more necessary, but is not obtained by the patient or suggested by his friends.

The symptoms of his brain disorder are looked upon as manifestations of original sin, and the poor man is buffeted about and scolded for what is no fault of his. The average uneducated person is not very far removed from the Middle Ages’ idea in his conception of insane persons.

Our knowledge of the human brain and its working is not very far advanced yet, but it is making great progress, and it is to be hoped that the efforts being made all over the country to study and cure the great army of lunatics who burden Scotland, will in time prove successful in materially reducing it. The mass of lunacy, actual and potential, which existed uncared for prior to 1858, and which was probably largely the result of the extreme poverty and excessive drinking of the country (in the North especially), and which has gradually filled the asylums as these have been opened, will diminish as these people, and the insane descendants of these people, die in asylums. From henceforward, moreover, we shall have the actual totals of the insane people in the country in the lunacy returns, as now already nearly every poor insane person comes under the cognisance of the Commissioners. They will thus cost more individually, but the change will be for the ultimate benefit of the community without doubt, as well as for the immense advantage of the sufferers.