

1902.
NEW ZEALAND.

LUNATIC ASYLUMS OF THE COLONY

(REPORT ON) FOR 1901.

Presented to both Houses of the General Assembly by Command of His Excellency.

The INSPECTOR-GENERAL of ASYLUMS to the Hon. the MINISTER of EDUCATION.

SIR,—

Wellington, 18th February, 1902.

I have the honour to lay before you the following report on the lunatic asylums of the colony for the year ended the 31st December, 1901:—

The number of registered insane persons on the 31st December, 1901, was 2,773—Males, 1,654; females, 1,119, being an increase of 101—males, 73; females, 28—over the previous year.

The insane of the colony are distributed as follows:—

	Males.	Females.	Total.
Auckland	322	193	515
Christchurch	303	243	546
Dunedin (Seacliff)	423	226	649
Hokitika	85	31	116
Nelson	85	54	139
Porirua	264	251	515
Wellington	152	100	252
Ashburn Hall (private asylum)	20	21	41
	1,654	1,119	2,773

The proportion of the male insane to the male population is,—

New Zealand (exclusive of Maoris) ... 3·97 per 1,000, or 1 in 252

New Zealand (inclusive of Maoris) ... 3·78 " 1 in 264

The proportion of the female insane to the female population,—

Exclusive of Maoris ... 2·96 " 1 in 337

Inclusive of Maoris ... 2·84 " 1 in 352

The proportion of the total insane to the total population,—

Exclusive of Maoris ... 3·49 " 1 in 286

Inclusive of Maoris ... 3·34 " 1 in 300

ADMISSIONS.

On the 1st January, 1901, the number of insane persons in our asylums was—Males, 1,581; females, 1,091; total, 2,672. The number of those admitted during the year for the first time was—Males, 281; females, 186; total, 467. The readmissions numbered—Males, 92; females, 38; total, 130.

DEATHS.

The percentage of deaths on the average number resident during the year was 6·41, as compared with 5·61 for the previous year. The percentage of deaths on the admissions was—Males, 31·87; females, 32·29; total, 32·04.

RECOVERIES.

The percentage of recoveries on the admissions was—Males, 39·06; females, 46·64: total, 42·17, as compared with 39·64 for the previous year.

FINANCIAL RESULTS OF THE YEAR.

The following table gives the gross and net cost per patient for the year 1901, as compared with the previous year:—

Asylum.	1901.			1900.			1901.	1901.
	Total Cost per Patient.	Total Cost per Patient, less Receipts for Maintenance, Sales of Produce, &c.	Total Cost per Patient.	Total Cost per Patient, less Receipts for Maintenance, Sales of Produce, &c.	Increase.	Decrease.		
	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	
Auckland ...	24 6 0	17 6 2	25 0 1	18 2 9½	...	0 16 7½		
Christchurch ...	26 6 4¼	17 12 11¾	26 19 9	20 7 5¾	...	2 14 6		
Seacliff ...	28 13 1¾	19 17 8	27 3 1	20 13 8	...	0 16 0		
Hokitika ...	26 16 9	24 18 2	25 15 5	23 4 2	1 14 0	...		
Nelson ...	33 12 11½	26 16 4¼	31 10 11¾	24 14 7¾	2 1 8½	...		
Porirua ...	27 19 0	22 18 6¼	27 6 11	23 18 9	...	1 0 2¾		
Wellington ...	36 6 3½	28 6 0	33 19 2	24 19 10	3 6 2	...		
Averages ...	28 1 11½	20 16 11½	27 11 11¾	21 9 5¼	..	0 12 5¼		

The total receipts for the sale of produce, &c., from the farm for 1901 amounted to £3,178 10s. 3d., as against £2,498 1s. 10d. for the previous year.

ENTRIES OF VISITS TO THE DIFFERENT ASYLUMS.

AUCKLAND ASYLUM.

14th November, 1901.—To-day and yesterday I have been engaged in examining this Asylum. The accommodation on the female side is now full up, and overcrowding must be the result from this date. The Government not having seen their way to agree to my urgent appeal for a new asylum, I am now reduced to fall back on an alternative proposal—namely, to build a new laundry, so as to enable us to put a second story on the old laundry; when on, the two floors thus set free, we could accommodate forty more female patients. This we could do ourselves, at a cost of £750, as estimated by Mr. Vickerman, and that without the necessity of employing any outside labour. I strongly urge the Minister to relieve the department of the threatened dangers by getting at once authority for this expenditure under Mr. Vickerman's supervision. The £750 is for the new laundry alone; the second story I will get an estimate for. The patients this day number—males, 321; females, 192. I examined the food, clothing, bedding, &c., and found everything in a most satisfactory state. The new hospital wing on the male side is an excellent building, and is an immense advantage in the working of the institution. Dr. Beattie is carrying out the ventilation of the buildings, which was very much needed; on the female side an immense improvement has been already effected. I found four men and two women only confined to bed, all under proper care. Since Dr. Webster left, Dr. Beattie has carried on the institution single-handed, and it is only due to him that I should record my admiration for the results of his admirable energy, care, and devotion to duty. The whole staff appears to be animated by an excellent spirit. Mr. Newport has gone back to his old asylum at Sunnyside. His work at this institution was excellent in all respects. He has been succeeded by Mr. Farrant, whose work at Mount View Asylum for many years marked him out for promotion. I hope he will fully justify the responsibility which has been cast on him by his promotion to Auckland.

Visited by Deputy Inspector, 30th May, 1901, and 6th February, 1902.

CHRISTCHURCH ASYLUM.

2nd December, 1901.—I find this Asylum is working very satisfactorily in all its departments. All the clothing is suitable. The dinner to-day was excellent in quality and abundant in quantity. The total number of patients is 549—males, 304; females, 245. Those who are confined to bed under treatment number nine men and ten women. The amount of restraint shown by the register is very moderate, and each case is carefully recorded. The unemployed amount only to ninety-three males and sixty-one females. I think the time has arrived for removing the piggeries. The north house will serve its present purpose for some time longer, though it is a good deal worn out. The overcrowding on the male side, *i.e.*, excess over the statutory accommodation, is eighty, and the female side is full. This state of things makes it very difficult to deal with the cases of erysipelas which occur here at intervals. The vigour and efficiency of Dr. Levinge's rule is everywhere manifest, and the staff on the whole is working well.

Visited by Deputy Inspector, 9th September, 1901, and 8th and 10th January, 1902.

SEACLIFF ASYLUM.

28th November, 1901.—I found six males and five females in bed, all being carefully treated. I saw an excellent dinner served out, the distribution occupying exactly ten minutes. The plates were warm, and the order and quietness very satisfactory. The total number of males is 417; females, 223. Six males and eight females are wet or dirty cases. Two hundred and ten men are working outside, and 103 inside. Fifteen women are in the garden picking gooseberries. A very beautiful site has been chosen for the new nurses' home. The building is very suitable, and very picturesque in design. Both this and the row of new rooms on the female side will be ready for occupation as soon as the needful furniture can be procured. No further building operations ought to be undertaken here; the overcrowding must be provided for elsewhere.

Visited by Deputy Inspector, 30th June and 26th August, 1901.

HOKITIKA ASYLUM.

Visited by Deputy Inspector, 29th April and 26th December, 1901.

NELSON ASYLUM.

11th November, 1901.—I found the whole Asylum in good working order. The patients are all carefully attended to by Dr. Mackie. The general discipline of the institution is good. Fifty male patients are working on the farm and garden. The porch at the cottage-building on the hill is now being built, and it will be a great protection from the north-east. The farm is rather backward owing to the unfavourable season. The new piggeries and workshops are very urgently needed. Many of the fruit-trees seem to me to be too old, and many of the apple-trees are useless from American blight. The patients are well clad, and all their beds are clean and comfortable. I found only one woman in bed. The chronic difficulty about the water-supply is causing much trouble and anxiety. Mr. Fell and Mr. Melhuish are very interested in all that concerns the good of the asylum, and I owe a great deal to their disinterested services.

Visited by Deputy Inspector, 3rd July, 2nd November, and 16th December, 1901.

PORIRUA ASYLUM.

8th July, 1901.—This Asylum is working well in all its departments. The patients are all warmly clad. Their dinner was abundant and good.

Visited by Deputy Inspector, 22nd May, 17th August, and 2nd October, 1901.

WELLINGTON ASYLUM.

6th November, 1901.—The extension of the refractory day-room is a great boon to the female patients. I find everything in good order. Dr. Gow, notwithstanding Dr. Coker's absence on leave, has kept everything going smoothly. The patients are all very suitably clothed, and well cared for in every respect.

6th February, 1902.—I have made a careful examination of this Asylum to-day. The number of patients is 256—males, 153; females, 103. Only three women are in bed, none seriously ill. I found the dinner excellent; broth first-rate, mutton, potatoes, and rice-pudding. The whole Asylum is kept scrupulously clean, and is in good order. The patients are all suitably clad. I found the stock carefully kept. A good spirit inspires the staff, though there is a good deal of dissatisfaction and some changes, which are attributable to the recent agitation for shorter hours and an increase of wages. Dr. Gow is absent enjoying his well-earned holiday, and his duties are very satisfactorily performed by Dr. Young.

Visited by Deputy Inspector, 21st May, 15th August, 14th October, 5th November, and 10th December, 1901.

ASHBURN HALL.

29th November, 1901.—I have gone all over this institution, and found everything in good order. The patients are—women, 22; men, 21. All are carefully looked after in every way. The

buildings are clean and comfortable, the staff efficient, and the grounds and surroundings beautiful. All who have relatives here may rely on it that they are well treated and cared for. The cottage has been made very attractive and comfortable.

Visited by Deputy Inspector, 27th August, 1901, and 9th February, 1902.

MEDICAL SUPERINTENDENTS' REPORTS.

AUCKLAND ASYLUM.

SIR,—

I have the honour to forward my report for 1901.

Our population increased during the year from 487 to 515. Unfortunately the admission-rate continues high. It is pleasing, however, to note that only thirty-seven female patients were admitted; and it was fortunate, both for ourselves and for the patients, that that was so. Our accommodation for females is overtaxed, and with an average increase present discomforts and difficulties would have been intensified.

The average number of patients resident for the year was 502·25; the percentage of recoveries, 40·7—males, 32·89; females, 56·75—and the percentage of deaths, 7·17. Of those who died, 22·2 per cent. were tuberculous.

I regret to record that four cases of typhoid fever came under treatment during the first three months of the year. These are the only cases I have had to deal with since I first became connected with the Asylum. One male and one female attendant and one male and one female patient were attacked. The male attendant, who had been ill for probably a fortnight before making complaint, died a few days afterwards. He was a young man of more than average ability and one of the best attendants I have had. His loss was severely felt by myself and by the whole staff, with whom he was a general favourite. I am of opinion that his condition was clearly traceable to the Auckland City nightsoil depot at Point Chevalier. The other three cases, which were probably due to the first, recovered.

The general health of the patients has been good, although we have now a large number of old and feeble patients, who are gradually showing signs of more rapid decay.

The usual work of the Asylum has progressed very favourably during the year, whilst a large amount of work has been done in the ventilation of the main building and in various unseen directions.

The new female airing-court was opened early in the summer, and has proved a great acquisition. The female patients now having about 3 acres of ground for recreation, have become less difficult to control, and consequently less irksome to the nurses, whilst the general health has much improved, and the constant friction and irritations induced by more cramped confinement have been to a large extent removed.

The new male hospital wing was opened in October. It is the most convenient portion of our Asylum. It is sun-exposed for the whole day, and commands an extensive view of the upper reaches of the harbour and many miles of landscape.

I desire again to draw attention to the urgent need for increased female accommodation. We are unfortunate in this Asylum in having a very large refractory female population, and our indoor accommodation for these patients is quite inadequate. I am pleased that my suggestions for increasing the accommodation have been approved, and I trust that there will be no unnecessary delay in authorising the commencement of the work.

My thanks are again due to the officers and staff for their loyalty and devotion to duty; to the Official Visitors, who exhibit unflinching interest in the welfare of the patients and the Asylum, and who are always ready to assist me with solicited advice; and to the Fire-brigade's Band, and the proprietors of the *Herald*, for music and newspapers furnished gratuitously.

I have, &c.,

R. M. BEATTIE,
Medical Superintendent.

The Inspector-General of Asylums, Wellington.

SUNNYSIDE ASYLUM, CHRISTCHURCH.

SIR,—

I have the honour to submit the annual report on this Asylum for the year ending 31st December, 1901, together with the usual statistics of the admissions, discharges, and deaths, as follows:—

					Male.	Female.	Total.
<i>Admissions.</i>							
Admitted first time	...	...	...	...	47	38	85
Readmitted	...	...	...	...	10	9	19
Totals	...	...	...	...	57	47	104
<i>Discharges.</i>							
Recovered and relieved	...	...	...	...	15	23	38
Not improved	...	...	...	...	1	1	2
Totals	...	...	...	...	16	24	40
Number discharged who were admitted during year	...				10	16	26
Number died	...	"			10	2	12
Number remaining	...	"			37	29	66
Totals	...	..	...	...	57	47	104
<i>Deaths</i>	...	...	...	...	21	11	32

Percentage of discharges of first cases on admissions	...	...	...	30 $\frac{1}{2}$
" all discharges on admissions	...	...	...	36 $\frac{7}{8}$
" deaths on admissions	...	...	...	30 $\frac{1}{8}$
" deaths on number under treatment	...	...	...	5 $\frac{1}{2}$

On the 1st January there were 514 patients on the Asylum books, viz.: 283 males and 231 females, which, together with 104 admissions, gave a total of 618 under treatment for the year, being fifty in excess of the previous year. This augmentation is chiefly accounted for by the increased number of admissions—viz., thirty-eight, as compared with those of the year 1900, when they were remarkably low.

Of those admitted for the first time during the year under review over 30 per cent. were released in the same period, while the percentage of all those discharged relieved or recovered on all admissions was over 36 per cent. If this percentage is not as high as that obtaining in the asylums of the Old Country, it must be remembered the difference in the class of patients committed to this Asylum, which has become a dumping-ground for defective troublesome children, and old people in their dotage, who elsewhere would be sent to other more suitable institutions or homes. In fact a very large proportion of the admissions, composed as they are of epileptic, imbecile youths and children, and senile cases, are most unfavourable as regards recovery, and have become a burden and clog on the proper functions of the Asylum, rendering it more of an alms-house than a hospital for the insane, preventing any proper efficient classification, and, I have no hesitation in saying, interfering with the recovery of curable cases. This abuse has been pointed out by myself and my colleagues in previous years, and last year was put before you very forcibly by Drs. Truby King and Gow, as well as myself, in connection with our respective Asylums. It is becoming more aggravated each year, but it seems as if some serious accident only will put a stop to the committal of such cases here, for it is highly dangerous to the old people, as it is quite impossible to classify them with due regard to their safety from the violence of their fellow patients. But the practice is not only wrong to the individuals themselves, it is also a needless slur on their posterity.

The recovery-rate is thus much below that of the previous year, and this largely accounts for the increased accumulation referred to below.

There were thirty-two deaths, against fifteen for the year 1900, which was much below the average; and these, taken with the discharges, forty, and deducted from the total under treatment, gives the number remaining on the books at the end of the year 1901, viz., 546, which is an increase of thirty-two, or an excess of twenty over that of the previous year. Of the thirty-two deaths, twelve were of patients admitted during the year, of whom five were over seventy, and eight over sixty years of age.

Four cases of enteric fever, one male and three females, occurred towards the end of the summer, but all made good recoveries, though one had several relapses and was thus prolonged. The male patient was not specially isolated for want of some proper accommodation, yet no further cases occurred in that division. The females were treated apart from the others as far as the means permitted, and the disease was thus confined to the few mentioned. I was quite unable to assign the cause of this outbreak, for the patients had had no communication with the outer world which could reasonably account for the infection; and the fact that the disease was limited to so few was proof, I think, that it was not due to any insanitary condition in the Asylum itself.

Two cases of scarlatina, one in the male and one in the female division, also developed; the latter was in a patient who had just given birth to a child, who, being mentally convalescent, was

removed by arrangement to the hospital, where she eventually recovered. The male patient was treated in the Asylum, and also recovered, and, though no special arrangement could be made for his isolation, the disease was confined to him. Scarlatina was at the time prevalent in Christchurch and the surrounding districts, and the fact that it did not spread further in the Asylum is additional evidence of the satisfactory sanitary condition of the institution.

Two patients gave birth to children in the Asylum during the year: one (referred to above) during arrangements for her removal to her friends, subsequently contracted scarlatina; the other, the subject of acute mania, whose release was out of the question, and who was in very low physical condition from prolonged excitement, developed septicæmia from which she died. In both cases the children were removed as soon as practicable.

There were no suicides, fractures, or serious accidents involving life.

The overcrowding, especially of the male division, has become greatly aggravated, without any apparent prospect of relief, though it has been repeatedly brought under the notice of the Department by myself and others in their official reports of recent years, and its alarming nature pointed out. I am powerless to do more, and can only disclaim responsibility for the condition and the consequences. On the female side the single-room sleeping-accommodation is not nearly sufficient, so that the proper and safe classification of the patients at night is impossible, many of them occupying dormitories, who, from their objectionable habits or dangerous tendencies, are not fit associates for the better behaved inmates. This has arisen from two chief causes: the extension of the general accommodation from time to time without the provision of more single rooms, and the occupation of many of the latter, originally intended for patients, by extra female attendants, owing to the great increase of the staff in recent years. I have pointed out how this can be to a large extent relieved by the building of a small semi-detached block for the sleeping accommodation of a certain number of female attendants, thus rendering available for patients several rooms now occupied by the former.

A Nurses' Home is now considered a necessary adjunct to all well-equipped hospitals and kindred institutions, and has been already provided at many asylums, so that I trust such an amelioration of the life and condition of our female attendants will shortly be accomplished here. If it is necessary at a general hospital, it should not require any argument to show its greater need in an institution of this kind, where the attendants have longer hours of duty in constant association with the insane, less interesting work, and more trying and exacting duties.

In my report last year I drew special attention to the marked unrest and desire for change amongst the Asylum employees, and stated what were, in my opinion, the chief reasons thereof; the same state of things has continued more or less, and has been at times embarrassing, though I do not think it interfered to any extent with the efficient working of the institution. When the vastly improved condition as regards remuneration of this class of employee in the general labour market is considered, with the fact that there has not been any corresponding increase of the salaries of the ordinary male and female attendants for many years, it cannot cause surprise that there should be greater difficulty in getting and retaining the services of suitable persons. The salaries at which the female and the ordinary male (as distinguished from the tradesmen attendants) are now engaged, have not been altered for the last twenty years, and I think the time has now arrived for their revision, or for greater inducement of some kind.

The farm is each year becoming a greater source of profit, and the increased yield of milk and butter, and of general produce for sale and home consumption, has a very marked effect on our maintenance rate. The expenditure thereon has been heavy, but was largely for permanent improvements, and will not recur. Of the receipts for produce sold, the sum of £1,190 was paid into the Public Account, the chief items being, roughly: Cattle, £249; horses, £73; pigs, £222; hams and bacon, £147; potatoes, £254; peas, £136; mangolds, £40; poultry, £26, &c.; while during the year 12,564 lb. of butter and 10,685 gallons of fresh milk were supplied to the building, besides a large amount of skim-milk used in cooking, &c. If the value of this dairy produce, at contract price, and if all the potatoes (85 tons), vegetables, fruit (8½ tons), poultry, eggs, fresh pork, veal, &c., be added to the above it will, I think, be seen that if our labour is cheap it is advantageously employed. We have now, I believe, one of the largest and best dairy (Ayrshire) herds in the colony, and are able to sell our young stock, for which there are numerous inquiries, at highly remunerative prices. The yield of milk for the year 1901 amounted to 435,563 lb. as against 312,653 lb. for 1900, an increase of 122,910 lb., equal to about 12,290 gallons.

During the year women cooks were substituted for men in the kitchen, giving, amongst other advantages, a greater variety of domestic employment to our female patients. In consequence of this change it will be necessary to cover in the kitchen-yard with a raised glass roof, open round the sides for ventilation, and to build rooms for the cooks in proximity to their work; as this can be carried out at very small cost (about £200) I trust no time will be lost, as the former will afford the patients much-needed protection from rain and inclement weather, and the latter relieve other accommodation for its more proper purpose.

I cannot close this year's report without a reference to a practice which has come under my notice and exercised my mind a great deal for the last year or two—viz., the extent to which persons are now compulsorily placed and detained in homes, or so-called private hospitals, kept for the lucrative advantage of the proprietors. I feel the more justified in drawing your attention to this subject as some of these patients have, after longer or shorter periods of such confinement, been committed here in legal form when their prospect of recovery had become hopeless, and, it may be, the resources of their friends well nigh exhausted; whereas had they been sent to a properly equipped asylum under experienced management, and conducted with a primary view to the recovery of the patient, at an early stage of the malady, they might not have become permanent burdens of the State. I am aware of the reluctance of many persons to allow their relatives

to be committed to public asylums, and their postponement of it as long as possible; but I think this might be largely overcome by such measures as I advocated in a former report—viz., a different mode of committal (other than through the police; sometimes, even, in open Court), and by the disuse of the terms “lunacy” and “lunatic” as applied to our asylums and their inmates; perhaps also by the reception of voluntary patients, as advocated by Dr. Truby King. If it is necessary to have such private homes, they should at least be under some form of Government control and inspection, and I am inclined to think that they would be much safer and better conducted as detached hospitals in connection with the several State asylums. Many persons who are reluctant to send their friends to a public institution, detaining them at home as long as possible, till the disease has become hopelessly confirmed, would, I believe, gladly avail themselves of the more private form of institutional treatment just referred to, in preference to that of the so-called homes.

The late head-attendant, Mr. Chapman, severed his connection with this Asylum at the end of November, after nearly twenty years' faithful and arduous service, on his promotion to the charge of the male department of the inebriate home at Waitati. To him and my other fellow-officers, including my colleague Dr. Crosby, I am much indebted for hearty co-operation in the discharge of my duties.

I have, &c.,

EDWARD G. LEVINGE, M.B.,
Medical Superintendent.

The Inspector-General of Asylums, Wellington.

SEACLIFF ASYLUM.

SIR,—

I have the honour to submit to you the following report on the Seacliff Asylum for the year 1901:—

In regard to the statistics, a point of special interest is the very large number of admissions, viz., 141; and although nearly the half of this number were discharged either relieved or recovered the number remaining is a serious charge.

A great increase has been made in our accommodation during the last few years, but it has not been sufficient to overtake the pre-existing overcrowding and to provide for new-comers. We have now seventy more patients than the cubic space warrants, and this makes itself felt in an unduly high death-rate, especially from respiratory diseases, which caused twenty-two deaths during the year. Fifteen deaths were due to tuberculosis.

The light and airy new buildings which have been erected of late maintain the health of the patients lodged in them, but in the main building it is impossible to secure a proper standard of light, air, and dryness; and when we have to contend with the sequela of epidemics of influenza and measles, as has been the case during the past year, the effects of overcrowding are especially manifest.

Various works in connection with the estate have been carried out, and the usual recreations have been provided during the year.

I regret to have to record a homicide by one of the patients, which is, however, the only accident of the kind which has happened at the Asylum during thirteen years. The act was a remarkable one, a suicidal melancholic patient killing a sleeping Chinaman with a stake wrenched from a flower-pot. The man had tried unsuccessfully to kill himself before coming to the Asylum, and, finding the direct road to death still closed to him, he sought to effect his purpose indirectly by committing murder, thinking that he would be hanged for doing so.

There is a slight increase in the gross cost per head this year, but this is more than accounted for by the large sums which have to be refunded from the Public Works Department. Besides this, the necessary repairs and additions to buildings, &c., charged here against annual expenditure have been very heavy.

The thanks of the authorities are due to the *Otago Daily Times* and *Witness* Company, and to the *Evening Star* Company, for copies of their journals (supplied free). Very acceptable donations of books, periodicals, &c., have also been received from private individuals.

To my colleague, Dr. Falconer, and to the staff, I have to convey my thanks for their cordial assistance in carrying out the work of the institution.

I have, &c.,

F. TRUBY KING,
Medical Superintendent.

The Inspector-General of Asylums, Wellington.

PORIRUA ASYLUM.

I have the honour to submit the following report on the Porirua Asylum for the year 1901:—

At the beginning of the year there were 463 inmates, and at the end 515. The average number resident was 501 (255 males and 246 females), and the total number under care 464. One hundred and one patients were admitted, of whom twenty males and twenty-five females were admitted for the first time, fifty-three males and one female were transferred from other asylums, and two females were readmitted. Twenty-four patients were discharged as recovered, three as improved, and one transferred to another asylum. Twenty-one died, making a death-rate of 41.9 per thousand on the average number resident. Nearly half of the deaths were of the aged and chronically insane, which form so large a proportion of the population in this asylum. Ten who died had been inmates for upwards of ten years; and of these, one had been twenty-eight years, one thirty-one years, and one nearly forty-eight years in this and other asylums of the colony. This last case probably forms a record of longevity in our asylums. His was the first case registered in the Wellington Province. He was admitted into the old Karori Asylum on the 1st January, 1854, was subsequently transferred to Mount View Asylum, and finally to Porirua Asylum, where he died in August last.

Other Medical Superintendents have in former reports referred to the committal of helpless, infirm, and even bedridden patients to our asylums. Such cases, although demented, are quite harmless, and only require the care and nursing often demanded by the aged, and in no way require asylum treatment. Sometimes these patients are sent to the asylum on the initiation of their relatives, who, perhaps, are unwilling to bestow on them the necessary attention and trouble; but, in my experience, they sometimes come from some hospital or other charitable institution, where they are considered troublesome and fit for asylum custody because they wander in their speech, or are somewhat irritable and garrulous. There seems to be an increasing tendency to shunt these cases on to the asylum. Several have been admitted here lately, and one arrived almost in a moribund state, and died a few days afterwards.

Only one serious accident occurred in the course of the year. In November a female patient who was apparently convalescent, and was about to be discharged, drowned herself in the Asylum reservoir. She made her escape one Sunday forenoon while church service was being held. She had previously never shown the slightest suicidal tendency. What was the apparent motive of her conduct, and the whole of the circumstances in connection with this unfortunate case, I explained to you at the time. At the Coroner's inquest a verdict which did not attach any blame to the members of the staff was returned.

In my report two years ago I recommended that both branches of the stream that flows through the Asylum property should be led into the main reservoir which supplies the Asylum with water. This has now been done, and I feel confident there is no longer any danger of the supply running short in a dry season.

In the engineer's department important additions to the plant have been made. A large new boiler, generating steam for all purposes, has been erected; an auxiliary direct-acting engine and dynamo, capable of running the electric-light independently has been installed, as well as a complete set of new cells for the storage of electricity. The electric-lighting plant is now ample and efficient, and the service works admirably under the able management of Mr. Anderson, the chief engineer, who has proved himself a most valuable officer.

It was found that the septic tank for the reception of sewage from the main building was too small. Its capacity was only about 7,000 gallons, whereas the volume of sewage averages nearly 30,000 gallons daily. In consequence of this it happened that the flow through the tank was too rapid to allow the bacteriolytic process time to liquefy the solid constituents, which thus gradually accumulated and blocked the tank. I therefore recommended the construction of a new septic tank, having four times the capacity of the old one. This has been done, and I have no doubt but that the bacteria will now be able to do their work satisfactorily.

A new poultry-farm has been formed on the estate. A suitable site has been selected, and a series of fowl-houses built on modern principles. We are now busy erecting a house for the incubators, and for the preparation and storage of fowl-food, as well as a building for fostering chickens. We shall have ample accommodation to raise 1,500 head next season.

The old system of electric fire-alarms was not efficient, and an entirely new system has been installed, which greatly facilitates rapid concentration of the means of extinguishing an outbreak of fire should it occur. In various parts of the main building and in the more important buildings around there are switches, enclosed in boxes with glass lids, so that by breaking the glass and turning on the switch an alarm is raised. The effect of turning on the switch is to localize the alarm on an indicator at the central station, to ring a loud electric bell heard throughout the main building, and to sound a steam-whistle over the boiler-house. The arrangements for extinguishing a fire after alarm is given are efficient. Fixed hoses always ready for use both inside and outside can play water at high pressure on any point where a fire may occur. The danger from fire is further minimised by fireproof staircases, by fireproof partitions in the roof-space, and by steam-heating of the wards, in which no fireplaces are used. Our two fire-brigades are drilled from time to time.

The most pressing requirement now is additional airing-court accommodation for the patients. Plans have been prepared, which, when carried out, will give an extensive area for recreation for both the male and female patients, and will greatly improve the outlook on the north side of the asylum.

Other requirements which I think should receive consideration are a separate building for recent and curable cases, and a home for the nurses. Some of the rooms now occupied by the

latter are already too crowded, and if a home were built rooms would be available for such patients as would benefit by segregation. As to a separate building for recent and curable cases, there is no question it is desirable to separate such cases from the chronically insane. At present this is impracticable at this Asylum, and thus many on admission are placed under conditions and in surroundings which are not conducive to recovery.

Throughout the year the general health of the patients has been good, and, considering the number of inmates, there has been very little sickness in the wards. The patients have been encouraged in every way to occupy themselves usefully, and much has been done by them in all departments inside the asylum and outside on the estate. Their amusements and recreations have been duly attended to. Greater variety to their evening entertainments has been effected by the formation of a dramatic company, consisting of members of the staff, under the management of Dr. Barraclough, who has devoted much time to the matter and succeeded in bringing out a series of very creditable performances, which the patients have greatly enjoyed.

I have to acknowledge the able assistance rendered by my colleague Dr. Barraclough, and the efficient manner in which the senior officers and others on the staff have carried out the duties entrusted to them.

I have, &c.,

GRAY HASSELL, M.D.,

Medical Superintendent.

The Inspector-General of Asylums, Wellington.

WELLINGTON ASYLUM.

SIR,—

I have the honour to present to you the annual report of this Asylum for the year ending the 31st December, 1901.

On the 1st January there were 278 patients resident: 188 males, and ninety females. As there is accommodation for only 141 males there was a great deal of overcrowding, but this was gradually diminished by sending batches to Porirua, and by the 15th March relief had been got in this way to the number of fifty-two. At the end of March, owing to a small admission rate and several discharges, the numbers on the male side had been reduced to 133. At the same time there were only eighty-one females, so that the congestion had been completely overcome.

There has been a marked diminution in the number of admissions of male patients during the year, there being only sixty-nine, as compared with 102 in the previous year. On the other hand, the female rate has slightly increased—namely, thirty-eight, as compared with thirty-one. These figures do not furnish any indication of the incidence of insanity in the district, because the new wards at Porirua were finished, and patients were being admitted there as well as here. To get at the true history of the insanity of the year it would be necessary, therefore, to combine the statistics of the two asylums.

The recovery-rate shows a very satisfactory condition of affairs. Of the males, 57.9 were discharged recovered, and 57.8 females. Comparing the recovery-rate with that of last year, it is impossible not to be struck with the marked improvement on the male side, and one is bound to give the credit of part at least of this improvement to the relief of congestion by the transfer of so many patients to Porirua; and it is a strong argument in favour of the immediate building of another asylum, as the relief given was only temporary, and at the end of the year, owing to the natural increase of admissions over discharges, our numbers were again rising, and on the male side we were eleven and on the female side ten over our statutory number, making a total of 252 patients on the 31st December.

There have been fewer readmissions during the year, nine males and seven females. The physical condition of the patients on admission has been similar to that of former years, and it is reflected on the death-rate. Of thirteen deaths on the male side, ten were of patients who had been in less than a year. Two of these were over seventy years of age when admitted, and there were five general paralytics, who died within seven months of admission: one died of exhaustion from drink and dysentery, one of tuberculosis, and one from heart-failure. Of the other three cases one died of melancholia and exhaustion, another of general paralysis, after eighteen months, and the other of senile decay after a residence of fifteen months. These figures show a wonderful condition of the health of the patients who have lived some time in the asylum. Of the four deaths on the female side two died of heart disease, one from shock after operation for hernia, and the other of senile decay. None of these were recent cases.

The percentage of deaths to admissions was 18.8 for males and 10.5 for females, or an average of about 15 over all. Calculated on the average number resident, the death-rate is 7.1 for the year.

We have been very free from accidents during the year, there being only two cases of broken bones. One of these was in a patient who was persistently trying to get out through the door, and an attendant had a struggle with him, which resulted in the fracture of a rib and rupture of the urethra. The patient made an uninterrupted recovery; but an inquiry was held, and as there was at least the suspicion of rough usage the attendant was dismissed. In the other case, fracture of ribs was found at the autopsy, but no blame was attached to any one by the Coroner's jury, as the patient, who suffered from general paralysis, had been very restless and tumbled about a good deal, and his condition was of a nature that such an untoward event might have been expected.

At one time there was a large amount of sickness owing to an epidemic of influenza, and immediately following this an epidemic of measles; but both were kept well under control, and no deaths resulted.

The alterations in connection with the female refractory day-room have now been finished, and they conduce to the safety and comfort of the patients. A small dormitory added to this ward

would be a great convenience, as there are patients in the ward who do not require single rooms, and who have to be conducted over to the wing every evening.

The male refractory day-room is too small, and this is especially apparent in wet weather, and is a source of anxiety, as the patients are inclined to be quarrelsome, and it also has a detrimental effect on the recent cases who, unfortunately, have to be treated there.

The danger of fire in the building is a serious consideration, and at my request the Public Works Department have begun to instal the May-Oatway automatic alarm, which will be connected direct with the Newtown Fire-station. In this connection I would beg to draw your attention to the poor supply of gas to the institution, and I would strongly recommend that, instead of patching up the existing pipes, which are corroded and leaking badly, electric light should be introduced, thus affording better light, as well as safety from fire.

Towards the end of the year I began to photograph all patients on admission, and it affords a valuable aid to identity, and allows a comparison to be made of the patient's condition on admission and discharge.

There are several idiot children among both the males and females, and it is a pity to see the chance of educating what little brain-power they have being lost for want of a separate institution, and officials who have been trained for this special work. It would be a boon to the children themselves if an idiot home were erected for the colony, and also a great relief to the adult population of the asylums, who are wearied and upset by the tricky and mischievous ways and mournful and monotonous cries of these unfortunates.

The question of morality and heredity, as it bears on insanity and criminality, has been forcibly thrust upon me by one case admitted during the year. Herewith I give a statement of this patient's antecedents and progeny, and one is bound to wonder if there is no State remedy to prevent such an awful legacy being left to pollute the coming race: Mr. X married Y, and the marriage produced Mrs. Z, the patient spoken of. Mr. X also lived with a woman to whom he was not married, and "the children followed father's footsteps" (Police report). Mrs. Y lived with a man out of wedlock, and produced, with one or two exceptions, children similar to their parents, "generally immoral and depraved." Mrs. A lived at one time with Mr. A, but also lived with a Mr. B, and they produced B (boy) and B (girl). At the present time the afore-mentioned Mr. A is living with B (girl), his former paramour's daughter.

There have been several attempts at escape during the year, and three men and one woman eluded pursuit at the time, principally owing to the proximity of the Asylum to the town, but all were recaptured except one man, who was concealed by friends, but was afterwards re-committed.

Walking parties go outside the grounds every Sunday, and there are a large number of patients on parole, whilst others have been allowed out for a day in the care of their friends. This affords great pleasure, and is a bright spot on the horizon of some of the quiet and well-behaved, who are not yet well enough to be trusted with full liberty.

There are the usual fortnightly dances, and these are varied at times by visits from musicians and singers from the town.

The picnic was held at the Government grounds at the Upper Hutt, and was attended by over one hundred patients.

There has been a feeling of unrest and many changes among the attendants, due principally to the small inducement to stay in the service. This might be overcome by either a bonus or a pension at the expiry of a certain number of years.

To the officers and staff I have to convey my hearty thanks for their co-operation in carrying out the working of the institution for the past year.

The Inspector-General of Asylums, Wellington.

I have, &c.,

W. BAXTER GOW, M.D.

D. MACGREGOR, M.A., M.B.,
Inspector-General of Asylums.

APPENDIX.

TABLE I.—SHOWING the ADMISSIONS, READMISSIONS, DISCHARGES, and DEATHS in ASYLUMS during the Year 1901.

	M.			F.			T.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
In asylums, 1st January, 1901	1,581	1,091	2,672						
Admitted for the first time	281	186	467						
Readmitted	92	38	130						
Total under care during the year							1,954	1,315	3,269
Discharged and removed—									
Recovered	125	104	229						
Relieved	40	17	57						
Not improved	93	3	36						
Died	102	72	174						
							300	196	496
Remaining in asylums, 31st December, 1901	1,654	1,119	2,773						
Increase over 31st December, 1900	73	28	101						
Average number resident during the year	1,622	1,094	2,716						

TABLE II.—ADMISSIONS, DISCHARGES, and DEATHS, with the MEAN ANNUAL MORTALITY and PROPORTION OF RECOVERIES AT PER CENT. on the ADMISSIONS, &c., during the Year 1901.

Asylums.	In Asylums on 1st January, 1901.			Admissions in 1901.									Total Number of Patients under Care.		
				Admitted for the First Time.			Readmitted.			Total.					
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Auckland	297	190	487	67	32	99	9	5	14	76	37	113	373	227	600
Christchurch	283	231	514	47	38	85	10	9	19	57	47	104	340	278	618
Dunedin (Seacliff)	401	224	625	71	48	119	9	13	22	80	61	141	481	285	766
Hokitika	87	34	121	6	3	9				6	3	9	93	57	130
Nelson	85	52	137	5	4	9	2	1	3	7	5	12	92	57	149
Porirua	218	245	463	20	25	45	53	3	56*	73	28	101	291	273	564
Wellington	188	90	278	60	31	91	9	7	16	69	38	107	257	128	385
Ashburn Hall (private asylum)	22	25	47	5	5	10				5	5	10	27	30	57
Totals	1,581	1,091	2,672	281	186	467	92	38	130	373	224	597	1,954	1,315	3,269

* Including 53 males and 1 female transferred from other asylums.

TABLE II.—continued.

Asylums.	Patients Discharged and Died.												In Asylums on the 31st December, 1901.		
	Discharged recovered.			Discharged not recovered.			Died.			Total Discharged and Died.					
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Auckland	25	21	46	3	..	3	23	13	36	51	34	85	322	193	515
Christchurch	12	19	31	4	5	9	21	11	32	37	35	72	303	243	546
Dunedin (Seacliff)	22	28	50	9	6	15	27	25	52	58	59	117	423	226	649
Hokitika	4	1	5	..	1	1	4	4	8	8	6	14	85	31	116
Nelson	3	1	4	..	..	..	4	2	6	7	3	10	85	54	139
Porirua	16	8	24	1	3	4	10	11	21	27	22	49	264	251	515
Wellington	40	22	62	52	2	54	13	4	17	105	28	133	152	100	252
Ashburn Hall (private asylum)	3	4	7	4	3	7	..	2	2	7	9	16	20	21	41
Totals	125	104	229	73	20	93	102	72	174	300	196	496	1,654	1,119	2,773

TABLE II.—continued.

Asylums.	Average Number resident during the Year.			Percentage of Recoveries on Admissions during the Year.			Percentage of Deaths on Average Number resident during the Year.			Percentage of Deaths on the Admissions.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Auckland	314	188	502	32.89	56.75	40.71	7.32	6.91	7.17	30.26	35.14	31.86
Christchurch	294	240	534	21.05	40.43	29.81	7.14	4.58	5.99	36.84	23.40	30.77
Dunedin (Seacliff)	416	228	644	27.50	45.90	35.46	6.49	10.96	8.07	33.75	40.98	36.88
Hokitika	84	32	116	66.66	33.33	55.55	4.76	12.50	6.90	66.66	133.33	88.88
Nelson	86	53	139	42.86	20.00	33.33	4.65	3.77	4.32	57.14	40.00	50.00
Porirua	255	247	502	80.00	29.63	51.06*	3.92	4.45	4.18	50.00	40.74	44.68*
Wellington	152	85	237	57.97	57.89	57.94	8.55	4.71	7.17	18.84	10.53	15.89
Ashburn Hall (private asylum)	21	21	42	60.00	80.00	70.00	0.00	9.52	4.76	00.00	40.00	20.00
Totals	1,622	1,094	2,716	39.06	46.64	42.17*	6.29	6.58	6.41	31.87	32.29	32.04*

* Transferred: 53 males and 1 female.

TABLE III.—AGES of ADMISSIONS.

Ages.	Auckland.			Christchurch.			Dunedin (Seacliff).			Hokitika.			Nelson.			Porirua.			Wellington.			Ashburn Hall (Private Asylum).			Total.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Under 5 years	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
From 5 to 10 years	1	0	1	2	1	3	1	0	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	4	1	5
" 10 " 15 "	2	0	2	1	0	1	0	2	2	..	..	..	..	..	..	..	..	..	..	..	..	1	2	3	8	5	13
" 15 " 20 "	2	3	5	4	3	7	4	6	10	0	1	1	0	1	1	0	1	1	0	1	1	5	4	9	15	19	34
" 20 " 30 "	19	10	29	13	12	25	10	21	31	1	2	3	..	..	..	15	4	19	22	8	30	0	2	2	80	59	139
" 30 " 40 "	15	8	23	13	16	29	16	13	29	1	0	1	0	2	2	16	9	25	13	5	18	1	2	3	75	55	130
" 40 " 50 "	18	10	28	7	6	13	17	10	27	1	0	1	2	0	2	20	8	28	16	12	28	2	1	3	83	47	130
" 50 " 60 "	13	4	17	6	4	10	16	5	21	..	..	..	1	1	2	15	5	20	8	4	12	2	0	2	61	23	84
" 60 " 70 "	5	2	7	6	2	8	12	2	14	2	0	2	..	..	..	5	0	5	1	1	2	..	..	..	31	7	38
" 70 " 80 "	1	0	1	3	3	6	4	2	6	1	0	1	..	..	..	2	1	3	3	2	5	..	..	..	14	8	22
Upwards of 80 years	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Unknown..	..	..	..	2	0	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	0	2
Totals	76	37	113	57	47	104	80	61	141	6	3	9	7	5	12	73	28	101	69	38	107	5	5	10	373	224	597

TABLE IV.—DURATION of DISORDER on ADMISSION.

Ages.	Auckland.			Christchurch.			Dunedin (Seacliff).			Hokitika.			Nelson.			Porirua.			Wellington.			Ashburn Hall (Private Asylum).			Total.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
First Class (first attack, and within 3 mos. on admission)	43	20	63	20	18	38	16	20	36	3	3	6	1	2	3	41	10	51	40	11	51	1	1	2	165	85	250
Second Class (first attack, above 3 mos. and within 12 mos. on admission)	8	5	13	5	5	10	17	12	29	3	0	3	..	..	..	5	1	6	10	7	17	0	2	2	48	32	80
Third Class (not first attack, and within 12 mos. on admission)	10	6	16	14	10	24	14	8	22	..	..	..	1	1	2	17	10	27	10	8	18	4	2	6	70	45	115
Fourth Class (first attack or not, but of more than 12 mos. on admission)	15	6	21	15	10	25	33	21	54	..	..	..	5	2	7	10	7	17	9	12	21	..	..	..	87	58	145
Unknown ..	..	..	..	3	4	7	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	3	4	7
Totals	76	37	113	57	47	104	80	61	141	6	3	9	7	5	12	73	28	101	69	38	107	5	5	10	373	224	597

TABLE V.—AGES of PATIENTS DISCHARGED "RECOVERED" and "NOT RECOVERED."

Ages.	Auckland.						Christchurch.				Dunedin (Seacliff).				Hokitika.														
	Recovered			Not recovered			Recovered		Not recovered		Recovered		Not recovered		Recovered		Not recovered.												
	M.	F.	T.	M.	F.	T.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.											
From 5 to 10 years											
" 10 " 15 "	1	1	2										
" 15 " 20 "	0	2	2	0	1	1	0	1	1									
" 20 " 30 "	12	8	20	3	6	9	0	2	2	1	5	6	1	2	3	0	1	1						
" 30 " 40 "	4	4	8	1	0	1	3	7	10	0	2	2	6	10	16	2	1	3	0	1	1			
" 40 " 50 "	8	5	13	2	0	2	2	4	6	1	0	1	7	5	12	5	1	6	2	0	2
" 50 " 60 "	1	1	2	1	1	2	1	1	2	5	2	7			
" 60 " 70 "	0	1	1	1	1	2	2	0	2	2	5	7	1	1	2	1	0	1	
" 70 " 80 "	1	0	1	1	0	1		
Totals	25	21	46	3	0	3	12	19	31	4	5	9	22	28	50	9	6	15	4	1	5	0	1	1		

Ages.	Nelson.		Porirua.		Wellington.		Ashburn Hall (Private Asylum).		Total.																				
	Re-covered.	Not re-covered.	Re-covered.	Not re-covered.	Re-covered.	Not re-covered.	Re-covered.	Not re-covered.	Recovered.	Not recovered.																			
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.														
From 5 to 10 years	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
" 10 " 15 "	..	..	..	..	..	..	..	..	..	..	..	..	1	1	2		
" 15 " 20 "	..	..	..	..	..	..	..	..	..	..	..	..	5	4	9		
" 20 " 30 "	1	0	1	..	..	5	0	5	0	1	1	9	3	12	12	0	12										
" 30 " 40 "	0	1	1	..	..	3	5	8	0	1	1	7	7	14	10	2	12										
" 40 " 50 "	4	2	6	16	5	21	14	0	14	1	1	2											
" 50 " 60 "	2	0	2	..	..	4	1	5	0	1	1	4	4	8	11	0	11										
" 60 " 70 "	1	0	1	0	1	1	4	0	4	0	1	1											
" 70 " 80 "	0	1	1	1	0	1	2	1	3								
Totals	3	1	4	16	8	24	1	3	4	40	22	62	52	2	54	3	4	7	4	3	7	125	104	229	73	20	93

TABLE VI.—AGES of the PATIENTS who DIED.

Ages.	Auckland.			Christchurch.			Dunedin (Seacliff).			Hokitika.			Nelson.			Porirua.			Wellington.			Ashburn Hall (Private Asylum).			Total.			
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	
From 5 to 10 years	0	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	0	1	1
" 10 " 15 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 15 " 20 "	2	0	2	..	..	..	1	3	4	..	..	..	..	..	0	1	1	..	..	..	..	..	..	3	4	7
" 20 " 30 "	0	2	2	1	2	3	1	3	4	..	..	..	..	..	0	2	2	1	0	1	..	..	..	3	9	12
" 30 " 40 "	3	2	5	2	1	3	3	5	8	..	..	..	..	..	0	2	2	2	0	2	..	..	..	10	10	20
" 40 " 50 "	6	4	10	1	1	2	7	4	11	0	1	1	..	..	3	3	6	3	0	3	..	..	..	20	13	33
" 50 " 60 "	4	2	6	4	2	6	5	4	9	..	..	1	1	2	2	1	3	4	2	6	..	..	..	20	12	32
" 60 " 70 "	2	0	2	5	1	6	7	5	12	0	2	2	1	0	1	3	1	4	0	1	1	0	1	1	18	11	29	
" 70 " 80 "	6	2	8	8	4	12	3	1	4	4	1	5	2	0	2	2	1	3	3	0	3	..	..	28	9	37
" 80 " 90 "	0	1	1	0	1	1	
Over 90 years	
Unknown	0	1	1	0	1	1	0	2	2	
Totals	..	23	13	36	21	11	32	27	25	52	4	4	8	4	2	6	10	11	21	13	4	17	0	2	2	102	72	174

TABLE VII.—CONDITION as to MARRIAGE.

	Admissions.			Discharges.			Deaths.								
	M.	F.	T.	M.	F.	T.	M.	F.	T.						
AUCKLAND—															
Single	44	13	57	20	8	28	9	5	14
Married	23	17	40	6	10	16	11	7	18
Widowed	9	7	16	2	3	5	3	1	4
Totals	76	37	113	28	21	49	23	13	36
CHRISTCHURCH—															
Single	33	21	54	8	12	20	7	3	10
Married	22	23	45	8	11	19	10	4	14
Widowed	1	3	4	0	1	1	3	4	7
Unknown	1	0	1	..	..	..	1	0	1
Totals	57	47	104	16	24	40	21	11	32
DUNEDIN (Seacliff)—															
Single	49	31	80	16	9	25	15	13	28
Married	28	22	50	15	20	35	11	9	20
Widowed	3	8	11	0	5	5	1	3	4
Totals	80	61	141	31	34	65	27	25	52
HOKITIKA—															
Single	1	1	2	3	1	4	3	0	3
Married	4	2	6	0	1	1	1	2	3
Widowed	1	0	1	1	0	1	0	2	2
Totals	6	3	9	4	2	6	4	4	8
NELSON—															
Single	5	4	9	1	0	1	2	1	3
Married	1	1	2	1	1	2	1	0	1
Widowed	1	0	1	1	0	1	1	1	2
Totals	7	5	12	3	1	4	4	2	6
PORIRUA—															
Single	46	10	56	10	3	13	7	3	10
Married	22	15	37	6	7	13	3	7	10
Widowed	5	3	8	1	1	2	0	1	1
Totals	73	28	101	17	11	28	10	11	21
WELLINGTON—															
Single	48	13	61	58	3	61	7	0	7
Married	18	19	37	30	17	47	5	2	7
Widowed	3	6	9	4	4	8	1	2	3
Totals	69	38	107	92	24	116	13	4	17
ASHBURN HALL (Private Asylum)—															
Single	2	4	6	4	5	9	..	..	..
Married	3	1	4	3	2	5	..	..	..
Widowed	0	2	2
Totals	5	5	10	7	7	14	0	2	2
TOTALS—															
Single	228	97	325	120	41	161	50	25	75
Married	121	100	221	69	69	138	42	31	73
Widowed	23	27	50	9	14	23	9	14	23
Unknown	1	0	1	..	..	..	1	2	3
Totals	373	224	597	198	124	322	102	72	174

TABLE VIII.—NATIVE COUNTRIES.

Countries.	Auckland.			Christchurch			Dunedin (Seacliff).			Hokitika.			Nelson.			Porirua.			Wellington.			Ashburn Hall (Private Asylum).			Total.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
England	111	66	177	105	85	190	88	44	132	13	5	18	25	12	37	95	75	170	44	25	69	9	6	15	490	318	808
Scotland	32	10	42	32	22	54	120	76	196	10	1	11	6	4	10	29	25	54	16	9	25	5	7	12	250	154	404
Ireland	56	46	102	69	61	130	102	58	160	28	17	45	19	8	27	54	70	124	27	14	41	1	0	1	356	274	630
New Zealand	80	58	138	63	49	112	50	32	82	19	6	25	28	26	54	49	63	112	53	41	94	5	7	12	347	282	629
Austral'n Colonies	4	4	8	7	3	10	11	12	23	1	2	3	1	3	4	9	3	12	2	2	4	..	..	..	35	29	64
France	..	..	..	1	0	1	0	2	2	1	0	1	..	..	..	3	0	3	..	..	..	..	..	..	5	2	7
Germany	6	3	9	4	0	4	11	0	11	3	0	3	1	0	1	7	4	11	2	5	7	..	..	..	34	12	46
Norway	2	0	2	4	0	4	8	1	9	..	..	..	..	..	..	1	1	2	0	2	2	..	..	..	15	4	19
Sweden	2	0	2	..	..	..	4	0	4	3	0	3	0	1	1	5	2	7	2	0	2	..	..	..	16	3	19
Denmark	2	0	2	2	0	2	0	1	1	..	..	2	0	2	3	0	3	2	0	2	..	..	..	11	1	12	
Italy	1	0	1	3	0	3	4	0	4	1	0	1	1	0	1	2	2	4	1	0	1	..	..	..	13	2	15
China	1	0	1	..	..	..	17	0	17	4	0	4	..	..	..	1	0	1	1	0	1	..	..	..	24	0	24
Maoris	5	6	11	1	2	3	1	0	1	..	..	..	..	..	2	3	5	1	1	2	..	..	..	10	12	22	
Other countries	20	0	20	12	21	33	7	0	7	2	0	2	2	0	2	4	3	7	1	1	2	0	1	1	48	26	74
Totals	322	193	515	303	243	546	423	226	649	85	31	116	85	54	139	264	251	515	152	100	252	20	21	41	1654	1119	2773

TABLE IX.—AGES of PATIENTS in Asylums on 31st December, 1901.

Ages.	Auckland.			Christchurch.			Dunedin (Seacliff).			Hokitika.			Nelson.			Porirua.			Wellington.			Ashburn Hall (Private Asylum).			Total.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1 to 5 years	1	0	1	..	..	..	1	0	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	0	2
5 " 10 "	1	0	1	3	1	4	1	1	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	5	2	7
10 " 15 "	1	2	3	2	1	3	1	3	4	0	1	1	5	1	6	0	2	2	4	2	6	..	..	..	13	12	25
15 " 20 "	3	5	8	9	7	16	7	5	12	0	1	1	1	2	3	4	6	10	3	3	6	..	..	..	27	29	56
20 " 30 "	44	25	69	38	27	65	53	40	93	13	4	17	11	4	15	29	23	52	36	25	61	0	2	2	224	150	374
30 " 40 "	60	33	93	55	61	116	78	48	126	12	0	12	9	16	25	58	50	108	27	22	49	4	3	7	303	233	536
40 " 50 "	86	53	139	65	53	118	107	50	157	7	4	11	19	10	29	82	81	163	35	23	58	4	4	8	405	278	683
50 " 60 "	67	39	106	68	48	111	79	49	128	21	8	29	21	12	33	58	60	118	35	18	53	6	5	11	350	239	589
60 " 70 "	45	25	70	48	29	77	77	23	100	22	11	33	13	8	21	24	24	48	9	5	14	4	4	8	242	129	371
70 " 80 "	13	7	20	14	13	27	14	6	20	6	0	6	6	1	7	9	5	14	3	2	5	1	2	3	66	36	102
Over 80 "	1	3	4	2	0	2	5	1	6	1	0	1	..	..	..	..	..	..	..	..	..	1	1	2	10	5	15
Unknown	0	1	1	4	3	7	..	..	..	3	2	5	..	..	..	..	..	..	..	..	..	..	..	..	7	6	13
Totals	322	193	515	303	243	546	423	226	649	85	31	116	85	54	139	264	251	515	152	100	252	20	21	41	1654	1119	2773

TABLE X.—LENGTH of RESIDENCE of PATIENTS who DIED during 1901.

Length of Residence.	Auckland.			Christchurch.			Dunedin (Seacliff).			Hokitika.			Nelson.			Porirua.			Wellington.			Ashburn Hall (Private Asylum).			Total.			
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	
Under 1 month	1	2	3	5	1	6	..	..	..	..	..	..	..	..	0	1	1	..	..	..	..	..	..	..	6	4	10
From 1 to 3 months	5	0	5	2	1	3	3	1	4	1	0	1	..	..	0	3	3	3	0	3	..	..	..	..	14	5	19
" 3 " 6 "	2	0	2	2	1	3	3	4	7	..	..	..	..	..	3	0	3	4	0	4	..	..	..	..	14	5	19
" 6 " 9 "	3	0	3	1	0	1	2	0	2	..	..	..	..	..	0	1	1	1	0	1	..	..	..	..	7	1	8
" 9 " 12 "	0	2	2	1	0	1	3	4	7	..	..	..	0	1	1	0	1	1	..	..	..	..	..	..	4	8	12
" 1 " 2 years	4	3	7	3	1	4	0	2	2	..	..	..	1	0	1	1	1	2	4	0	4	..	..	..	13	7	20
" 2 " 3 "	0	2	2	1	0	1	6	2	8	3	0	3	..	..	..	..	..	..	1	1	2	..	..	..	11	5	16
" 3 " 5 "	1	0	1	3	1	4	2	2	4	..	..	..	..	..	..	..	..	0	2	2	0	1	1	..	6	6	12
" 5 " 7 "	1	0	1	..	..	..	2	1	3	..	..	..	1	1	2	..	..	..	..	..	..	..	..	..	4	2	6
" 7 " 10 "	2	1	3	1	2	3	..	..	..	0	3	3	..	..	..	..	..	..	..	..	..	..	..	..	3	6	9
" 10 " 12 "	1	0	1	1	0	1	..	..	..	..	..	..	..	..	2	1	3	..	..	..	0	1	1	..	4	2	6
" 12 " 15 "	0	1	1	1	0	1	1	0	1	..	..	..	..	..	0	1	1	0	1	1	..	..	..	..	2	3	5
Over 15 years	3	2	5	0	4	4	5	9	14	0	1	1	2	0	2	4	2	6	..	..	..	..	..	..	14	18	32
Died while absent on trial
Totals	23	13	36	21	11	32	27	25	52	4	4	8	4	2	6	10	11	21	13	4	17	0	2	2	102	73	174	

TABLE XIII.—CAUSES OF INSANITY.

Causes.	Auckland.			Christ-church.			Dunedin (Seacliff).			Hokitika.			Nelson.			Porirua.			Wellington.			Ashburn Hall (Private Asylum).			Total.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Adolescence ..	..	..	..	..	..	..	1	2	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Adverse circumstances ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Alcoholic excess ..	19	3	22	5	2	7	14	6	20	..	..	..	..	..	22	4	26	13	1	14	2	0	2	75	16	91	
Child-bearing and puerperal ..	0	5	5	0	1	1	0	3	3	0	2	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Chorea (Huntingdon's) ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	0	1	..	..	..	..	..	..	..	..	..	..
Climacteric ..	0	2	2	0	4	4	0	2	2	..	..	..	..	..	1	3	4	0	3	3	..	..	..	..	..	..	..
Congenital and hereditary ..	14	10	24	13	8	21	19	14	33	0	1	1	2	2	4	1	1	2	4	6	10	1	1	2	54	43	97
Cretinism ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	0	1	1	..	..	..	..	..	..	..	..	..	..
Dissolute life ..	5	1	6	1	1	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Domestic troubles ..	..	..	..	..	..	..	2	5	7	..	..	..	..	..	2	4	6	..	..	..	0	1	1	..	..	..	..
Drug habit ..	..	..	..	0	1	1	..	..	..	..	..	..	..	..	1	0	1	..	..	..	..	..	..	..	..	..	..
Epilepsy ..	2	3	5	4	2	6	1	0	1	..	..	..	..	..	5	1	6	4	3	7	..	..	..	..	..	..	..
Frequent pregnancies ..	..	..	..	0	2	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Fright ..	..	..	..	..	..	..	..	..	..	..	..	..	1	0	1	..	..	..	..	..	..	..	..	..	..	..	..
General paralysis ..	..	..	..	..	..	..	..	..	..	..	..	..	1	0	1	..	..	..	..	..	..	..	..	..	..	..	..
Goitre ..	..	..	..	..	..	..	1	0	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Grief ..	1	0	1	..	..	..	0	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Hysteria ..	..	..	..	..	..	..	0	2	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Ill-health ..	1	0	1	2	4	6	..	..	..	..	..	..	..	..	1	0	1	..	..	..	..	..	..	..	..	..	..
Influenza ..	..	..	..	0	1	1	2	0	2	..	..	..	..	..	2	3	5	0	1	1	0	1	1	..	..	..	..
Injury ..	6	0	6	..	..	..	4	0	4	1	0	1	..	..	1	0	1	3	0	3	..	..	..	..	..	..	..
Isolation and solitude ..	4	0	4	..	..	..	..	..	..	..	..	..	..	..	2	0	2	6	0	6	..	..	..	..	..	..	..
Locomotor ataxy ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	0	1	..	..	..	..	..	..	..	..	..	..
Love disappointment ..	..	..	..	..	..	..	0	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Masturbation ..	5	0	5	3	0	3	3	1	4	..	..	..	..	..	3	0	3	12	1	13	..	..	..	..	..	..	..
Melancholia ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	0	3	3	..	..	..	..	..	..	..
Menstrual ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	0	1	1	..	..	..	..	..	..	..
Organic ..	..	..	..	4	1	5	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Overwork ..	..	..	..	0	1	1	..	..	..	..	..	..	..	..	1	0	1	..	..	..	..	..	..	..	..	..	..
Phthisis ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	2	..	..	..	..	..	..	..	..	..	..
Previous attack ..	..	..	..	10	6	16	..	..	..	..	..	..	..	..	4	0	4	7	6	13	2	1	3	..	..	..	..
Religion ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	2	4	1	2	3	..	..	..	..	..	..	..
Seduction ..	..	..	..	..	..	..	0	2	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Senility ..	1	0	1	5	3	8	6	3	9	3	0	3	..	..	5	1	6	1	3	4	..	..	..	..	..	..	..
Shock ..	..	..	..	1	1	2	0	2	2	1	0	1	..	..	1	1	2	0	1	1	..	..	..	..	..	..	..
Sunstroke ..	1	1	2	..	..	..	1	2	3	..	..	..	..	..	1	0	1	..	..	..	..	..	..	..	..	..	..
Surgical operation ..	..	..	..	..	..	..	1	0	1	..	..	..	..	..	0	1	1	1	1	2	..	..	..	..	..	..	..
Syphilis ..	7	1	8	..	..	..	0	1	1	..	..	..	..	..	1	1	2	1	0	1	..	..	..	..	..	..	..
Tumour of brain ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	0	1	..	..	..	..	..	..	..	..	..	..
Uterine trouble ..	0	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Worry ..	1	6	7	2	1	3	1	0	1	..	..	..	0	2	2	3	3	6	7	1	8	..	..	..	..	..	..
Unknown ..	9	4	13	7	8	15	24	14	38	1	0	1	3	1	4	..	..	..	..	..	..	..	..	..	..	..	..
Totals ..	76	37	113	57	47	104	80	61	141	6	3	9	7	5	12	73	28	101	69	38	107	5	5	10	373	224	597

TABLE XIV.—FORMER OCCUPATIONS OF PATIENTS.

Occupation.	Auckland.	Christchurch.	Dunedin (Seacliff).	Hokitika.	Nelson.	Porirua.	Wellington.	Ashburn Hall (Private Asylum).	Total.	Occupation.	Auckland.	Christchurch.	Dunedin (Seacliff).	Hokitika.	Nelson.	Porirua.	Wellington.	Ashburn Hall (Private Asylum).	Total.
MALES.																			
Aboriginal natives ..	3	..	..	..	..	..	..	..	3	Insurance agent ..	..	..	..	..	..	1	..	..	1
Assayer ..	1	..	..	..	..	..	..	..	1	Journalist ..	1	..	..	..	..	..	..	..	1
Bakers and confectioners	..	..	2	..	..	..	1	..	3	Labourers ..	12	27	34	..	1	32	31	..	137
Basketmaker ..	..	1	..	..	..	..	..	..	1	Medical practitioner	..	..	..	..	..	1	..	..	1
Billiard - markers, night porters, &c.	3	..	..	..	..	..	..	..	3	Merchant ..	..	..	1	..	..	..	..	..	1
Blacksmiths ..	1	..	1	..	..	1	..	1	4	Miners ..	3	..	6	5	..	..	2	..	16
Bootmakers ..	..	1	..	..	..	2	..	..	3	No occupation ..	5	4	8	..	..	..	4	..	21
Brewer ..	..	..	1	..	..	..	..	..	1	Painters ..	..	..	1	..	..	2	..	..	3
Brickmaker ..	..	..	..	..	..	1	..	..	1	Pensioner ..	..	1	..	..	..	..	..	..	1
Bushmen ..	3	..	..	..	..	1	..	..	4	Plumbers ..	..	..	..	..	..	..	1	..	2
Butchers ..	1	2	..	..	..	..	..	..	3	Prisoners ..	..	2	..	..	..	..	..	..	2
Carpenters, cabinet-makers, &c.	5	1	3	1	..	3	4	..	17	Plasterer ..	..	1	..	..	..	..	..	..	1
Carters, expressmen, &c.	1	..	3	..	..	1	..	..	5	Platelayer ..	..	..	1	..	..	..	..	..	1
Clerks and accountants	2	2	3	..	..	1	1	..	9	Rabbitter ..	..	..	..	..	..	1	..	..	1
Commercial travellers	2	1	1	..	..	1	..	..	5	Rope-worker ..	..	1	..	..	..	..	..	..	1
Commission agents	..	1	..	..	..	1	1	..	3	Runholder ..	..	..	..	..	..	..	..	1	1
Cordial - manufacturer	..	1	..	..	..	..	..	..	1	Sailors ..	..	1	..	..	1	4	1	..	7
Cooks ..	1	1	..	..	..	..	1	..	3	Schoolboys ..	..	1	..	..	4	..	..	..	5
Drapers ..	1	..	1	..	..	..	..	..	2	School inspector ..	..	..	..	..	..	..	1	..	1
Draughtsman ..	..	..	..	..	..	1	..	..	1	Sea captain ..	..	1	..	..	..	..	..	..	1
Engineers and boiler-makers	..	..	1	..	..	..	3	..	4	Shipwright ..	..	1	..	..	..	..	..	..	1
Farmers ..	4	6	4	..	1	8	9	1	33	Shepherds ..	..	1	..	..	..	2	..	..	3
Fishermen ..	..	1	1	..	..	..	..	..	2	Solicitors ..	..	..	2	..	..	..	..	1	3
Gardeners, &c. ..	2	..	2	..	..	..	2	..	6	Stockbrokers ..	..	1	..	..	..	1	..	..	2
Grocers and grocers' assistants	1	..	2	..	..	1	..	..	4	Storemen ..	..	1	..	..	..	2	..	..	3
Gum-diggers ..	15	..	..	..	..	..	..	..	15	Storekeeper ..	..	..	..	..	1	..	..	..	1
Hawker ..	..	..	..	..	..	1	..	..	1	Student ..	..	..	..	..	..	1	..	..	1
Hotelkeepers ..	..	..	..	..	..	2	2	..	4	Tailor ..	..	1	..	..	..	..	..	..	1
										Tanner ..	..	1	..	..	..	..	..	..	1
										Teachers ..	..	1	1	..	..	1	1	1	6
										Telegraphist ..	..	..	..	..	..	..	1	..	1
										Vine-grower ..	..	..	..	..	1	..	..	..	1
										Warder (gaol) ..	..	..	1	..	..	..	..	..	1
										Weaver ..	..	..	..	..	1	..	..	..	1
										Totals ..	76	57	80	6	7	73	69	5	373
FEMALES.																			
Aboriginal native ..	1	..	..	..	..	..	..	..	1	Prisoner ..	..	..	1	..	..	..	..	..	1
Apprentice ..	..	..	..	..	..	..	1	..	1	Prostitute ..	..	..	..	..	..	1	..	..	1
Charwoman ..	..	..	1	..	..	..	..	..	1	Salvation Army worker	..	..	1	..	..	..	..	..	1
Cook ..	..	1	..	..	..	..	..	..	1	Saleswoman ..	..	..	..	..	..	1	..	..	1
Domestic duties	30	19	40	3	1	22	30	3	148	School-girls ..	..	..	..	..	2	..	..	..	2
Dressmakers ..	1	1	..	..	1	2	..	..	5	Sister of Mercy ..	..	..	..	1	..	..	..	..	1
Gentlewomen ..	..	..	..	..	..	..	..	2	2	Storekeeper ..	..	1	..	..	..	..	..	..	1
Gum-digger ..	1	..	..	..	..	..	..	..	1	Tailoresses, &c. ..	..	..	2	..	..	..	..	..	2
Housewives ..	..	19	13	..	..	..	..	..	32	Teachers ..	..	..	1	..	..	1	..	..	2
Laundress ..	1	..	..	..	..	..	..	..	1	Unknown ..	..	..	..	..	1	..	..	..	1
Milliners ..	1	..	..	..	..	1	1	..	3	Totals ..	37	47	61	3	5	28	38	5	224
No occupation ..	1	4	3	..	..	1	3	..	12										
Nurses ..	..	..	2	..	..	..	1	..	3										

TABLE XV.—SHOWING the ADMISSIONS, DISCHARGES, and DEATHS, with the MEAN ANNUAL MORTALITY and Proportion of RECOVERIES per Cent. of the ADMISSIONS for each Year since 1st January, 1876.

Year.	Admitted.						Discharged.						Died.		Remaining 31st December in each Year.			Average Numbers resident.			Percentage of Recoveries on Admissions.			Percentage of Deaths on Average Numbers resident.			
	Recovered.			Relieved.			Not Improved.			M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
	M.	F.	T.	M.	F.	T.	M.	F.	T.																		
1876	221	117	338	17	8	25	6	6	12	12	24	36	12	48	519	264	783	491	257	748	54.53	66.01	57.56	8.21	3.58	6.70	
1877	250	132	382	20	9	29	7	7	9	16	26	42	21	68	581	291	872	541	277	818	49.20	50.80	49.72	7.76	7.58	7.70	
1878	247	131	378	14	14	28	3	3	6	6	12	51	17	68	638	319	957	601	303	904	48.98	51.90	50.00	8.48	5.61	7.52	
1879	248	151	399	15	13	28	8	3	11	11	22	55	16	71	695	361	1,056	666	337	1,008	45.16	50.33	47.11	8.25	4.74	7.07	
1880	229	149	378	10	67	167	36	25	7	7	14	54	20	74	729	396	1,125	708	371	1,074	43.66	44.96	44.17	7.68	5.39	6.89	
1881	232	127	359	93	65	158	41	36	12	12	24	49	14	63	769	406	1,175	747	388	1,135	40.08	51.10	44.01	6.29	3.60	5.55	
1882	267	152	419	59	59	154	49	32	9	9	18	60	19	79	827	442	1,269	796	421	1,217	35.58	38.81	36.75	7.53	4.51	6.49	
1883	255	166	421	102	78	180	13	20	19	19	38	65	18	83	892	483	1,375	860	475	1,335	40.00	46.98	42.75	7.55	3.78	6.21	
1884	238	153	391	77	166	17	9	26	12	12	24	68	24	92	938	514	1,452	911	497	1,408	37.39	50.32	42.45	7.46	4.82	6.58	
1885	294	160	454	95	76	171	10	5	102	102	204	73	22	95	981	542	1,523	965	528	1,498	32.31	47.50	37.66	7.56	4.16	6.36	
1886	207	165	372	99	60	159	11	17	20	20	40	57	19	76	1,009	604	1,613	984	613	1,647	40.89	48.75	43.61	7.15	4.40	6.13	
1887	255	161	416	103	78	181	34	17	..	..	..	74	27	101	1,093	643	1,696	1,084	613	1,647	40.89	48.75	43.61	7.15	4.40	6.13
1888	215	146	361	116	92	208	31	28	4	4	8	78	26	104	1,074	687	1,681	1,045	641	1,686	53.95	63.01	57.62	7.56	4.05	6.16	
1889	230	161	391	98	53	146	31	30	61	61	122	70	30	100	1,074	687	1,681	1,045	641	1,686	53.95	63.01	57.62	7.56	4.05	6.16	
1890	230	160	390	98	88	186	23	17	40	40	80	76	35	111	1,095	702	1,797	1,078	685	1,763	42.61	55.00	47.69	7.05	5.11	6.29	
1891	234	201	435	88	74	162	33	24	57	57	114	74	34	108	1,154	763	1,917	1,125	714	1,839	37.61	36.82	37.24	7.25	5.86	6.71	
1892	281	158	389	89	76	165	21	17	38	38	76	74	34	108	1,154	763	1,917	1,125	714	1,839	37.61	36.82	37.24	7.25	5.86	6.71	
1893	281	179	460	101	89	190	17	12	29	29	58	78	23	101	1,229	810	2,039	1,172	758	1,930	35.94	49.72	41.30	6.66	3.03	5.23	
1894	320	256	576	107	76	183	15	11	26	26	52	64	35	99	1,308	860	2,168	1,241	812	2,053	39.63	45.18	41.03	5.16	4.31	4.82	
1895	379	302	681	105	77	182	24	19	43	43	86	101	42	143	1,329	885	2,214	1,313	822	2,162	41.27	46.66	43.40	7.69	4.94	6.61	
1896	296	170	466	104	70	174	25	16	32	32	64	86	32	118	1,390	925	2,315	1,347	882	2,229	37.41	44.02	39.82	6.38	4.63	5.29	
1897	300	244	544	102	73	175	26	32	58	58	116	105	43	148	1,440	990	2,430	1,411	944	2,355	35.92	37.82	36.69	7.44	4.55	6.28	
1898	355	258	613	114	110	224	13	23	36	36	72	88	60	157	1,472	1,008	2,480	1,438	973	2,411	44.88	51.89	48.07	6.12	6.17	6.14	
1899	264	247	511	88	99	187	15	25	40	40	80	114	43	157	1,512	1,045	2,557	1,487	1,004	2,491	32.31	44.33	37.58	7.67	4.28	6.30	
1900	335	263	598	103	96	199	39	10	49	49	98	145	46	145	1,581	1,091	2,672	1,534	1,049	2,083	30.74	36.50	33.27	6.45	4.38	5.61	
1901	373	224	597	125	104	229	40	17	57	57	114	102	72	174	1,654	1,119	2,773	1,622	1,094	2,176	39.06	46.64	42.17	6.29	6.58	6.41	
..	6,986	4,713	11,699	2,694	2,017	4,711	630	486	1,116	1,116	2,232	1,898	791	2,689

M. F. T.
 M. 482 254 736
 F.
 T.
 In Asylums, 1st January, 1876
 In Asylums, 1st January, 1902

TABLE XVI.—SHOWING the ADMISSIONS, READMISSIONS, DISCHARGES, and DEATHS from the 1st January, 1876, to the 31st December, 1901.

	M.	F.	T.	M.	F.	T.
Persons admitted during period from 1st January, 1876, to 31st December, 1901	5,677	3,608	9,285			
Readmissions	1,309	1,105	2,414			
Total cases admitted				6,986	4,713	11,699
Discharged cases—						
Recovered	2,694	2,017	4,711			
Relieved	630	486	1,116			
Not improved	592	554	1,146			
Died	1,898	791	2,689			
Total cases discharged and died since January, 1876				5,814	3,848	9,662
Remaining in asylums, January 1st, 1876				482	254	736
Remaining in asylums, January 1st, 1901				1,654	1,119	2,773

TABLE XVII.—SUMMARY of TOTAL ADMISSIONS. PERCENTAGE of CASES since the Year 1876.

	Males.	Females.	Both Sexes.
Recovered	38.51	42.84	40.25
Relieved	9.02	10.31	9.54
Not improved	8.47	11.75	9.79
Died	27.17	16.71	22.98
Remaining	16.83	18.39	17.44
	100.00	100.00	100.00

TABLE XVIII.—EXPENDITURE, out of Immigration and Public Works Loan, on ASYLUM BUILDINGS during the Financial Year ended 31st March, 1902, and LIABILITIES at that Date.

Asylums.	Net Expenditure for Year ended 31st March, 1902.	Liabilities on 31st March, 1902.
	£ s. d.	£ s. d.
Auckland	2,119 12 6	885 4 0
Wellington	162 12 2	424 10 5
Porirua	8,560 18 8	1,450 2 8
Christchurch	43 2 6	56 17 6
Dunedin (Seacliff)	4,666 16 8	3,016 16 5
Nelson	1,185 19 9	159 19 6
Hokitika	3 7 4	76 12 8
Totals	16,743 9 7	6,070 3 2

TABLE XIX.—TOTAL EXPENDITURE, out of Immigration and Public Works Loan, for REPAIRS and BUILDINGS at each ASYLUM from 1st July, 1877, to 31st March, 1902.

Asylums.	1877-94.	1894-95.	1895-96.	1896-97.	1897-98.
	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.
Auckland	71,746 0 8	505 10 7	2,994 10 4	9,565 4 4	3,177 14 6
Wellington	19,958 18 7	880 11 1	275 4 0	175 10 0	133 11 4
Wellington (Porirua)	39,325 13 9	8,007 10 2	768 15 5	4,873 16 10	8,655 10 0
Christchurch	94,207 18 0	2,159 0 9	4,863 10 1	1,169 11 1	821 18 4
Dunedin (Seacliff)	117,837 16 0	1,879 17 8	1,810 11 2	280 11 0	222 13 6
Napier	147 0 0	..	..	..	..
Hokitika	1,164 19 8	..	22 5 8	..	..
Nelson	5,110 9 4	200 0 0	200 0 0	338 17 3	1,118 1 10
Totals	349,498 16 0	13,632 10 3	10,934 16 8	16,403 10 6	14,129 9 6

Asylums.	1898-99.	1899-1900.	1900-1901.	1901-2.	Total Net Expenditure, 1st July, 1877, to 31st March, 1902.
	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.
Auckland	208 7 2	1,553 11 4	3,038 17 11	2,119 12 6	94,909 9 4
Wellington	1,606 18 10	1,823 17 0	1,616 2 0	162 12 2	26,633 5 0
Wellington (Porirua)	11,233 9 1	11,095 9 6	10,587 3 7	8,560 18 8	103,108 7 0
Christchurch	188 15 9	..	75 16 8	43 2 6	103,529 13 2
Dunedin (Seacliff)	1,797 0 4	1,386 17 7	2,227 16 10	4,666 16 8	132,110 0 9
Napier .. .. .	..	..	..	..	147 0 0
Hokitika .. .. .	..	..	94 3 11	3 7 4	1,284 6 7
Nelson	2,632 2 4	1,852 5 8	1,231 13 5	1,186 19 9	13,870 9 7
Totals	17,666 13 6	17,712 1 1	18,871 14 4	16,743 9 7	475,593 1 5

TABLE XX.—SHOWING THE EXPENDITURE FOR THE YEAR 1901.

Items.	Auckland.	Christchurch.	Dunedin (Seacliff).	Hokitika.	Nelson.	Porirua.	Wellington.	Total.
Inspector* ..	..	..	..	..	..	..	..	£ 1,000 0 0
Assistant Inspector* ..	..	..	..	..	..	..	..	£ 210 0 0
Clerk* ..	..	..	..	..	..	..	..	£ 215 0 0
Medical fees* ..	..	..	..	..	..	..	..	£ 1,110 5 0
Contingencies* ..	..	..	..	..	..	..	..	£ 247 11 8
Official Visitors ..	25 4 0	..	50 8 0	12 12 0	..	25 4 0	12 12 0	£ 126 0 0
Visiting Medical Officers ..	..	..	..	..	..	..	..	£ 357 4 5
Superintendents ..	593 15 0	600 0 0	600 0 0	150 0 0	207 4 5	600 0 0	529 3 4	£ 3,422 18 4
Assistant Medical Officers ..	104 3 4	250 0 0	250 0 0	300 0 0	200 0 0	250 0 0	250 0 0	£ 1,104 3 4
Clerks ..	125 0 0	197 10 0	133 19 2	..	..	145 1 4	154 10 0	£ 756 0 6
Matrons ..	93 15 0	95 0 0	100 0 0	85 0 0	75 0 0	100 0 0	90 0 0	£ 638 15 0
Attendants and servants ..	3,843 17 8	4,286 3 11	5,611 9 2	1,077 3 5	1,217 8 3	4,292 15 4	2,469 2 4	£ 22,748 0 1
Rations ..	3,642 5 10	3,486 11 6	4,097 17 2	1,977 12 6	1,199 2 4	3,510 15 0	2,317 12 10	£ 19,181 17 2
Fuel and light ..	769 10 1	1,863 1 5	536 1 10	44 10 1	329 8 3	897 15 2	677 5 5	£ 4,617 12 3
Bedding and clothing ..	1,065 1 5	1,245 1 11	1,237 3 8	171 0 8	158 15 1	1,158 2 3	525 19 5	£ 5,561 4 5
Surgery and dispensary ..	38 10 7	105 1 5	150 4 10	0 3 6	68 19 10	232 2 4	71 19 9	£ 667 2 3
Wines, spirits, ale, and porter..	14 4 6	35 7 6	20 16 3	5 0 0	16 7 6	17 17 9	29 9 0	£ 139 2 6
Farm ..	577 11 2	703 17 8	1,778 18 6	..	509 0 1	827 19 3	208 5 9	£ 4,605 12 5
Necessaries, incidental, and miscellaneous ..	1,305 8 3	1,786 0 1	3,888 7 4	289 19 9	695 13 10	1,973 4 10	1,269 13 1	£ 11,208 7 2
Totals ..	12,198 6 10	14,053 15 5	18,455 5 11	3,113 1 11	4,676 19 7	14,030 17 3	8,605 12 11	£ 77,916 16 6
Repayments, sale of produce, &c. ..	3,509 15 7	4,629 5 1	5,650 13 4	223 15 7	949 8 3	2,522 3 1	1,899 8 9	£ 19,384 9 8
Actual cost ..	8,688 11 3	9,424 10 4	12,804 12 7	2,889 6 4	3,727 11 4	11,508 14 2	6,706 4 2	£ 58,532 6 10

Approximate Cost of Paper.—Preparation, not given; printing (1,595 copies), £19 6s.

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Price 9d.]

* Not included in Table XXI.

TABLE XXI.—AVERAGE COST OF EACH PATIENT PER ANNUM.

Asylums.	Provisions.	Salaries.	Bedding and Clothing.	Fuel and Light.	Surgery and Dispensary.	Wines, Spirits, Ale, &c.	Farm.	Necessaries, Incidental, and Miscellaneous.	Total Cost per Patient.	Repayments for Maintenance.	Total Cost per Head, less Receipts of all kinds.	Total Cost per Head, less Receipts of all kinds previous Year.	Increase in 1901.	Decrease in 1901.
Auckland ..	£ s. d. 7 5 1½	£ s. d. 9 10 8	£ s. d. 2 2 5½	£ s. d. 1 1 10 8	£ s. d. 0 1 6½	£ s. d. 0 0 6½	£ s. d. 1 1 0 1½	£ s. d. 2 12 0	£ s. d. 24 6 0	£ s. d. 5 6 0	£ s. d. 17 6 2	£ s. d. 18 2 9½	£ s. d. ..	£ s. d. 0 16 7½
Christchurch ..	6 8 8½	10 1 5½	2 6 7½	2 11 0½	0 3 11½	0 1 4	1 6 4½	3 6 10½	26 6 4½	6 8 4½	17 12 11½	20 7 5½	..	2 14 6
Dunedin (Seacliff) ..	6 7 3½	10 9 6	1 18 5	0 16 7½	0 4 8	0 0 7½	2 15 3	6 0 9	28 13 1½	7 0 11½	19 17 8	20 13 8	..	0 16 0
Hokitika ..	8 8 6½	14 0 1½	1 19 5½	0 7 8	0 0 0½	0 0 10½	..	2 10 0	36 16 9	1 14 0	24 18 2	23 4 2	£ s. d. 1 14 0	..
Nelson ..	8 12 6½	12 4 6½	1 2 10	2 7 4½	0 9 11½	0 2 4½	3 13 3	5 0 1½	33 12 11½	6 5 0	26 16 4½	24 14 7½	£ s. d. 2 1 8½	..
Porirua ..	6 19 10½	10 15 8	2 6 1½	1 15 9½	0 9 3	0 0 8½	1 12 11½	3 18 7½	27 19 0	4 5 2	22 18 6½	23 18 9	..	1 0 2½
Wellington ..	9 15 7	14 15 9½	2 4 4½	2 17 1½	0 6 1	0 2 6½	0 17 7	5 7 1½	36 6 3½	7 1 2½	28 6 0	24 19 10	£ s. d. 3 6 2	..
Averages ..	7 3 5½	10 18 0½	2 1 7½	1 14 6½	0 4 11½	0 1 0½	1 14 5½	4 3 10	28 1 11½	5 16 1	20 16 11½	21 9 5½	..	0 12 5½

NOTE.—Including the first five items in Table XX., the net cost per patient is £21 17s. 9½d., as against £22 9s. 8d. for the previous year, being a decrease of 11s. 10½d. per head.