

1924.
NEW ZEALAND.

MENTAL HOSPITALS OF THE DOMINION

(REPORT ON) FOR 1923.

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

The Hon. the MINISTER IN CHARGE OF DEPARTMENT FOR THE CARE OF MENTAL DEFECTIVES to
His Excellency the GOVERNOR-GENERAL.

MY LORD,—

Wellington, 1st July, 1924.

I have the honour to submit to Your Excellency the report of the Inspector-General of Mental Defectives for the year 1923.

I have, &c.,

M. POMARE,

Minister in Charge of Department for the Care of
Mental Defectives.

The INSPECTOR-GENERAL to the Hon. Sir MAUI POMARE, the Minister in Charge of the Department
for the Care of Mental Defectives.

SIR,—

Wellington, 1st June, 1924.

I have the honour to present my report for the year ended 31st December, 1923.

The patients on the register at the end of the year numbered 4,996 (m., 2,839; f., 2,157), or 64 (m., 23; f., 41) more than at the beginning, and the daily average under treatment during the year was 4,868 (m., 2,789; f., 2,079), or 15 males more and 20 females less than in the previous year, while the total under care was 5,740. Patients belonging to the Native race numbered 70 (m., 36; f., 34) at the end of the year.

The admissions numbered 808 (m., 442; f., 366), or 31 (m., 11; f., 20) fewer than in the previous year. Of these, 141 (including 2 Maoris) had been previously under care, making the proportion of readmissions 17·45 per cent., and 667 patients, including 11 Maoris, were admitted for the first time.

The ratio to population of all admissions (exclusive of Maoris) was 6·23 (m., 6·69; f., 5·76) to 10,000, and of first admissions, 5·14 (m., 5·54; f., 4·73), so that 1,603 persons in the general population contributed one patient, and 1,943 contributed a patient admitted for the first time. These figures, the index of "occurring mental disorder," disclose an unusually low ratio.

The discharges (excluding transfers) numbered 419, or 36 more than in 1922. One hundred, or 30 more, harmless unrecovered persons were returned to the care of friends, and 319 (m., 168; f., 151) recovered, 6 more than last year, representing a percentage of 39·48 (m., 38; f., 41·25) on the total admitted. With voluntary boarders added the percentage rises to 43·84. Altogether 54·69 per cent. of the inmates admitted were able to leave institutional care.

Of a total of 5,740 patients under care 325 (m., 194; f., 131) died, or 5·66 per cent. An inquest is held in the case of every death, whatever the cause. The causes are detailed in Table XII, and the following is the percentage of causes mainly contributing: Senile decay, 32; disease of the brain and nervous system group, 27·7; heart-disease, 10·15; tuberculosis, 7·38.

I mentioned last year that since the 1911 Act sanctioned the admission of voluntary boarders an increasing number each year has taken advantage of the provision, as demonstrated in the following table. It is necessary for an applicant to comprehend the meaning of the procedure, and in practice we find that, while a large number may be classed as new cases of unconfirmed mental disorder, a fair proportion of recurrent cases seek admission on recognizing the early symptoms of relapse in the hope that an oncoming attack may be warded off or modified. Among the hopeful cases are a proportion of neurasthenics, but, on the other hand, some persons, labouring under organic disorders of the brain and cord, come for nursing care.

VOLUNTARY BOARDERS.

Year.	First Admission.			Not First Admission.			Total Admissions.			Transferred to Register of Patients.			Died.			Discharged.			Remaining on 31st December.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1912	6	17	23	0	0	0	6	17	23	1	3	4	0	0	0	4	3	7	1	11	12
1913	18	19	37	0	2	2	18	21	39	2	5	7	0	1	1	12	12	24	5	14	19
1914	17	19	36	3	2	5	20	21	41	7	5	12	1	1	2	11	15	26	6	14	20
1915	15	17	32	1	2	3	16	19	35	3	4	7	0	1	1	8	14	22	11	14	25
1916	13	23	36	5	8	13	18	31	49	4	4	8	1	2	3	14	14	28	10	15	25
1917	14	21	35	1	13	14	15	34	49	6	6	12	0	1	1	10	23	33	9	19	28
1918	23	38	61	5	11	16	28	49	77	1	4	5	2	2	4	15	30	45	19	32	51
1919	31	39	70	5	19	24	36	58	94	3	3	6	0	2	2	26	42	68	26	43	69
1920	26	38	64	16	12	28	42	50	92	3	4	7	1	2	3	33	33	66	31	54	85
1921	39	39	78	11	15	26	50	54	104	2	3	5	5	1	6	38	41	79	36	63	99
1922	47	38	85	10	16	26	57	54	111	6	5	11	4	4	8	40	48	88	43	60	103
1923	44	50	94	15	21	36	59	71	130	3	6	9	3	3	6	47	47	94	49	75	124

It will be noted that there were 130 voluntary admissions in the year under review, that 94 were discharged, and that 9 boarders, representing only 3·86 per cent. of the total under care, had to be transferred to the register of patients (having shown mental disorder in degree sufficiently pronounced and sustained to render it improper for them to be continued as voluntary boarders), while the proportion of deaths was 2·57 per cent. The column devoted to "Not First Admissions" records readmissions on a return of illness in those previously treated to recovery as voluntary boarders. The figures above are an indication of public confidence and of good work being done. The average daily number of voluntary boarders in 1923 was 113 (m., 49; f., 64).

In Table XIII the principal causes assigned for the mental breakdown in the admissions are stated; but as a matter of fact they are merely approximations, and these, with the small numbers with which we have to deal, show such divergencies from year to year that the proportion assigned to any one cause in any one year cannot be assumed to be our average incidence. Causation is always complex, and the most potent factor is the individual. Thousands of persons have passed unscathed through physical or mental stresses which have proved too much for these patients. Take, for example, the critical periods (puberty, adolescence, the climacteric, and old age), which accounted for 18 per cent. of the admissions, or the physiological act of child-bearing, which was assigned as a cause in about 5 per cent. of the women admitted. Clearly there must be and is a predisposing instability also, and when this is not directly traceable to inheritance it will be disclosed in ignorance or careless nurture and upbringing when the individual was young, or in a disregard of the laws of wholesome and healthy living after the individual became a free agent, just those simple, almost obvious, requirements which when carried out faithfully ensure the state of well-being which comes from mental and bodily fitness and reacts in modifying an evil heredity. Hereunder the assigned causations in the table referred to are grouped and shown in their relative proportions:—

Heredity	M.	F.	T.
Congenital	11·99	14·21	12·99
Predisposed by previous attack	15·38	9·01	12·50
Critical periods	9·73	19·94	14·35
Child-bearing (puerperal, non-septic, and lactation)	17·64	18·58	18·08
Mental stress	0·00	5·19	2·35
Physiological defect and error	10·18	6·56	8·58
Toxic, including—	0·45	2·46	1·36
Syphilis	M.	F.	T.
Alcohol	5·88	0·37	3·34
Traumatic	7·69	1·67	4·95
Disorder of nervous system, including—	14·71	3·55	9·65
Epilepsy	0·68	0·55	0·62
Other bodily affections	M.	F.	T.
No definite cause assigned	4·30	6·25	4·95
	5·66	7·38	6·41
	3·85	6·83	5·19
	9·73	5·74	7·92
	100·00	100·00	100·00

The voluntary boarders have increased so largely that one must include them hereafter when detailing the number of inmates in relation to accommodation in the yearly returns of the patients on the Register of State Institutions distributed as hereunder, classified under the Act, showing the number

on leave and those resident at a given date, together with the accommodation available and the number of wards into which it is divided.

Mental Hospital.	Patients on Register on 29th March, 1924, as classified.											
	Class I, Unsound Mind.		Class II, Mentally Infirm.		Class III, Idiots.		Class IV, Imbeciles.		Class V, Feeble- minded.		Class VI, Epileptics.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Auckland	296	254	159	53	11	6	107	66	7	30	63	38
Christchurch	218	318	34	31	7	7	36	46	22	9	41	46
Dunedin (Seacliff and Waitati)	436	329	41	39	13	5	51	26	40	37	55	44
Hokitika	129	42	34	13	..	2	2	4	2	1	8	3
Nelson (and Stoke)	37	43	87	44	..	1	58	17	5	5	28	7
Porirua	545	381	9	12	3	7	22	37	17	11	54	52
Tokanui	74	51	42	28	..	..	29	17	16	1	5	3
Totals	1,735	1,418	406	220	34	28	305	213	109	94	254	193

Mental Hospital.	Inmates resident on 29th March, 1924.						Accommodation on 29th March, 1924.					
	Less Absent on Probation.		Patients.		Voluntary Boarders.		Total Resident in Institution.		Number of Wards.		Bedrooms and Dormitories for	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Auckland	9	13	634	434	5	11	639	445	9	9	629	480
Christchurch	9	14	349	443	8	17	357	460	7	7	385	448
Dunedin (Seacliff and Waitati)	6	4	630	476	17	11	647	487	11	8	528	456
Hokitika	3	5	172	60	..	..	172	60	4	3	156	88
Nelson (and Stoke)	1	1	214	116	3	2	217	118	4	4	213	119
Porirua	16	25	634	475	15	20	649	495	8	7	590	403
Tokanui	3	2	163	98	..	2	163	100	3	2	172	100
Totals	47	64	2,796	2,102	48	63	2,844	2,165	46	40	2,673	2,094

These figures show an all-round shortage of accommodation for 171 men and 71 women. The ratio of excess means that in each group of 16 to 17 men there is one too many, and in each group of about 30 to 31 women there is one too many. It is not this odd one only who is incommode, but the whole group more or less. However, were the odd ones alone affected the position could not be defended, for the law hands the patient against his will to us to be provided for, and he and his relatives have a right to expect adequate housing. But, as I have previously indicated, bare sufficiency of accommodation is not enough; there should be about 5 per cent. of excess of accommodation for classification, as from time to time the numbers of any one class of case vary considerably, and at the present time some of the wards have an excess of accommodation because of the shortage of patients suitable for the particular ward, which, of course, means that matters are so much the worse for those in some other ward.

It is a great satisfaction to me, therefore, and to my officers that, recognizing this fact, you have helped to push forward a building programme of which the present position is as follows:—

	Male.	Female.	Total.
<i>Auckland</i> —			
Proposed separate modern hospital ward, leaving present infirmary for senile, &c.	40	..	40
<i>Christchurch</i> —			
Staff quarters, emptying single rooms for patients, in course of construction ..	24	..	24
Proposed farm buildings at Templeton	28	..	28
<i>Porirua</i> —			
Tenders called for five villas, each accommodating thirty-four	102	68	170
<i>Hokitika</i> —			
Nearing completion, administration block, with admission wards and hospital ..	31	31	62
Tenders called for "closed" villa	38	..	38
<i>Nelson</i> —			
Tenders called for "closed" villa at Stoke	42	..	42
<i>Tokanui</i> —			
Tenders let for admission ward .. .. .	..	27	27
	305	126	431

If these works are completed in average time the resident population may be expected to increase in the interval by 112 (m., 58; f., 54), in which case there will be an excess of accommodation for 77 (m., 76; f., 1). This will leave the position satisfactory in Auckland, Sunnyside, and Porirua. At Seacliff modernizing work now being carried out by the artisan staff will continue; but the main additions next taken in hand will be at Waitati; Hokitika by being able to pull down the condemned buildings will have wiped out its reproach; Nelson will have gone a further step in adapting the Mental Hospital for mental deficient, and with the "closed" villa at Stoke will be able to transfer thither Nelson patients who cannot be trusted in the "open door" sections. Concurrently the erection of villas will be necessary for women patients to be transferred from Nelson—the site for these

has already been selected; and for Tokanui, then able to receive direct admissions of both men and women, further villa accommodation will need to be anticipated.

The above works refer to additional sleeping-accommodation only, but it will be realized that such additions carry with them the necessity for additions in other directions—for example, at Porirua tenders have been let for a large extension of two day-rooms and additional lavatories, and plans have been prepared for an additional kitchen for all the male department outside the main institution. At Seacliff and Sunnyside additions to the laundry are necessary, and a new laundry is wanted at Stoke. A tender has been let for a store at Nelson, and one at Tokanui is in course of erection.

The details of expenditure and credits for the year ended 31st March, 1924, are shown in Tables XVIII and XVIIIA. In Tables XIX and XIXA the items are grouped, the amounts divided by the daily average number of patients (and boarders), so that the cost is shown in terms of per patient. It will be seen that the gross cost per patient was £74 9s. 0½d.; the average received for maintenance was £18 3s. 2½d.; deducting this and other repayments such as sales of farm-produce, &c., the net average cost for maintaining patients—that is, the sum paid to us by the Consolidated Fund—amounted to £51 6s. 6d. a head. In the above the Head Office administration expenses are included; they represent 1.35 per cent. of the cost. Whether or not a patient pays his maintenance or how much he pays is known in the Head Office only, and his treatment has relation to his mental condition alone and not to his ability to pay. As a matter of fact, some patients for whom nothing is received have special attendants, and obviously cost considerably more than the gross average.

The following is a return of the expenditure on and receipts from our farms:—

<i>Expenditure.</i>		£	s.	d.	<i>Receipts.</i>		£	s.	d.
Salaries and wages	.. ..	14,655	1	2	Live-stock and produce—				
Feed	.. ..	4,934	13	6	Sold	.. ..	13,500	8	6
Seed, fertilizers, &c.	.. ..	2,849	6	7	Consumed	.. ..	24,463	9	8
Implements, harness, &c.	.. ..	1,574	16	9					
Stock	.. ..	2,784	7	10					
Rents, rates, &c.	.. ..	190	9	3					
Fencing, draining, roading	.. ..	479	0	0					
Harvesting, &c.	.. ..	444	8	1					
Railages	.. ..	415	6	7					
Buildings	.. ..	91	5	3					
Sundries	.. ..	609	3	7					
Balance	.. ..	8,935	19	7					
		£37,963	18	2			£37,963	18	2

This, it goes without saying, is satisfactory; but I must emphasize what I have said before, because the fact must not be lost sight of, that even if the farms, which pay because they are worked well, did not show a credit on a balance-sheet, they would pay as therapeutic agents and would have to be continued. It is a commonplace truism that the brain does not energize in two directions at the same time, and it is necessary, therefore, to lessen morbid energizing by supplying interesting open-air employment, the most important among many other agents. If it were a mere matter of working the farms for profit, it would pay to have nothing but ordinary paid labour and the usual labour-saving devices, but the recovery rate would be lowered, and also the level of contentment, which would result in raising largely the percentage of disturbed and difficult patients, which is relatively low.

The work of the staff during the year has been praiseworthy.

In December the usual examination was held for the registration of mental nurses, when the following passed. In the list are included some who had already passed in the second grade and sat again to get a first-grade certificate:—

Auckland: First Grade—John Carroll, Olive Lowe, Kathleen Ann Shanahan; Second Grade—Annie Margaret Jones, Robert Perry.

Christchurch: First Grade—Annie Christey, Eva Leeming, Mary Elizabeth Ann Neads, Kathleen McAleer; Second Grade—Mary Elizabeth Morgan, Rose Murphy.

Dunedin: First Grade—Robert Short Anderson, John Brown, William Harrison Ellwood, John Howie, Catherine Jenkins, William McKenzie, Archibald McMillan, John Stafford O'Niell; Second Grade—James Blackie, Thomas Brady, Janet Isabella Carswell, Jenettie Bryce Cooper, James Sketheway Moodie, James David Watson.

Hokitika: First Grade—Patrick Francis Mulrennan, Jack Thomas; Second Grade—Mollie Macfarlane, Alma Elizabeth Rowe, Martha May Louisa Schroder.

Nelson: First Grade—Margaret Cecilia Noonan, Mara Elizabeth Heslop.

Porirua: First Grade—Elizabeth Frances Godfrey, James Ogilvie Mackie, Harry Tyson, William Hudson Walker; Second Grade—John Alexander McLennan Brown, Harold Percy Bullock, Edgar Stanley Doddington, Esther Maud Jackson, Allen Rothery.

Tokanui: First Grade—Margaret Farrell, Lena Kenny, Maude Kenny.

This nursing certificate carries with it promotion to the senior staff, and it is not awarded to any with less than three years' service. The ratio of nursing staff to patients will vary with many considerations, the designs of the wards, the number of patients under special observation, the relatively more necessary in smaller institutions, and so forth; but it is generally conceded that an average of not less than 1 to 10 patients is desirable—that is, one on duty, and as members of our staffs are off duty for a third of the year, allowance has to be made accordingly.

The following gives the position on the 31st March: Auckland—1 attendant efficient to 13.5 patients and 1 nurse to 10.4; Christchurch—1 to 7.4 and 11.2; Hokitika—1 to 8.0 and 5.4; Nelson—1 to 10.2 and 8.7; Porirua—1 to 11.4 and 10; Seacliff—1 to 9.1 and 8.8; and Tokanui—1 to 9.6 and 8.3 respectively.

This year more than ever I feel and must express indebtedness to the District Inspectors and Official Visitors for their labours ungrudgingly and faithfully performed, because unforeseen circumstances have limited the number of my own inspections. These ladies and gentlemen, who have the

confidence of the patients and the respect of the staff, have never demurred when, in addition to their usual visits, I have had to call upon them to inquire into any matter on my behalf, but have done so and reported immediately. You have met some of them on your rounds and read their reports of visits and investigations, and their recorded criticisms, which are passed on to you as they arrive, and I think you will, sir, agree with me that they have proved most valuable. Mr. John Alexander, Auckland, has been absent on leave, and will be welcomed back when he returns and visits the Mental Hospital.

The following additional new appointments have been made: Official Visitor, Dunedin—The Reverend Hector Maclean. Official Visitors, Christchurch—Henry Havelock Hanna, Esq., solicitor, and Mrs. Lawrence Williams. Official Visitor, Auckland—The Reverend D. C. Herron, M.A., M.C.

I record with regret the loss to Porirua by the death of Mr. Martin Chapman, K.C., District Inspector, Wellington. Death has also ceased the labours, as it alone could, of the friend to any one in trouble, Mr. Edwin Arnold, whose benevolence often led to his being imposed upon; but that never discouraged him. He was Official Visitor in the Wellington District for twenty-one years, and his memory will be regarded with respect and affection.

In addition to the visits of District Inspectors and Official Visitors, Mr. Holder has inspected the offices and stores and looked into many matters on my behalf, and Miss Hanna has made her round of inspection, residing at the hospitals so as to be present at all hours and at any part. My own visits were as follow:—

Auckland.—Visited in April and May, 1923, and May this year. At the first of these visits a large number of works, decorating and modernizing the hospital, were in progress, and at the last I was glad to find that a great deal had been completed. The increased and more efficient bathing-facilities and the new properly ventilated lavatory blocks are a marked improvement, and the extensive alterations in the kitchen have improved its service and made it an entirely wholesome place to work in. I found this Department under women, and scrupulously clean.

The inmates of the Wolf Home were bright, and expressed themselves as comfortable. Both sides are under the care of nurses.

A small section of the main building on the men's side, a dark and undesirable portion of the old part, has been entirely remodelled, and will make a most bright and comfortable self-contained place for a few well-conducted parole patients.

Altogether, the year has shown a distinct advance. The general health of the patients has been good.

Tokanui.—Visited in May, 1923, and May of this year. The male reception-house is in occupation, and tenders have been let for a corresponding block on the women's side. I saw work in progress on the store and office block. This will be a great convenience, as it will be reached under cover from both sides of the institution. At present the stores are scattered.

The development of the estate has made great progress, and much credit is due to Mr. McDonald, the Manager, whose trust in and kindly bearing towards the patients employed is not lost on them. The vegetable-garden has been largely extended. I am glad to say that the matter of piping the Pirongia water has been approved, which sets at rest our fear concerning the group of springs, our present source, giving out—they were very low for part of the year. I found the patients very well and doing well, well clothed, and well fed.

Porirua.—Visited in April, May, and September, 1923, and in February of this year. As stated above, tenders have been let for five villas, three for men and two for women, which will clear the crowded wards. The large extension of Wards 4 and B day-rooms, for which tenders have been let, will give much-needed sitting-room accommodation.

The daily routine of the institute goes on satisfactorily, and the general health of the patients has been good, but there have been a number of cases of scabies, some having it on admission. Whether these were the source of contagion has not been definitely settled, but every precaution was taken with them, and a steam disinfectant has been installed to treat all clothing before being sent to the laundry.

Last year I suggested that the Engineers' Department should be moved to another site. We had to decide whether we would increase the electric-lighting plant or purchase supply from the hydro-electric scheme. The Engineers informed me that, as it is essential for us to use steam for many purposes, it will be more economical to make our own electricity, and as I understand that the district will not get the hydro-electric supply, or, at any rate, not in the near future, I have asked the Public Works Department to go into the question of our supplying the wants of the district, and on its report the matter will depend.

Nelson.—Visited in February, 1923, and in January of this year. Great credit is due to Dr. Gray for well-directed energy, and to his staff for adapting themselves enthusiastically to co-operate in the newer methods.

When one realizes the advance made in the transfer of patients from Nelson and elsewhere to Stoke, where many who had been idle hitherto are working and on parole, and the changes that have been effected at Nelson, the opening of the reception-house (Braemar) under the charge of Sister Brand, the home for deficient boys, El Nido, in occupation, and the small hospital ward, all efficient, accomplished at a relatively small outlay and working efficiently, one has reason to be satisfied. The purchase of the old canning-factory with its water-rights opens the way to the erection of villas for women patients at that end of the Stoke estate and for the establishment of a general kitchen and laundry.

Hokitika.—Visited in March, November, and December, 1923. At the last visit one could judge that the admission and hospital wards and the administration block would be ready for occupation in three or four months. They are well designed for their purpose, and have been placed under Sister Rolfes. The hospital staff removed the buildings neighbouring the site, scrapping those of no further use and utilizing good material for a small isolation hospital. Tenders have been called for a "closed" villa, which will empty that part of the old buildings which have been the subject of comment, permitting of their being removed. Dr. Buchanan's residence is just in the site where a

villa is wanted for women patients. We have now progressed sufficiently to build a residence for the Medical Superintendent, and when he has moved into it, to adapt his present one for a villa for women. The new buildings are lighted by electricity, the drainage has been led to the sea, and roads have been made in anticipation of the changes. I found the patients well clothed and well fed, and those able to appreciate the improvements expressed themselves as contented. It must be a satisfaction to Dr. Buchanan to find his energy bearing fruit.

Christchurch.—Visited in March, November, and December, 1923. The renovations have proceeded apace, and the dining-room extensions are in occupation, and twenty-four bedrooms, with sitting-room, &c., for the attendant staff are in course of erection. A small infirmary for women on the ground floor and some extensions in the laundry will bring this hospital up to date. I have every reason to be satisfied with the condition of the patients and with Dr. Crosby's evident interest in their care and treatment.

The farm at Templeton would give scope for change and healthy occupation of some twenty to thirty patients, and plans have been prepared for a suitable building.

The Lodge, Hornby, continues excellent in every way for ladies whose mental condition is not so disturbed as to destroy the amenities for the others. When I last visited, the patients expressed themselves as pleased with the house and its gardens, with the resident lady doctor, and with the nurses, leaving me with the impression that the experiment was and will continue to be a success.

Seacliff.—Visited in March, June, and December, 1923. The artisan staff has been employed in demolishing some old buildings, and the replacement, with extensions, of these is not yet completed. I discussed with Dr. McKillop some necessary extensions in the vicinity of the bowling-green and the need of some villas at Waitati. Being assured of the improved water-supply and that the earth-slip does not affect the laundry, I agreed to plans being prepared for the extension of the same; also for the erection of new farm buildings on a different site from the present, where the buildings have been twisted by the slip acting over a number of years. I found the patients well—no one seriously ill—the institution in good order, and the staff working well. The patients take a great interest in the recreations provided. The cricket and football ground was too limited, and at my last visit was being extended by lowering its surface and diverting a portion of the main drive.

Ashburn Hall.—Visited in March, June, and December, 1923. This comfortable little licensed hospital is picturesquely situated. It is quite evident that the patients therein receive individual attention from Dr. Will and the Matron, their relations with whom are most cordial.

In conclusion, I have to express my appreciation of the Medical Superintendents, each for his devotion to his own institution and his desire to make it the best, and my thanks for their unusual helpfulness by writing fully about or calling at headquarters to discuss matters which they knew I would go into on the spot had circumstances not detained me in Wellington.

My special thanks are due to the Head Office staff, which has worked in the most complete harmony and co-operation.

I have to record with regret the death of my Deputy, Dr. William Baxter Gow, who after experience in England came to this country as Medical Superintendent of Mount View and was therefrom transferred to Sunnyside. After some years at that hospital his health broke down, and, recognizing the difficulty he had in adequately and efficiently visiting the wards, I arranged for him to change places with Dr. Gibben, then the Deputy Inspector-General. As I mentioned in my last report, Dr. Gow's health did not improve, and he was on sick-leave. In February of this year he retired, and last month the end came. He had struggled bravely against heavy odds, and will be gratefully remembered by his old staff and patients, in whose welfare he was always actively interested.

I have to express my thanks to yourself and the Government who have made it possible for me to take leave abroad in terms of medical advice tendered, and I am looking forward to be able in due course to make a virtue of the necessity which takes me to Europe to study on the spot advances in matters connected with care and treatment of mentally defective persons which may be adapted beneficially to the requirements and resources of this country.

I have, &c.,

FRANK HAY.

Hon. Sir Maui Pomare, K.B.E., C.M.G.

MEDICAL SUPERINTENDENTS' REPORTS.

AUCKLAND MENTAL HOSPITAL.

Dr. BEATTIE reports:—

The number of patients resident during the year was 1,058, and the total treated during the year was 1,279. The number admitted was 209. The recovery-rate was much more favourable in the case of the female patients than in that of the males, the rates being 39.31 per cent. for males and 52.17 per cent. for females. The character of the cases admitted, and especially with regard to debility and general enfeeblement, must always be an important factor in the recovery-rate, but one cannot help the feeling that the greater care and sympathy exercised on the female side plays a big part.

It is much easier to get suitable nurses than suitable attendants. Moreover, I am not satisfied that the discipline on the male side is what it used to be or what it ought to be.

The death-rate on the male side was 9.36 per cent. and on the female side 5.42 per cent. The chief causes of death were senile decay, chronic brain-disease, and general paralysis. These caused 36 deaths of males and only 12 of females. The other causes were in units.

The construction of a suitable male hospital where female nurses can be employed is now an urgent necessity, and I am glad to know that progress is being made in that direction.

Considerable improvements have been made structurally in the Hospital during the year, and they are still being carried out.

The general work of the Hospital is progressing fairly favourably, but one cannot fail to note the increasing difficulty in getting patients to suitably employ themselves. This must act prejudicially upon the recovery-rate and upon the general health of the patients.

I have to thank the proprietors of the *Herald* for papers gratuitously supplied for patients' use, the District Inspector and Official Visitors for their consideration and help, and the Medical Officers for their loyal support.

The work of the Matron and nurses on the female side has been specially gratifying.

TOKANUI MENTAL HOSPITAL.

Dr. GRIBBEN reports:—

The annual statistics show that our population at Tokanui-Mental Hospital increased from 251 (153 males and 98 females) on the 1st January to 264 (163 males and 101 females) at the end of the year. Patients admitted for the first time numbered 18 (10 male and 8 female), while 1 male patient was readmitted. Transfers from other institutions totalled 4 (3 male and 1 female). A total of 274 patients were under care during the year. Three male and 3 female patients were discharged recovered, and 1 female patient discharged relieved. There were 2 deaths (1 male and 1 female) during the year, the causes of death being heart-failure and acute peritonitis respectively. One female patient was transferred to another institution. The number of patients on the register at the 31st December, 1923, was 264 (163 males and 101 females). The average number resident during the year was 254 (156 males and 98 females).

Voluntary boarders at the beginning of the year under care numbered 4, while 3 new cases were admitted during the period under review. Of this number, 4 were discharged, and 1 died of senile decay, thus leaving 2 voluntary boarders under care on the 31st December, 1923.

The general health of the patients has been excellent throughout the year, especially so considering the advanced age of many of them. We had some fifty cases of influenza last November, all of which made a good recovery.

The musical people of the district have kindly provided us with concerts at intervals during the year. Fortnightly dances for patients during the cold weather, and occasional visits to the picture-theatre in Te Awamutu, help to relieve the monotony of their lives. The furnishing of the new male admission block was completed early in the year, and the admission of male patients was made possible.

The installation of an efficient water-supply is a matter of increasing urgency. The well which constitutes the present source is becoming more variable and unreliable in its output.

Extension of operations in the kitchen garden has made it possible to supply the patients with a greater variety of vegetables than was formerly available.

Work on the farm has proceeded satisfactorily. Apart from the usual cropping operations, some 350 acres of new country have been cleared, ploughed, and laid down in grass. The extent of the work in hand now renders imperative the appointment of an assistant to the Farm-manager.

The untiring energy of Dr. Macpherson and the loyal co-operation of the staff generally have made the work of the year a pleasure.

PORIRUA MENTAL HOSPITAL.

Dr. JEFFREYS reports:—

The total number of patients under care during the year was 1,361 (770 males and 591 females), including 6 transfers (4 males and 2 females) from other institutions. There were 238 admissions (134 males and 104 females), and of these only 33 (16 males and 17 females) were readmissions. The average number resident during the year, including 31 voluntary boarders, was 1,124 (644 males and 480 females). Of the 122 patients who were discharged, 87 (51 males and 36 females) were recorded as recovered, making the recovery-rate $36\frac{1}{2}$ per cent. on the number admitted. The actual recovery-rate was, no doubt, considerably higher, but 33 patients who were on probation failed either to report themselves or to furnish a medical certificate at the expiration of their probationary period, and under section 85 of the Mental Defectives Act had to be written off as unrecovered. It is only reasonable to assume that a fair proportion of these had recovered.

The deaths during the year were 83, or $7\frac{1}{2}$ per cent. of the average number resident. The chief causes of death were senile decay 27, general paralysis 8, phthisis 8, cardiac disease 6. Eight deaths from tuberculosis was an exceptionally large number for this institution, but a majority of the cases were secondary to influenza, and one female patient was in an advanced stage of pulmonary tuberculosis on admission and died very shortly afterwards. On the whole, the general health of the patients has been remarkably good.

The overcrowding is still a cause of great anxiety and added responsibility, but it is a relief to know that a substantial grant has been made for the erection of a number of villas, that the plans are prepared, and that in the course of a few months the work will be well under way.

The longer one is associated with the mentally defective the more one realizes the inestimable value of suitable occupation, not only as a palliative but as one of the most important curative means at our disposal. Every patient who is capable of working is encouraged to occupy himself in some useful way, and at present 56.8 per cent. of the male patients are employed, the majority of them outside—on the farm, in the gardens, or with one of the special working-parties. Considering the number of senile and feeble patients who are physically unfit to work, and the number who are mentally unfit, this percentage must be regarded as highly satisfactory and as reflecting great credit upon the staff, who have it constantly impressed upon them that the good of the patients, not the work to be done, must be the first consideration. There are rarely more than 14 or 15 male patients capable of employment who refuse to occupy themselves in any useful way.

Only $42\frac{1}{2}$ per cent. of the women patients are "workers," but there is not the same variety of occupation for them as for the men, and practically none out-of-doors, but a number of them get the benefit of open-air exercise in daily walks, and in the summer frequent picnics are arranged for them by the nurses, among whom there is a pleasing rivalry to give their charges a good time.

I regret losing the services of Dr. Monaghan, who left to take up private practice, but was most fortunate in procuring as his successor Dr. Blair, one of the most capable and conscientious medical officers it has been my good fortune to be associated with. I have to acknowledge my indebtedness to him and to Dr. Prins and other officers for their able assistance.

NELSON MENTAL HOSPITAL.

Dr. GRAY reports :—

During the year 1923 we have had under care 379 patients, with an average resident number of 306. Our average number has increased by 43, mainly due to transfers from other institutions. Our recovery-rate upon the direct admissions was 37 per cent., which is satisfactory considering that the irrecoverable male imbeciles from all over the Dominion are admitted to this institution. Our death-rate was 9 per cent. upon the average number resident, the principal cause (25 per cent.) being senile asthenia.

The general health of the patients has been good.

The experience of each successive year adds to my conviction that in the villa system we have the means not only of ideal classification, but also of obviating all the objectionable features which loom so largely in the public mind.

At Stoke, Nelson, we have already seven different degrees of classification, which enables each type to be dealt with in a villa appropriate to its needs.

During the year the two outstanding events have been the opening of the reception block and the provision of a well-equipped male hospital block.

The former—named Braemar—is in charge of Sister I. D. Brand, R.R.C., who has had a large experience in mental hospitals and other institutions in Britain and is *au fait* with the latest methods of treatment. In addition to her ordinary duties Sister Brand gives lectures and nursing demonstrations to the staff, which are much appreciated.

The inauguration of the male hospital ward has marked a big advance. This ward, to which most of our male cases have been admitted, is staffed by female nurses, and the experiment has been an unqualified success.

I am satisfied that 90 per cent. of our male admissions into mental hospitals could be looked after by female nurses with much benefit to patients and institutions. The employment of indoor male staff is more or less a survival of the prison tradition, and we should aim at their replacement by nurses, retaining only sufficient males to deal with the really few recalcitrant cases we meet.

El Nido—the boys' villa—has 64 residents, and enlargement will have to be considered in the near future. The nurses in charge do excellent work, not only in providing for the comfort of the boys, but in training them to useful occupations.

The development of Stoke farm goes on steadily, and the institution is admirably suited for its function as a parole colony. Excavations are being carried out for the new "closed" villa, and plans are well forward for the new laundry and three female villas on lovely sites facing the sea.

No less than 72.5 per cent. male patients are usefully employed, and 65.5 per cent. are on parole.

I am very glad to record that the public of Nelson are showing a kindly and practical interest in the institution. The children of Hampden Street School sent for our juvenile Christmas-tree a handsome donation, while the public of the neighbourhood, through the School Committee, has arranged a picnic for the children. These and similar acts of kindness are most encouraging.

There have been no regrettable incidents throughout the year, a state of matters which is largely due to the excellence of my officers and staff to whom my thanks are due.

HOKITIKA MENTAL HOSPITAL.

Dr. BUCHANAN reports :—

The number of patients on the register at the beginning of the year was 242. At the end of the year there remained 236, made up of 171 males and 65 females. There were 19 admissions, 10 discharges, and 15 deaths. The general health of the patients has been good.

Since my last report Love Bros. have been building the male reception wing of the admission block and a central administration block. The female wing, built by ourselves, has been completed for some months now with the exception of the plumbing. I hope to have both wings in working-order by the end of June, 1924.

An old building which stood on the site of the above has been removed, renovated, and set up as a small fever hospital.

The large recreation-ground has been completed. This will be of immense benefit to the patients.

The appointment of a sister, who has qualified in both mental and general training, to take charge of the new block is a most important innovation. The training of the nurses will naturally be more comprehensive, and the nursing of the sick and new admissions will be centralized. This cannot but be of immense benefit to all concerned.

I must again express my appreciation of the loyal manner in which my staff has co-operated with me during this difficult period of reconstruction.

CHRISTCHURCH MENTAL HOSPITAL.

Dr. CROSBY reports :—

The year opened with 812 patients on our register, and closed with 806—viz., 359 men and 447 women. During the year 136 patients were admitted (60 males, 76 females), making a total under care of 948 (437 males, 511 females). Sixty-nine patients were discharged (35 males, 34 females), and 34 males and 27 females died.

Twenty-seven persons came in as voluntary boarders, of whom five sought admission for the second time. The number of cases remanded for observation by the Magistrates was seventeen.

The average number resident during the year was 784, there being 171 more females than males.

As is usual, the prominent causative factors of the insane states of those admitted were heredity, previous attacks, and senility. The recovery-rate on those admitted was 31.62.

We were visited during the year by a Spiritual Healing Mission, for which many of the patients were prepared, but, unfortunately, its curative results were negative and did not influence our discharge-rate. The most frequent causes of death were senile decay, epilepsy, and general paralysis of the insane—that hitherto progressively fatal disease which at last, happily, shows promise of becoming amenable to treatment.

The general health of the community was satisfactory, though a troublesome skin-affection appeared among some of the patients during the winter and spring months. This caused a good deal of inconvenience and expense.

The building extensions on the female side have been completed. The increased accommodation is now in use and is greatly appreciated. Additional accommodation is still required in the female infirmary ward, but I recognize that our artisan staff will be fully occupied this year with the buildings already authorized. The furnishings throughout the institution, especially carpets, are showing the effects of constant use and are in much need of replenishment. A little has been done in this direction, but much more will be necessary this year to bring the institution up to the standard of a well-appointed mental hospital.

The social life of the institution has been continued on lines that have hitherto been acceptable to the patients. Our thanks are greatly due to the visiting chaplains for their regular religious ministrations. I am grateful for the appointment of Mrs. Williams as Official Visitor in the place of the late Miss Colborne-Veel, and also for that of Mr. H. H. Hanna in a similar capacity.

The year brought with it the retirement on superannuation of our head gardener, Mr. Henry Brown, after twenty-five years of good and faithful service to the institution.

I am glad again to take this opportunity of expressing my thanks to Drs. Beale and Roberts, and to the officers and members of the staff, for the great help they have given in carrying on the work of the Mental Hospital.

SEACLIFF MENTAL HOSPITAL.

Dr. McKillop reports:—

On the 1st January there were 1,101 patients on the register. During the year we had 151 admissions (83 men and 68 women). Eighty-nine patients were discharged, and 15 transferred to other institutions. The total number of committed cases under care was 1,252, and 1,100 patients remained on the 31st December.

Thirty-seven voluntary boarders received treatment—8 males and 2 females were discharged recovered, 1 female was committed, and 1 died, leaving 15 men and 10 women under this section.

Of the 89 discharged cases, 61 were recovered, making the male recovery 44 per cent. on the number admitted. The figures must be regarded as satisfactory considering that almost one-third of the admissions suffered from mental trouble for over twelve months prior to committal.

The general health of the patients has been very satisfactory. There were 52 deaths (29 males and 23 females), 4.7 per cent. of the number resident. It is worthy to note that 27 of the deaths were of patients over 70 years of age.

The Mental Hospital buildings and property have been maintained in good order by the artisan staff, who have also been engaged in the execution of various new undertakings for the provision of additional accommodation and improvement in administration.

During 1924 I trust it will be possible to obtain grants for works of greater magnitude. The Public Works Department have at present under consideration plans of proposed new kitchen, bakery, stores, laundry, and farm buildings. The present kitchen, bakery, and laundry facilities are totally inadequate for an institution of this size, and the farm buildings are in an unsatisfactory and dangerous condition.

Work on the farm and garden continues, as in previous years, to provide a large number of male patients with suitable employment, which is performed by them with interest and benefit to themselves and with advantage to the institution.

The farm returns have again been satisfactory.

The patients' recreation has been arranged on the usual lines; the weekly picture-show is always very much appreciated.

Mr. Gallaway continues to take a keen interest in this hospital, and pays regular visits. The institution is indeed fortunate in having a Deputy Inspector who takes such a live interest in its affairs.

To the Official Visitors (Miss Monson and Mr. Slater), Mr. Cumming (the Patients' Friend), and to the clergy of all denominations I tender my sincere thanks for their regular visits and for their attention to our inmates.

Dr. Church left us to go into private practice on the West Coast, and was succeeded by Dr. Williams.

I desire to record my thanks to Drs. Lee, Roberts, Church, and Williams for the help they have always afforded me in the medical and general work of the institution.

I have also to thank Mr. Hughes and office staff, the Matron, Head Attendant, and other heads of departments for their loyal and efficient assistance, and the staff as a whole for the satisfactory manner in which its work has been performed.

APPENDIX.

TABLE I.—SHOWING THE ADMISSIONS, READMISSIONS, DISCHARGES, AND DEATHS IN MENTAL HOSPITALS DURING THE YEAR 1923.

	M.			F.			T.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
In mental hospitals, 1st January, 1923	2,816	2,116	4,932						
Admitted for the first time	365	302	667	}	442	366	808		
Readmitted	77	64	141						
Total under care during the year	3,258	2,482	5,740						
Discharged and died—									
Recovered	168	151	319						
Relieved	42	38	80						
Not improved	15	5	20						
Died	194	131	325						
(Not including transfers—Males 41, females 24.)							419	325	744
Remaining in mental hospitals, 31st December, 1923	2,839	2,157	4,996						
Increase over 31st December, 1922	23	41	64						
Average number resident during the year	2,789	2,079	4,868						

TABLE II.—ADMISSIONS, DISCHARGES, AND DEATHS, WITH THE MEAN ANNUAL MORTALITY AND PROPORTION OF RECOVERIES, ETC., PER CENT. ON THE ADMISSIONS, ETC., DURING THE YEAR 1923.

Mental Hospitals.	In Mental Hospitals on 1st January, 1923.			Admissions in 1923.									Total Number of Patients under Care.		
				Admitted for the First Time.			Not First Admission.			Transfers.					
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Auckland	646	424	1,070	89	73	162	27	17	44	(1 2 3)	763	516	1,279		
Christchurch	377	435	812	47	59	106	11	14	25	(2 3 5)	437	511	948		
Dunedin (Seacliff)	631	470	1,101	63	51	114	18	15	33	(2 2 4)	714	538	1,252		
Hokitika	172	70	242	8	5	13	3	1	4	(1 1 2)	184	77	261		
Nelson	184	110	294	28	16	44	1	..	1	(28 12 40)	241	138	379		
Porirua	636	487	1,123	114	85	199	16	17	33	(4 2 6)	770	591	1,361		
Tokanui	153	98	251	10	8	18	1	..	1	(3 1 4)	167	107	274		
Ashburn Hall (private mental hospital)	17	22	39	6	5	11	..	..	..	( .. 1 1)	23	28	51
Totals	2,816	2,116	4,932	365	302	667	77	64	141	(41 24 65)	3,258	2,482	5,740		

Mental Hospitals.	Patients discharged, transferred, and died.												In Mental Hospitals on 31st December, 1923.					
	Discharged recovered.			Discharged not recovered.			Transferred.			Died.			Total discharged, transferred, and died.					
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Auckland	46	48	94	8	2	10	(13 2 15)	59	23	82	126	75	201	637	441	1,078		
Christchurch	22	21	43	13	13	26	(9 3 12)	34	27	61	78	64	142	359	447	806		
Dunedin (Seacliff)	35	31	66	12	7	19	(13 2 15)	29	23	52	89	63	152	625	475	1,100		
Hokitika	2	2	4	2	2	4	(2 .. 2)	7	8	15	13	12	25	171	65	236		
Nelson	8	8	16	2	..	2	(2 1 3)	17	11	28	29	20	49	212	118	330		
Porirua	51	36	87	18	17	35	(2 14 16)	46	37	83	117	104	221	653	487	1,140		
Tokanui	3	3	6	..	1	1	(.. 1 1)	1	1	2	4	6	10	163	101	264		
Ashburn Hall (private mental hospital)	1	2	3	2	1	3	(.. 1 1)	1	1	2	4	5	9	19	23	42		
Totals	168	151	319	57	43	100	(41 24 65)	194	131	325	460	349	809	2,839	2,157	4,996		

Mental Hospitals.	Average Number resident during the Year.			Percentage of Recoveries on Admissions during the Year.			Percentage of Deaths on Average Number resident during the Year.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
Auckland	634	424	1,058	39.65	53.33	45.63	9.26	5.21	7.60
Christchurch	357	427	784	37.93	28.76	32.82	9.52	6.32	7.78
Dunedin (Seacliff)	627	468	1,095	43.20	46.95	44.89	4.64	4.84	4.72
Hokitika	171	67	238	18.18	33.33	23.52	4.09	11.93	6.32
Nelson	196	110	306	27.58	50.00	35.55	8.66	10.00	8.48
Porirua	630	463	1,093	39.23	35.29	37.50	7.30	7.99	7.59
Tokanui	156	98	254	27.27	37.50	31.57	0.64	1.02	0.78
Ashburn Hall (private mental hospital)	18	22	40	16.66	40.00	27.63	5.55	4.54	5.00
Totals	2,789	2,079	4,868	38.00	41.22	39.48	6.95	6.30	6.67

TABLE III.—AGES OF ADMISSIONS.

Ages.	Auckland.		Christchurch.		Dunedin (Seacliff).		Hokitika.		Nelson.		Porirua.		Tokanui.		Ashburn Hall (Private Mental Hospital).		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.			
Under 5 years ..	1	0	0	2	2	..	..	..	3	0	3	0	5	5	..	..	3	2	5
From 5 to 10 years ..	5	0	1	1	2	..	..	..	5	1	6	2	3	5	..	..	7	7	14
" 15 " 20 ..	3	4	2	1	3	2	3	5	4	1	5	2	3	5	0	1	14	10	24
" 20 " 30 ..	22	12	13	25	33	11	5	16	2	1	3	17	20	37	2	2	21	15	36
" 30 " 40 ..	32	27	59	33	26	18	12	30	3	6	9	27	20	47	2	2	77	67	144
" 40 " 50 ..	21	27	48	8	14	10	9	19	1	2	3	30	23	53	2	3	90	90	180
" 50 " 60 ..	15	9	24	9	7	12	15	27	0	1	1	23	17	40	0	1	73	81	154
" 60 " 70 ..	9	6	15	10	3	6	4	10	3	0	3	11	4	15	1	1	64	50	114
" 70 " 80 ..	6	6	12	4	3	7	5	12	2	0	2	17	4	21	1	0	43	19	62
" 80 " 90 ..	3	0	3	2	1	1	1	2	1	0	1	1	1	2	1	0	39	18	57
" 90 " 100 ..	..	..	..	..	..	..	..	..	..	..	..	0	2	2	..	..	8	4	12
" 100 " 105 ..	..	..	..	..	..	..	..	..	..	..	..	0	2	2	..	..	0	2	2
Unknown ..	1	0	1	1	2	..	..	..	..	..	..	..	..	..	..	..	3	1	4
Transfers ..	1	2	3	2	3	2	2	4	28	12	40	4	2	6	3	1	41	24	65
Totals ..	117	92	209	60	76	83	68	151	57	28	85	134	104	238	14	9	483	390	873

TABLE IV.—DURATION OF DISORDER ON ADMISSION.

—	Auckland.		Christchurch.		Dunedin (Seacliff).		Hokitika.		Nelson.		Porirua.		Tokanui.		Ashburn Hall (Private Mental Hospital).		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.					
First Class (first attack and within 3 months on admission)	77	59	136	30	32	62	8	4	12	1	9	10	76	52	128	5	5	10	233	186	419
Second Class (first attack above 3 months and within 12 months on admission)	3	6	9	5	4	9	..	..	..	2	0	2	34	20	54	1	1	2	53	40	93
Third Class (not first attack, and within 12 months on admission)	24	15	39	14	21	35	3	2	5	5	4	9	2	2	4	1	0	1	68	65	133
Fourth Class (first attack or not, but of more than 12 months on admission)	12	10	22	9	16	25	..	..	..	21	3	24	18	28	46	4	2	6	88	75	163
Unknown ..	1	2	3	2	3	5	1	1	2	28	12	40	4	2	6	3	1	4	41	24	65
Transfers ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals ..	117	92	209	60	76	136	83	68	151	57	28	85	134	104	238	14	9	23	483	390	873

TABLE V.—AGES OF PATIENTS DISCHARGED "RECOVERED" AND "NOT RECOVERED" DURING THE YEAR 1923.

Ages.	Auckland.		Christchurch.		Dunedin (Seacliff).		Hokitika.		Nelson.		Porirua.		Tokanui.		Ashburn Hall (Private M.H.).		Total.						
	Re-covered.	Not re-covered.	Re-covered.	Not re-covered.	Re-covered.	Not re-covered.	Re-covered.	Not re-covered.	Re-covered.	Not re-covered.	Re-covered.	Not re-covered.	Re-covered.	Not re-covered.	Re-covered.	Not re-covered.	Re-covered.	Not re-covered.					
Under 5 years																							
From 5 to 10 years	..	..	..	..	0 1 1	..	..	..	..	1 0 1	..	..	..	..	..	..	..	..
" 10 " 15 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 15 " 20 "	2 0	2	0 2 2	..	0 1 1	..	..	..	..	..	..	..	..	..	..	..	..	..
" 20 " 30 "	7 8	15	8 1 9	3 2 2	5 8 13	3 0 3	1 0 1	1 1 2	1 0 1	16 13	29 3 3	6 0 1	1 1	..	..	..	..	..
" 30 " 40 "	10 17	27	1 3 7	10 1 3	4 10 20	3 3 6	..	3 1 4	1 0 1	8 6 14	2 6 8	3 0 3	..	..	..	..	..	..
" 40 " 50 "	12 16	28	2 1 3	8 11 2	5 7 9	4 13 2	0 2 1	1 1 3	3 6 ..	12 11	23 3 2	5 0 2	..	..	..	..	..	..
" 50 " 60 "	7 7	14	1 1 2	4 2 6	2 1 3	9 3 12	3 2 5	..	0 1 1	7 6	13 1 1	2 ..	..	..	..	..	..	..
" 60 " 70 "	5 0	5	1 0 1	3 0 3	2 1 1	3 0 2	2 1 1	2 0 1	1 0 1	4 0 4	1 1 2	..	..	..	..	..	..	..
" 70 " 80 "	3 0	3	2 0 2	0 1 1	..	..	..	..	..	2 0 2	3 0 3	..	..	..	..	..	..	..
" 80 " 90 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 90 " 100 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Unknown	..	..	1 0 1	0 1 1	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Transfers	..	..	13 2 15	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals	46 48	94 21	4 25	22 21	43 22	16 38	35 31	66 25	9 34	2 2 4	4 2 6	8 8 16	4 1 5	51 36	87 20	31 51	3 3 6	0 2 2	1 2 3	2 2 4	168 151	319 98	67 165

TABLE VI.—AGES OF PATIENTS WHO DIED.

Ages.	Auckland.		Christchurch.		Dunedin (Seacliff).		Hokitika.		Nelson.		Porirua.		Tokanui.		Ashburn Hall (Private M.H.).		Total.			
	Re-covered.	Not re-covered.	Re-covered.	Not re-covered.	Re-covered.	Not re-covered.	Re-covered.	Not re-covered.	Re-covered.	Not re-covered.	Re-covered.	Not re-covered.	Re-covered.	Not re-covered.	Re-covered.	Not re-covered.	Re-covered.	Not re-covered.		
Under 5 years																				
From 5 to 10 years		
" 10 " 15 "		
" 15 " 20 "		
" 20 " 30 "		
" 30 " 40 "		
" 40 " 50 "		
" 50 " 60 "		
" 60 " 70 "		
" 70 " 80 "		
" 80 " 90 "		
" 90 " 100 "		
Unknown		
Totals	59 23	82	34 27	61	29 23	52	7 8	15 17	11 28	46 37	83 194	1 1	2 1	1 1	2 1	1 1	2 1	194 131	325 98	67 165

TABLE VII.—CONDITION AS TO MARRIAGE.

	Admissions.			Discharges.			Deaths.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
AUCKLAND—									
Single ..	67	32	99	32	17	49	27	11	38
Married ..	38	44	82	19	29	48	22	9	31
Widowed ..	8	14	22	3	4	7	9	3	12
Unknown ..	3	0	3	..	..	..	1	0	1
Transfers ..	1	2	3	13	2	15	..	..	..
Totals ..	117	92	209	67	52	119	59	23	82
CHRISTCHURCH—									
Single ..	30	31	61	19	11	30	17	8	25
Married ..	20	33	53	15	22	37	8	5	13
Widowed ..	7	9	16	0	1	1	3	5	8
Unknown ..	1	0	1	1	0	1	6	9	15
Transfers ..	2	3	5	9	3	12	..	..	..
Totals ..	60	76	136	44	37	81	34	27	61
DUNEDIN (Seacliff)—									
Single ..	58	31	89	26	20	46	14	11	25
Married ..	22	28	50	19	15	34	13	9	22
Widowed ..	1	7	8	2	3	5	2	3	5
Unknown ..	..	..	..	..	..	..	..	..	..
Transfers ..	2	2	4	13	2	15	..	..	..
Totals ..	83	68	151	60	40	100	29	23	52
HOKITIKA—									
Single ..	7	1	8	2	0	2	3	1	4
Married ..	3	3	6	2	4	6	1	5	6
Widowed ..	0	2	2	..	..	..	3	2	5
Unknown ..	1	0	1	..	..	..	..	..	..
Transfers ..	1	1	2	2	0	2	..	..	..
Totals ..	12	7	19	6	4	10	7	8	15
NELSON—									
Single ..	22	8	30	7	4	11	13	5	18
Married ..	6	7	13	3	4	7	3	6	9
Widowed ..	1	1	2	..	..	..	1	0	1
Unknown ..	..	..	..	..	..	..	..	..	..
Transfers ..	28	12	40	2	1	3	..	..	..
Totals ..	57	28	85	12	9	21	17	11	28
PORIRUA—									
Single ..	45	48	93	24	30	54	14	10	24
Married ..	75	46	121	43	20	63	28	16	44
Widowed ..	10	8	18	2	3	5	4	11	15
Unknown ..	..	..	..	..	..	..	..	..	..
Transfers ..	4	2	6	2	14	16	..	..	..
Totals ..	134	104	238	71	67	138	46	37	83
TOKANUI—									
Single ..	10	4	14	1	2	3	1	0	1
Married ..	0	3	3	1	2	3	0	1	1
Widowed ..	1	1	2	1	0	1	..	..	..
Unknown ..	..	..	..	..	..	..	..	..	..
Transfers ..	3	1	4	0	1	1	..	..	..
Totals ..	14	9	23	3	5	8	2	0	2
ASHBURN HALL—									
Single ..	4	3	7	1	1	2	1	1	2
Married ..	2	1	3	2	1	3	..	..	..
Widowed ..	0	1	1	0	1	1	..	..	..
Unknown ..	..	..	..	..	..	..	..	..	..
Transfers ..	0	1	1	0	1	1	..	..	..
Totals ..	6	6	12	3	4	7	1	1	2
TOTALS—									
Single ..	243	158	401	112	85	197	90	47	137
Married ..	166	165	331	104	97	201	75	51	126
Widowed ..	28	43	71	8	12	20	22	24	46
Unknown ..	5	0	5	1	0	1	7	9	16
Transfers ..	41	24	65	41	24	65	..	..	..
Totals ..	483	390	873	266	218	484	194	131	325

TABLE VIII.—NATIVE COUNTRIES.

Countries.	Auckland.			Christchurch.			Dunedin (Sea-cliff).			Hokitika.			Nelson.			Porirua.			Tokanni.			Ashburn Hall (Private M.H.).			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 and Wales ..	128	78	206	76	94	170	94	55	149	29	9	38	12	10	22	158	75	233	35	16	51	5	2	7	537	339	876
Scotland ..	30	13	43	22	18	40	77	61	138	7	6	13	10	6	16	34	18	52	15	16	31	1	1	2	196	139	335
Ireland ..	54	39	93	31	36	67	53	41	94	29	9	38	11	7	18	51	48	99	10	2	12	..	..	..	239	182	421
New Zealand ..	288	247	535	197	271	468	357	293	650	71	38	109	145	64	209	315	289	604	84	64	148	13	17	30	1,470	1,283	2,753
Australasian States ..	46	23	69	12	11	23	20	22	42	14	2	16	6	4	10	28	15	43	6	2	8	0	3	3	132	82	214
France ..	1	0	1	..	..	..	..	..	..	..	..	..	1	0	1	..	..	..	..	..	..	..	..	..	2	0	2
Germany ..	4	2	6	2	2	4	1	1	2	3	0	3	2	0	2	7	8	15	1	0	1	..	..	..	20	13	33
Austria ..	26	1	27	2	2	4	1	0	4	..	..	..	1	0	1	4	..	..	3	0	3	..	..	..	33	3	36
Norway ..	3	1	4	..	..	..	4	0	4	1	0	1	0	1	1	..	..	..	1	0	1	..	..	..	13	3	16
Norway ..	5	1	6	3	0	3	2	0	2	5	0	5	2	0	2	2	2	4	..	..	..	..	..	..	19	3	22
Sweden ..	2	0	2	2	1	3	2	1	3	..	..	..	1	0	1	3	0	3	..	..	..	..	..	..	11	4	15
Denmark ..	4	1	5	..	..	..	1	0	1	3	0	3	..	..	..	3	0	3	..	..	..	..	..	..	11	1	12
Italy ..	2	0	2	1	0	1	8	0	8	3	0	3	4	2	6	10	10	20	2	0	2	..	..	..	15	0	15
China ..	17	21	38	0	1	1	2	0	2	1	0	1	2	0	2	37	19	56	5	1	6	..	..	..	36	34	70
Maoris ..	26	10	36	4	6	10	3	1	4	5	1	6	15	24	39	..	..	..	..	..	..	..	..	..	82	38	120
Other countries ..	1	4	5	7	5	12	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	23	33	56
Totals ..	637	441	1,078	359	446	806	625	475	1,100	171	65	236	212	118	330	653	487	1,140	163	101	264	19	23	42	2,839	2,157	4,996

TABLE IX.—AGES OF PATIENTS ON 31ST DECEMBER, 1923.

Ages.	Auckland.			Christchurch.			Dunedin (Sea-cliff).			Hokitika.			Nelson.			Porirua.			Tokanni.			Ashburn Hall (Private M.H.).			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 1 to 5 years ..	..	..	..	0	2	2	1	0	1	..	..	..	5	2	7	..	..	..	..	..	..	..	..	..	..	..	..
" 5 " 10 ..	4	3	7	2	5	10	2	2	4	..	..	32	1	33	0	5	5	..	..	..	..	..	..	..	40	19	59
" 10 " 15 ..	2	4	6	2	8	7	3	7	10	..	..	19	3	22	0	15	15	..	..	..	..	..	..	..	26	34	60
" 15 " 20 ..	9	11	20	8	9	17	26	9	35	1	1	2	14	4	18	4	6	10	4	0	4	..	..	..	66	40	106
" 20 " 30 ..	80	38	118	36	36	72	60	33	93	9	2	11	20	14	34	74	54	128	5	5	10	2	0	2	286	182	468	
" 30 " 40 ..	133	95	228	75	86	161	102	80	182	30	11	41	23	12	35	120	95	215	24	18	42	2	4	6	509	401	910	
" 40 " 50 ..	156	118	274	82	110	192	152	112	264	47	17	64	33	21	54	181	111	232	48	24	72	3	2	5	702	515	1,217	
" 50 " 60 ..	111	91	202	68	87	155	124	120	244	46	22	68	22	29	51	125	69	157	38	24	62	4	9	13	538	472	1,010	
" 60 " 70 ..	82	45	127	53	65	118	82	64	146	22	5	27	23	15	38	88	69	157	23	23	46	6	4	10	379	290	669	
" 70 " 80 ..	31	18	49	23	29	52	53	37	90	12	4	16	11	7	18	50	30	80	10	7	17	1	3	4	191	135	326	
" 80 " 90 ..	7	2	9	9	8	17	12	8	20	4	3	7	2	2	4	11	10	21	..	..	..	1	1	2	46	34	80
Upwards of 90 years ..	..	..	..	1	2	3	8	3	11	..	..	..	8	8	16	0	2	2	11	0	11	..	..	..	0	2	2
Unknown	50	29	79
Totals ..	637	441	1,078	359	447	806	625	475	1,100	171	65	236	212	118	330	653	487	1,140	163	101	264	19	23	42	2,839	2,157	4,996	

TABLE X.—LENGTH OF RESIDENCE OF PATIENTS WHO DIED DURING 1923.

Length of Residence.	Auckland.			Christchurch.			Dunedin (Seaciff).			Hokitika.			Nelson.			Porirua.			Tokanni.			Ashburn Hall (Private M.H.).			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 ..	6	3	9	2	4	6	1	2	3	1	0	1	0	1	1	1	1	4	0	1	1	0	1	1	12	12	24
From 1 to 3 months	3	4	7	5	3	8	3	2	5	1	0	1	3	0	3	3	3	8	3	0	3	1	1	20	12	32	
" 3 " 6 "	5	2	7	2	1	3	2	1	3	0	1	1	2	1	2	4	4	8	1	1	2	0	0	14	9	23	
" 6 " 9 "	6	0	6	2	0	2	1	0	1	0	1	2	1	0	1	2	0	2	2	0	2	0	0	8	3	11	
" 9 " 12 "	4	1	5	3	4	7	2	2	4	1	1	2	4	3	7	6	4	10	6	4	10	3	4	23	18	41	
" 1 " 2 years	8	5	13	1	1	2	1	0	1	1	0	1	3	1	0	1	3	4	9	10	19	3	4	17	6	23	
" 2 " 3 "	10	1	11	2	1	3	3	2	5	1	2	3	1	1	2	2	2	7	1	0	1	0	0	7	5	12	
" 3 " 5 "	2	0	2	2	2	4	1	1	2	1	1	2	2	1	1	0	2	2	1	0	1	0	0	9	6	15	
" 5 " 7 "	3	0	3	3	1	4	1	0	1	2	1	3	0	2	2	2	2	2	0	1	1	0	0	5	7	12	
" 7 " 10 "	0	1	1	3	2	5	1	2	3	2	1	1	1	0	1	1	1	3	2	1	3	0	1	7	8	15	
" 10 " 12 "	0	2	2	2	2	4	3	2	5	2	2	5	0	1	1	2	1	3	2	1	3	1	0	7	8	15	
" 12 " 15 "	10	3	13	7	5	12	9	7	16	2	4	6	3	0	3	7	6	13	1	0	1	1	0	40	25	65	
Over 15 years ..	1	0	1	0	1	1	0	0	0	2	4	6	3	0	3	1	2	3	1	0	1	0	0	2	3	5	
Died while absent on trial	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals ..	59	23	82	34	27	61	29	23	52	7	8	15	17	11	28	46	37	83	1	1	2	1	1	194	131	325	

TABLE XI.—LENGTH OF RESIDENCE OF PATIENTS DISCHARGED "RECOVERED" DURING 1923.

Length of Residence.	Auckland.			Christchurch.			Dunedin (Seaciff).			Hokitika.			Nelson.			Porirua.			Tokanni.			Ashburn Hall (Private M.H.).			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 ..	5	3	8	7	4	11	9	5	14	2	0	2	1	1	2	6	7	13	0	1	1	0	1	8	5	13	
From 1 to 3 months	17	13	30	3	5	8	8	7	15	0	2	2	2	2	4	18	10	28	1	3	4	1	1	42	32	74	
" 3 " 6 "	10	11	21	4	1	5	3	3	9	0	2	2	2	2	4	9	3	12	1	0	1	0	0	23	18	41	
" 6 " 9 "	5	7	12	2	1	3	2	3	5	0	0	1	1	1	2	8	3	11	1	0	1	0	0	16	14	30	
" 9 " 12 "	3	6	9	3	6	9	6	4	10	0	1	3	0	1	3	7	7	14	1	0	1	0	0	22	24	46	
" 1 " 2 years	4	6	10	3	6	9	2	2	4	0	0	1	2	1	4	1	4	5	1	0	1	0	0	3	9	12	
" 2 " 3 "	0	2	2	0	1	1	2	1	3	0	1	1	0	1	1	0	1	1	1	0	1	0	0	2	5	7	
" 3 " 5 "	2	0	2	0	1	1	2	3	5	0	1	1	0	1	1	1	0	1	1	0	1	0	0	1	2	3	
" 5 " 7 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 7 " 10 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 10 " 12 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 12 " 15 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Over 15 years ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals ..	46	48	94	22	21	43	35	31	66	2	2	4	8	8	16	51	36	87	3	3	6	1	2	168	151	319	

TABLE XII.—PRINCIPAL ASSIGNED CAUSES OF DEATH.

Causes.	Auckland.		Christchurch.		Dunedin (Seaciff).		Hokitika.		Nelson.		Porirua.		Tokanui.		Ashburn Hall (Private Mental Hospital).		Total.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
I. GENERAL DISEASES.																		
Tuberculosis--																		
General	2	4	2	4	2	0	..	..	..	..	3	5	..	..	..	..	..	..
Of lungs	1	0	..	..	..	..	..	..	1	0	..	..	..	..	..	..	..	..
Acute miliary .. .. .	..	..	..	..	0	1	..	..	..	..	..	..	..	..	..	..	..	..
Chronic rheumatism	1	0	..	..	..	..	0	1	..	..	..	..	..	..	..	..	..	..
Diabetes .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Typhoid fever .. .. .	..	..	..	..	..	..	0	1	2	0	..	..	..	..	..	..	..	..
Carcinoma .. .. .	..	..	1	2	1	0	1	1	..	..	3	0	..	..	..	..	..	..
Influenza .. .. .	..	..	1	0	1	2	..	..	..	..	..	..	..	..	1	1	..	..
Graves' disease .. .. .	..	..	1	0	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Addison's disease .. .. .	..	..	..	..	..	..	..	..	..	..	0	1	..	..	..	..	..	..
Anæmia (pernicious) .. .. .	..	..	0	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Septicæmia .. .. .	..	..	..	..	1	0	..	..	..	..	1	0	..	..	..	..	..	..
Sapremia .. .. .	..	..	0	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Toxæmia .. .. .	..	..	..	..	..	..	..	..	..	..	0	1	..	..	..	..	..	..
II. DISEASES OF THE NERVOUS SYSTEM.																		
Melancholia, exhaustion from .. .. .	..	..	1	1	0	1	..	..	0	1	..	..	..	..	..	..	1	3
Mania, exhaustion from	1	0	..	..	0	1	..	..	0	1	2	0	..	..	..	..	3	2
Acute delirium, exhaustion from .. .. .	..	..	..	..	1	0	..	..	..	..	..	..	..	..	..	..	1	0
Confusional insanity, exhaustion from .. .. .	..	..	..	..	..	..	..	..	0	1	0	1	..	..	..	..	0	2
General paralysis of insane	6	0	6	1	1	0	..	..	..	..	8	0	..	..	..	..	21	1
Dementia (alcoholic)	1	0	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	0
Organic brain-disease	10	6	..	..	1	0	..	..	0	1	1	0	..	..	..	..	12	7
Epilepsy	2	1	5	2	0	3	0	1	2	2	1	1	..	..	..	..	10	10
Apoplexy	1	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	2
Cerebro-spinal meningitis .. .. .	..	..	..	..	1	0	..	..	..	..	..	..	..	..	..	..	1	0
Cerebral hæmorrhage	1	1	1	2	1	0	..	..	0	1	..	..	..	..	..	..	3	4
Sclerosis .. .. .	..	..	..	..	..	..	..	..	..	..	0	1	..	..	..	..	0	1
Bulbar paralysis .. .. .	..	..	0	1	..	..	..	..	..	..	..	..	..	..	..	..	0	1
Tabes .. .. .	..	..	..	..	..	..	..	..	..	..	1	0	..	..	..	..	1	0
Marasmus .. .. .	..	..	1	0	..	..	..	..	1	0	..	..	..	..	..	..	2	0
III. DISEASES OF THE RESPIRATORY SYSTEM.																		
Pneumonia	1	1	1	1	..	..	..	..	..	..	1	3	..	..	..	..	3	5
" (lobar) .. .. .	..	..	..	..	..	..	..	..	2	0	..	..	..	..	..	..	2	0
Bronchitis .. .. .	..	..	..	..	1	1	..	..	..	..	2	4	..	..	..	..	3	5
IV. DISEASES OF THE CIRCULATORY SYSTEM.																		
Heart-disease	3	0	6	3	0	1	3	1	1	0	2	4	1	0	..	..	16	9
Valvular disease of the heart	3	0	..	..	2	1	..	..	0	1	..	..	..	..	..	..	5	2
Myocarditis	0	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	0	1
Aneurism .. .. .	..	..	..	..	..	..	..	..	1	0	..	..	..	..	..	..	1	0
Arterio-sclerosis .. .. .	..	..	..	..	..	..	..	..	..	..	1	0	..	..	..	..	1	0
V. DISEASES OF THE DIGESTIVE SYSTEM.																		
Ulcer of stomach	1	0	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	0
Enteritis	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1
Colitis .. .. .	..	..	..	..	..	..	1	0	..	..	..	..	..	..	..	..	1	0
Malnutrition due to internal obstruction .. .. .	..	..	0	1	..	..	..	..	..	..	..	..	..	..	..	..	0	1
Gangrene of stomach .. .. .	..	..	..	..	..	..	..	..	0	1	..	..	..	..	..	..	0	1
Peritonitis .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	0	1	..	..	0	1
Volvulus .. .. .	..	..	..	..	..	..	..	..	..	..	0	1	..	..	..	..	0	1
Exhaustion following sprue .. .. .	..	..	..	..	..	..	..	..	..	..	1	0	..	..	..	..	1	0
VI. DISEASES OF THE GENITO-URINARY SYSTEM.																		
Bright's disease	1	0	..	..	3	0	..	..	..	..	1	1	..	..	..	..	5	1
Pyelonephritis .. .. .	..	..	0	1	..	..	..	..	..	..	..	..	..	..	..	..	0	1
Uræmia .. .. .	..	..	..	..	..	..	..	..	1	0	..	..	..	..	..	..	1	0
Rupture of bladder .. .. .	..	..	..	..	..	..	..	..	..	..	1	0	..	..	..	..	1	0
VII. DISEASES OF THE SKIN.																		
Gangrene	1	0	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	0
VIII. OLD AGE.																		
Senile decay	21	6	8	4	13	12	2	4	5	2	16	11	..	..	..	..	65	39
IX. ILL DEFINED.																		
IX. ILL DEFINED. .. .. .	..	..	..	..	..	..	..	..	1	0	0	1	..	..	..	..	1	1
X. DIED WHILE ON TRIAL.																		
X. DIED WHILE ON TRIAL.	1	0	0	2	..	..	..	..	..	..	1	2	..	..	..	..	2	4
Totals	59	23	34	27	29	23	7	8	17	11	46	37	1	1	1	1	194	131

TABLE XIII.—PRINCIPAL ASSIGNED CAUSES OF INSANITY.

Causes.	Auckland.		Christchurch.		Dunedin (Seacliff).		Hokitika.		Nelson.		Porirua.		Tokanui.		Ashburn Hall (P.M.H.).		Totals.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Heredity	20	15	7	9	10	9	..	..	1	4	14	15	1	0	..	..	53	52
Congenital	28	8	5	6	10	5	1	0	12	3	9	10	3	1	..	..	68	33
Previous attack	5	23	8	12	16	21	..	..	..	..	13	17	1	0	..	..	43	73
Puberty or adolescence	0	1	..	..	6	3	0	1	4	1	4	5	1	0	..	..	15	11
Climacteric	0	8	0	11	0	7	..	..	0	1	..	..	..	..	0	1	0	28
Menstrual .. .. .	..	..	..	..	..	..	..	..	..	..	0	5	..	..	..	..	0	5
Senility	14	8	9	5	11	5	1	1	5	0	20	9	2	1	1	0	63	29
Lactation .. .. .	..	..	..	..	..	..	..	..	..	..	0	2	..	..	..	..	0	2
Puerperal	0	4	0	6	0	2	..	..	..	..	0	4	..	..	0	1	0	17
Mental stress—																		
Sudden	8	8	..	..	0	1	..	..	..	..	17	6	..	..	..	..	25	15
Prolonged	1	1	5	0	6	0	0	1	4	2	..	..	0	3	1	0	17	8
Solitude	1	0	..	..	..	..	..	..	..	..	..	..	1	0	..	..	2	0
Alcohol	7	2	5	1	7	1	6	0	1	0	6	2	1	0	1	0	34	6
Syphilis	3	0	1	0	3	1	..	..	1	0	17	0	..	..	1	0	26	1
Drug habit .. .. .	..	..	0	1	..	..	..	..	..	..	1	0	..	..	..	..	1	1
Post-operative	1	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	2
Traumatic	1	0	1	0	..	..	..	..	..	..	..	..	..	..	..	..	2	0
Epilepsy	5	6	5	4	5	5	..	..	..	..	4	6	..	..	..	..	19	21
Arterio-sclerosis	1	0	..	..	..	..	..	..	..	..	5	1	..	..	..	..	6	1
Debility .. .. .	..	..	..	..	..	..	0	1	..	..	..	..	..	..	..	..	0	1
Lobar pneumonia .. .. .	..	..	..	..	..	..	..	..	..	..	0	1	..	..	..	..	0	1
Phthisis .. .. .	..	..	..	..	..	..	..	..	..	..	1	0	..	..	..	..	1	0
Ill health	2	1	1	7	..	..	..	..	1	5	7	8	..	..	..	..	11	21
Influenza	2	0	..	..	1	2	..	..	..	..	..	..	0	1	0	1	3	4
Neurasthenia .. .. .	..	..	..	..	..	..	0	1	..	..	..	..	..	..	..	..	0	1
Meningitis .. .. .	..	..	..	..	..	..	..	..	..	..	0	1	..	..	..	..	0	1
Cerebral hæmorrhage .. .. .	..	..	..	..	1	0	..	..	..	..	..	..	..	..	1	1	2	1
Organic brain-disease .. .. .	..	..	2	1	..	..	..	..	..	..	1	2	1	0	..	..	4	3
Anæmia (pernicious) .. .. .	..	..	..	..	0	1	..	..	..	..	..	..	..	..	..	..	0	1
Overwork .. .. .	..	..	1	4	..	..	..	..	..	..	..	..	..	..	1	0	2	4
Emotional excitement .. .. .	..	..	..	..	..	..	1	0	..	..	..	..	..	..	0	1	1	1
Thyroid insufficiency .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	0	1	..	..	0	1
Unknown	17	3	8	6	5	3	2	1	..	..	11	8	0	1	..	..	43	21
Transfers	1	2	2	3	2	2	1	1	28	12	4	2	3	1	0	1	41	24
Totals	117	92	60	76	83	68	12	7	57	28	134	104	14	9	6	6	483	390

TABLE XIV.—FORMER OCCUPATIONS OF PATIENTS.

Occupations.	Auckland.	Christchurch.	Dunedin (Seacliff).	Hokitike.	Nelson.	Porirua.	Tokanui.	Ashburn Hall (P.M.H.)	Total.	Occupations.	Auckland.	Christchurch.	Dunedin (Seacliff)	Hokitike.	Nelson.	Porirua.	Tokanui.	Ashburn Hall (P.M.H.)	Total.
	MALES.																		
Accountants ..	2				1				3	Maoris ..	4								4
Apprentice ..						1			1	Master mariner ..	1								1
Architect ..								1	1	Mechanicians ..						3			3
Artist ..						1			1	Medical practitioner ..		1							1
Attendant ..						1			1	Merchants ..						1		2	3
Baker ..	1								1	Miners ..	1		3	2		1			7
Basketmaker ..						1			1	Missionary ..						1			1
Blacksmiths ..	2		1			3			6	Musicians ..	1					1			2
Bookbinders ..						2			2	News-runner ..		1							1
Bootmakers ..			1			1			2	Nurseryman ..		1							1
Bricklayer ..						1			1	Painters ..	1		2						3
Bushmen ..				2					2	Pensioners ..		5	2			1			8
Business-managers ..						2			2	Photographers ..	1						1		2
Butchers ..	1			1		4			6	Physical instructor ..						1			1
Caretaker ..						1			1	Piano-tuner ..			1						1
Carpenters ..	4		5			1			10	Plasterers ..		3				1			4
Carters ..		1	2	1					4	Platelayer ..						1			1
Civil servants ..						3			3	Polisher ..	1								1
Clergymen ..			2						2	Porters ..						4			4
Clerks ..	3		1			5	1		10	Prisoners ..	3								3
Commercial traveller ..						1			1	Rabbit ..			1						1
Contractors ..	1					1			2	Railway employee ..			1						1
Cooks ..	1	1				2			4	Saddler ..	1								1
Cooper ..	1								1	Salesmen ..	2								2
Dentist ..					1				1	Sawmillers ..	1	1	1	1					4
Drapers ..	1	1	1		1				4	School-teachers ..						2			2
Drover ..						1			1	Seamen ..	1	3				1			5
Engineers ..	3	1	1		1			1	7	Settlers ..	2								2
Factory hand ..	1								1	Shearers ..		2							2
Factory-manager ..	1								1	Shipping agent ..	1								1
Farmers ..	13	13	7	1	4	13	2		53	Soldier ..						1			1
Farm hands ..					4	4			8	Stock-dealer ..		1							1
Fireman ..			1						1	Stonemason ..	1								1
Fisherman ..			1						1	Storekeepers ..	3								3
Flax-millers ..						2			2	Students ..		1	1				1		3
Gardeners ..	1	2				1			4	Tailors ..						2			2
Gum-diggers ..	2								2	Tennis-racquet stringer ..	1								1
Hotelkeeper ..					1				1	Trimmer ..	1								1
Inmates of special schools ..									9	Weaver ..		1							1
Ironmonger ..			1						1	Wool-buyer ..		1							1
Jewellers ..		1				1			2	Nil ..	11	7	7	13	10		1		49
Labourers ..	37	12	30	3	3	44	7		136	Transfers ..	1	2	2	1	28	4	3		41
Machinist ..						1			1	Totals ..	117	60	83	12	57	134	14	6	483
Manufacturer ..						1			1	FEMALES.									
Apprentice ..						1			1	Pensioners ..			1	1					2
Clerks ..						1	1		2	School-teachers ..	1		1		1	2		1	6
Dealer ..	1								1	Shop assistants ..	1		1	1					3
Domestic duties ..	78	52	53	4	12	84	5	4	292	Students ..	1	1					1		3
Factory employees ..		2							2	Tailoress ..		1							1
Inmate of special school ..			1						1	Typiste ..	1								1
Machinists ..	1	1				1			3	Waitress ..								1	1
Maoris ..	2								2	Nil ..	3	15	7	2	11				38
Milliner ..			1						1	Transfers ..	2	3	2	1	12	2	1	1	24
Music-teacher ..			1						1	Totals ..	92	76	68	7	28	104	9	6	390
Nurses ..	1		1		1	2			5										

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.		Recovered.		Discharged.		Died.		Remaining 31st December in each Year.		Average Numbers resident.		Percentage of Recoveries on Admissions.		Percentage of Deaths on Average Numbers resident.		
	M.	T.	M.	T.	M.	T.	M.	T.	M.	T.	M.	T.	F.	T.	F.	T.	
1875	221	338	79	208	17	8	12	48	482	254	736	491	748	66.01	57.56	8.21	6.70
1876	250	362	57	180	20	5	21	63	519	264	783	541	818	50.80	49.72	7.76	7.58
1877	247	378	68	189	14	4	17	68	638	319	957	601	904	51.90	50.00	8.48	7.52
1878	248	399	76	188	15	4	13	71	695	361	1,056	666	1,003	45.16	47.11	8.25	7.07
1880	229	378	67	167	36	2	20	74	729	396	1,125	703	1,074	50.33	44.17	7.68	6.89
1881	232	359	65	158	41	3	14	63	769	406	1,175	747	1,135	40.08	44.01	6.29	5.55
1882	267	419	59	154	49	6	11	79	827	442	1,269	796	1,217	35.58	36.75	7.53	6.49
1883	255	421	78	162	13	9	19	83	892	483	1,375	860	1,335	40.00	46.98	7.55	6.21
1884	238	391	77	166	17	12	30	92	938	514	1,452	911	1,408	37.39	42.45	7.46	6.53
1885	246	333	76	171	10	5	27	73	981	542	1,523	963	1,493	38.62	45.12	7.56	6.36
1886	207	372	60	159	11	7	19	76	1,009	604	1,613	984	1,543	36.36	42.74	5.79	4.91
1887	255	416	78	181	34	..	..	101	1,053	643	1,696	1,034	1,647	40.39	43.61	7.15	6.13
1888	215	361	92	208	31	3	26	104	1,041	640	1,681	1,045	1,686	35.95	37.62	7.56	6.16
1889	230	391	53	146	31	4	30	100	1,074	687	1,797	1,046	1,707	37.34	42.42	6.69	5.86
1890	230	390	88	186	23	5	35	111	1,095	702	1,797	1,078	1,763	32.92	47.69	7.05	6.29
1891	234	405	74	162	24	14	41	120	1,115	734	1,849	1,089	1,789	37.61	40.00	7.25	6.71
1892	251	389	76	165	21	8	34	108	1,154	763	1,917	1,125	1,839	38.53	42.42	6.58	5.87
1893	281	460	89	190	17	18	23	101	1,229	810	2,039	1,172	1,930	35.94	41.30	6.66	5.23
1894	270	446	77	183	15	5	35	99	1,308	860	2,108	1,241	2,083	39.63	41.03	5.16	4.82
1895	252	417	76	182	24	4	42	143	1,329	885	2,214	1,313	2,229	37.41	44.02	4.31	4.82
1896	278	437	70	174	25	1	32	118	1,390	925	2,315	1,347	2,299	39.13	44.02	4.55	6.28
1897	284	493	73	175	17	..	10	148	1,440	990	2,430	1,411	2,355	35.92	37.82	7.44	6.28
1898	254	466	110	224	13	7	8	148	1,472	1,008	2,480	1,438	2,411	44.88	46.12	6.12	6.14
1899	259	458	99	187	15	1	43	157	1,512	1,045	2,557	1,487	2,491	33.98	40.83	7.67	6.30
1900	300	502	96	199	29	4	46	145	1,581	1,091	2,772	1,534	2,622	34.33	39.64	6.45	4.38
1901	320	543	104	229	20	2	102	174	1,654	1,119	2,773	1,622	2,716	39.06	46.64	6.29	6.58
1902	352	544	99	234	26	10	55	175	1,715	1,133	2,848	1,671	2,855	38.35	43.01	7.18	4.94
1903	355	581	101	245	26	2	44	173	1,771	1,188	2,959	1,741	2,901	40.56	44.69	7.41	5.96
1905	360	611	121	270	29	..	67	214	1,836	1,276	3,112	1,796	3,232	44.91	46.30	6.74	7.07
1906	395	659	157	283	28	1	85	231	1,900	1,306	3,206	1,823	3,088	39.75	42.94	8.01	7.48
1907	359	600	139	299	22	..	168	232	1,909	1,331	3,240	1,851	3,285	44.29	49.84	9.08	7.39
1908	426	744	146	326	9	1	74	222	1,997	1,417	3,414	1,894	3,346	42.25	45.91	8.71	6.85
1909	419	716	170	349	17	..	68	204	2,083	1,465	3,548	1,970	3,474	48.74	48.74	6.90	6.00
1910	474	814	182	327	29	6	88	283	2,160	1,510	3,670	2,028	3,473	38.40	46.18	9.17	8.15
1911	448	831	168	331	23	4	105	303	2,220	1,536	3,756	2,105	3,601	36.38	53.00	9.41	8.41
1912	458	839	175	337	35	5	87	280	2,273	1,640	3,913	2,146	3,697	37.01	38.74	8.99	7.57
1913	466	818	162	337	35	9	88	281	2,332	1,632	3,964	2,252	3,849	50.94	42.98	8.70	6.96
1914	509	868	207	369	27	10	111	284	2,408	1,703	4,111	2,309	4,067	45.12	42.51	8.36	7.11
1915	450	861	157	359	26	8	112	284	2,448	1,752	4,200	2,391	4,094	44.89	47.37	8.19	6.94
1916	518	961	171	331	35	7	80	289	2,555	1,820	4,375	2,483	4,283	44.89	47.37	8.42	6.80
1917	470	844	171	323	32	5	113	318	2,611	1,904	4,515	2,543	4,368	36.38	40.64	8.27	7.28
1918	437	839	142	339	32	12	174	448	2,603	1,943	4,546	2,602	4,599	35.07	33.73	10.53	9.95
1919	512	971	147	337	37	13	170	342	2,667	1,980	4,647	2,620	4,521	37.11	39.62	8.09	6.82
1920	455	873	162	310	27	10	166	376	2,717	2,037	4,754	2,674	4,654	35.63	35.32	7.85	8.40
1921	479	839	178	371	30	9	178	318	2,772	2,099	4,871	2,723	4,754	47.88	47.88	7.38	5.76
1922	453	886	156	313	32	8	184	395	2,816	2,116	4,932	2,747	4,809	34.44	40.67	7.67	6.69
1923	442	808	151	319	42	5	131	325	2,839	2,157	4,996	2,789	4,808	38.00	39.48	6.95	6.57
	16,102	11,376	5,220	11,615	1,181	303	2,013	8,879	6,395	4,215	5,866	3,013	8,879	..	..	..	..

Excluding transfers between institutions—1,495 males, 1,011 females.

TABLE XVI.—SHOWING THE ADMISSIONS, DISCHARGES, AND DEATHS FROM 1ST JANUARY, 1876, TO 31ST DECEMBER, 1923 (EXCLUDING TRANSFERS).

	M.	F.	T.
In hospitals 31st December, 1875	482	254	736
Admissions	16,102	11,376	27,478
	16,584	11,630	28,214
Discharged—	M.	F.	T.
Recovered.. .. .	6,395	5,220	11,615
Relieved	1,181	1,034	2,215
Not improved	303	206	509
Died	5,866	3,013	8,879
	13,745	9,473	23,218
Remaining on 31st December, 1923	2,839	2,157	4,996

TABLE XVII.—SUMMARY OF TOTAL ADMISSIONS: PERCENTAGE OF CASES SINCE THE YEAR 1876.

	Males.	Females.	Both Sexes.
Recovered	39·71	45·88	42·26
Relieved	7·34	9·08	8·06
Not improved	1·87	1·81	1·85
Died	36·43	26·48	32·31
Remaining	15·65	16·75	15·52
	100·00	100·00	100·00

TABLE XVIII.—SHOWING DETAILS OF CREDITS.

Table with 8 columns: Credits, Auckland, Christchurch, Dunedin (Seacliff), Hokitika, Nelson, Porirua, Tokanui, Head Office, Total. Rows include Receipts for maintenance, for farm-produce, Miscellaneous, and Totals.

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

Table with 15 columns: Mental Hospital, Average Number resident, Salaries, Bedding and Clothing, Buildings and Repairs, Farm, Fuel, Light, Water, and Cleaning, Provisions, Surgery and Dispensary, Wines, Spirits, Ale, and Porter, Necessaries, Incidentals, and Miscellaneous, Total Cost per Patient, Repayments for Maintenance, Other Re-payments, Net Cost per Patient, Net Cost Previous Year, Increase/Decrease 1923-24. Rows include Auckland, Christchurch, Dunedin (Seacliff), Hokitika, Nelson, Porirua, Tokanui, and Averages.

TABLE XIXA.

Table with 15 columns: Including Head Office charges in Table XVIII, £ s. d. Columns for each item, £ s. d. Total. Row includes Totals.

TABLE XX.—EXPENDITURE, OUT OF PUBLIC WORKS FUND, ON MENTAL HOSPITAL BUILDINGS, ETC., DURING THE FINANCIAL YEAR ENDED 31ST MARCH, 1924, AND LIABILITIES AT THAT DATE.

Mental Hospitals.	Net Expenditure for Year ended 31st March, 1924.	Liabilities on 31st March, 1924.
Auckland	£ 5,188	£
Christchurch (Sunnyside)	1,497	361
Hokitika	10,216	147
Hornby		1,408
Nelson	1,429	202
Porirua	2,578	
Seacliff	1,246	608
Stoke	1,450	
Tokanui	2,743	297
Waitati	194	
Totals	26,541	3,023

TABLE XXI.—TOTAL EXPENDITURE, OUT OF PUBLIC WORKS FUND, FOR BUILDINGS AND EQUIPMENT AT EACH MENTAL HOSPITAL FROM 1ST JULY, 1877, TO 31ST MARCH, 1924.

Mental Hospitals.	1877-1915.	1915-16.	1916-17.	1917-18.	1918-19.	1919-20.	1920-21.	1921-22.	1922-23.	1923-24.	Total Net Expenditure, 1st July, 1877, to 31st March, 1924.
Auckland	£ 141,574	2,774	76	1,048	1,171	543	8,040	9,013	777	5,188	£ 170,204
Reception-house at Auckland	5,059										5,059
Christchurch (Sunnyside)	134,456	15,157	24,346	7,647	1,238	2,490	5,139	3,494	2,245	1,497	197,709
Dunedin (The Camp)	4,891										4,891
Hokitika	3,727							984	4,789	10,216	19,716
Hornby								2,682	122		11,102
Motuhi Island	561										561
Napier	147										147
Nelson	22,095	1,417	1,798	535	200	208	3,496	3,316	1,929	1,429	36,423
Richmond	1,097										1,097
Seacliff	172,349	6,721	997	597	966	2,069	40	3,389	1,602	1,246	189,976
Stoke	45,657	10,640	5,639	6,188	8,105	4,111	5,381	9,774	337	1,450	1,787
Tokanui	7,654	671	24	88	498	848	3,620	3,217	515	2,743	98,753
Waitati	29,656	Cr. 15								194	17,662
Wellington	163,698	17,518	11,722	10,399	2,462	638	724	5,969	688	2,578	29,641
Wellington (Porirua)											216,396
Totals	732,621	54,883	44,602	26,502	14,640	18,277	27,368	41,893	18,852	26,541	1,001,124

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