

1928.

## NEW ZEALAND.

## MENTAL HOSPITALS OF THE DOMINION

(REPORT ON) FOR 1927.

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

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

SIR,—

Wellington, 1st July, 1928.

I have the honour to submit to Your Excellency the report for the year 1927 of the Inspector-General of Mental Defectives.

I have, &amp;c.,

J. A. YOUNG,

Minister in Charge of Department for the Care of  
Mental Defectives.The INSPECTOR-GENERAL to the Hon. J. A. YOUNG, the Minister in Charge of the Department for  
the Care of Mental Defectives.

SIR,—

Wellington, 1st July, 1928.

I have the honour to present my report for the year ending 31st December, 1927.

During the first five months of the period under review I was absent from the Dominion on a visit to Great Britain, America, and the Continent of Europe, where I acquainted myself with recent developments in connection with the problems of mental deficiency and the treatment of mental unbalance. My observations and recommendations on these matters have been the subject of a separate report.

In October last I assumed control of this Department upon the retirement of Sir Truby King, whose connection with the Government had extended over a period of nearly forty years. It is not necessary that I should refer here to the very valuable work which Sir Truby has rendered to the community during his long term of public service, but it is fitting that I should pay tribute to the breadth of vision, untiring energy, and conspicuously unselfish devotion to duty which he brought to bear upon his direction of the Department, and which are reflected in the provisions made during the past triennium for the reception, classification, and treatment of the mentally afflicted.

## THE IMPORTANCE OF EARLY TREATMENT.

The importance of getting into touch with cases of mental disorder long before they are "certifiable," and the assumption of treatment at a stage when there is every chance of a successful issue, is being more generally recognized, and this has resulted in an extension of out-patient clinics, whose functions are preventive as well as curative. These clinics are doing excellent work in the main centres of New Zealand, and there has been a rapid and progressive increase in the number of consultations since their inception.

Many cases, however, even in the pre-certifiable stage require observation and treatment of a kind which involves residence in an institution, and in order to ensure success and overcome ingrained popular prejudice the accommodation provided for this purpose must be such as will not entail any association with patients of a degraded type.

These requirements are being met in many countries by the erection of entirely detached clinics or psychopathic hospitals, associated, as a rule, with general hospitals, and I visited many of these on my recent trip, such as the Phipps clinic at Baltimore, the Maudsley in London, and that at

Utrecht, Holland. In my recently published report upon mental deficiency and its treatment, I said "There is no universal 'best system' in this or the allied problem of dealing with the insane, and each country must evolve its own method, guided and restricted by its own peculiar racial, geographic, and economic situations."

In New Zealand we have tackled this problem in a manner which in many ways is unique, and I am satisfied that we are doing so on sound lines. The reception cottages and neuropathic units established at the main centres are meeting the demand for suitable accommodation for those early cases, and associated, as these already are at Porirua, with a treatment centre, the scheme is much more suited to the needs of our relatively small and scattered population than would be the erection of residential clinics of the types which I have mentioned.

#### OBSERVATION BLOCKS AT HOSPITALS.

Arrangements were concluded with the Police Department last year to ensure that no patient should be conveyed to hospitals in police vans, and that officers on escort duty should wear mufti; but there is still a serious flaw in our system—patients are still occasionally lodged in prison pending examination and committal. This can only be remedied by the erection at the main general hospitals of small observation blocks to accommodate between six and a dozen patients pending determination of their cases.

#### VOLUNTARY BOARDERS.

Many of the cases first seen at the clinics take advantage of the voluntary-boarder section of our Act, which allows them to enter a mental hospital of their own free will. The number of voluntary boarders admitted annually has increased steadily since 1911, when we adopted the principle, and last year no fewer than 197 persons, or 17·25 per cent. of our total admissions, secured early treatment in this way.

The advantages of voluntary admission are that the individual does not feel that he is detained against his will; he comes in furtherance of his desire for treatment, in which he, therefore, co-operates. He arrives at an early stage, is more likely to recover, and the duration of his stay in hospital is much shorter than that of the "certified patient." Apart from the benefit to the person concerned, these are matters of considerable economic importance to the community.

We are much in advance of Great Britain in regard to this matter. In England the voluntary-boarder system is applicable only to those who can afford to pay for treatment in private mental hospitals. In Scotland there is legal provision for the admission of voluntary boarders to the district (public) mental hospitals, but, as no Government subsidy is payable in respect of persons admitted in this way, the provision is largely non-operative, and the patient has little chance of treatment until he becomes certifiable and therefore less recoverable.

Admission as voluntary boarders is strictly limited, and rightly so, to those who can fully appreciate the nature of and the obligations imposed by the request which all applicants are required to sign, but it is important to realize that many persons who are too confused or unbalanced to sign a form would benefit by treatment at an earlier stage than that at which we now receive them.

#### CERTIFICATION.

Under present legislation the only alternative to voluntary admission is (except for minors) the issue of a reception-order after personal examination by a Magistrate and two doctors. This procedure, which is commonly known as certification, was originally devised in the days when custody, not treatment, was the keynote of asylum administration and was framed in order to protect the public from being kidnapped into madhouses. Now that treatment, particularly early treatment, is the objective, this cumbersome, and in any case ineffective, anachronism merely defeats its own object. Instead of protecting the public, it delays the institution of treatment at the stage when it is most likely to be effective.

The stigma which looms so largely in the public mind is very much related to certification. Patients on recovery, and their relatives in the early stages, feel humiliated at having to take the patient to Court to see the Magistrate, whose functions are largely related to wrong-doing and the punishment of offenders, and they put off taking the necessary steps until disorder becomes so pronounced as to demand drastic action.

The diagnosis of disease and the tendering of advice to the relatives as to appropriate treatment are duties which can be competently performed only by medical men of experience, and nothing is gained by the personal interview between the patient and the Magistrate. Without exception I have always found the Magistrates most kindly and considerate to the patients and their relatives at these interviews, but there are often embarrassing delays and prolonged waiting about Courthouses, which adds greatly to the distress of those most concerned. In remote country districts some difficulty is often experienced in getting the two Justices who may in certain circumstances act for a Magistrate.

In Scotland, where one never hears the word "stigma," these difficulties do not exist, because upon the application of the relatives, accompanied by two medical certificates, the patient may be received in the mental hospital and detained for three days. The documents are at once sent to the Sheriff (Magistrate), who sees that the legal formalities have been complied with and then issues a detention-order. I may add that there is no record in the Scottish law-courts during the last seventy years of any person having been improperly detained in a mental hospital.

In Scandinavia the procedure is essentially the same.

I would strongly urge that an amendment be made to our Act in the direction of adopting a procedure similar to that which works so admirably in Scotland.

### MEDICAL STAFF CHANGES.

Dr. Macpherson, Acting Medical Superintendent at Tokanui, severed his connection with the service in December owing to ill-health. Dr. Macpherson entered the Department during the war period in order to free a younger medical officer for service abroad. Although he was then at an age when most men seek retirement, Dr. Macpherson has given the Department twelve years of zealous and devoted work, and he demitted office universally beloved by patients and staff.

Drs. H. D. Hayes and T. W. J. Childs were selected in England for appointment. Each of these gentlemen holds the Diploma in Psychological Medicine, and from their previous records and their work since arrival in the Dominion, I consider the Department is to be congratulated on securing their services.

### ALTERATIONS, IMPROVEMENTS, AND ADDITIONS.

#### *Auckland.*

In view of the declared policy of evacuating the present institution within a limited period, capital expenditure is being strictly limited to items which are necessary for the immediate needs of the institution.

1. A cottage in the Wolfe Home paddock has been renovated for occupation by the engineer.
2. An excellent veranda has been added to the Female Sick Ward, and is proving a great boon, especially to the aged sick.
3. Considerable improvements have been effected in the kitchen.
4. Further provisions to ensure adequate ventilation of wards and dormitories.

#### *Tokanui.*

1. The old airing-court fences have now been removed, thus bringing the institution into line with modern ideas as to the removal of unnecessary restrictions, material as well as regulative.
2. A bowling-green has been constructed and opened for play.
3. A sports-ground is in course of preparation.
4. A canteen has been opened for the use of all patients and their visitors.
5. A morgue has been built.

#### *Porirua.*

1. An Assistant Medical Officer's cottage has been erected.
2. A treatment centre has been opened at Rauta.
3. A Nurses' Home is now in course of erection, and its completion will greatly increase the amenities enjoyed by the nursing staff.
4. A great deal of general maintenance and repair work has been carried out.
5. The change-over to the Mangahao hydro-electric supply has been completed.
6. Sanitary additions to Male 3 Ward.

#### *Christchurch.*

1. The new pioneer unit for fifty male patients at Templeton has been finished and should be in occupation shortly, thus permitting of greatly improved classification in the main institution.
2. An Assistant Medical Officer's cottage is in course of erection at Hornby Lodge.
3. The male neuropathic unit at Hornby has been completed, and marks a great advance in the facilities for treating early cases.
4. Rearrangement of laundry and the installation of an additional drying-press.

#### *Nelson.*

1. A large sleeping-veranda has been added to "El Nido," thus allowing continuous open-air treatment to the weakly boys, who derive much benefit.
2. Alterations to the administrative block at Nelson.
3. Alterations to improve the sanitary arrangements.

#### *Seacliff.*

1. A commencement has been made with the new stores, laundry, and kitchen blocks, and their completion will remove a handicap under which Seacliff has laboured for many years.
2. Additions to farm buildings at "Cherry Farm" and Seacliff.
3. Completion of neuropathic unit and reception cottage.
4. Erection of Assistant Medical Officer's cottage.

#### *Hokitika.*

1. Alterations to Aorangi Ward.
2. Roadmaking and reclamation of farm land.
3. Construction of a bowling-green.

### THE NEW INSTITUTION FOR AUCKLAND.

We have now entered into active occupation of the estate at Puhitahi on which is to be erected the new Auckland institution.

The necessary buildings have been erected for the pioneer patients, twenty of whom, along with staff, are already engaged in the preliminary operations of draining swamps, fencing, and planting shelter-belts.

Suitable sites have been marked out for the villas of the institution, and there should be little delay in commencing our main building programme. In the meantime surveys have been completed for the water-supply.

#### OVERCROWDING OF PATIENTS.

It is my duty to request that a considerable increase should be granted in the annual financial provisions not only to allow the development of the new Auckland institution, but in order to mitigate in some degree the very serious difficulties resulting from lack of proper accommodation for patients.

Overcrowding is not a matter of sudden growth; it has frequently been referred to by my predecessors, but the slowing-down of building operations during the war and its financial aftermath has rendered the position, present and prospective, very acute.

The shortage of space is affecting all the institutions, but particularly Porirua, Auckland, Christchurch, Seacliff, and Nelson.

The extreme seriousness of the position will be realized when I state that we have 820 patients in excess of accommodation. Our estimated annual increase is over 200 patients, so that by the end of 1928 the deficiency will exceed 1,000, or the equivalent of a large institution.

In the absence of a definite building programme, which must be spread over many years, the position can only become worse, and I submit the following matters for your consideration.

The excess of 820 is distributed amongst the various institutions as shown in the following table :—

					Males.	Females.	Total.
Auckland	..	..	..	..	58	59	117
Tokanui	..	..	..	..	34	20	54
Porirua	..	..	..	..	56	200	256
Nelson	..	..	..	..	47	33	80
Hokitika	..	..	..	..	3	3	6
Christchurch	..	..	..	..	64	69	133
Seacliff	..	..	..	..	78	96	174
Totals	..	..	..	..	340	480	820

*Auckland.*—The Government has given an undertaking to remove this institution within a limited number of years. The number of persons actually resident in the institution on the 31st December, 1927, was 1,163. At a conservative estimate the total population in 1937 will not be less than 1,400. No mental hospital should accommodate more than 1,000 patients, but if in all the circumstances we allow for 1,250 we should still have an excess of 150 at the end of the period. Consideration should therefore be given to the securing of a site for a hospital to serve the needs of North Auckland.

*Tokanui.*—The existing excess is 54, but, as the institution now admits patients direct, building must be carried on to keep pace with the natural increase. A contract has been let to provide for 150 patients, but a large part of this space will be absorbed by patients transferred from Porirua.

*Porirua.*—The worst overcrowding exists at this institution, where we have 256 in excess. The total number of patients actually resident is 1,410. I hope to transfer 100 patients to Tokanui in 1929, and accommodation for 40 more will be set free on the completion of the Nurses' Home, but these steps will leave the position at the end of the year very much the same as at present. There is practically no room left at Porirua for additional buildings, even were such desirable, and the foundation of a new institution in the Manawatu district is necessary.

*Nelson (with Stoke Farm).*—This institution is overcrowded to the extent of 80 patients, but the position is even worse than the figures indicate. The scheme devised by myself seven years ago to dedicate the Nelson Hospital to the use of juvenile patients and to develop Stoke Farm as an up-to-date villa mental hospital received a serious setback owing to the success of a popular agitation against new buildings at Stoke. The Boys' Ward is gravely overcrowded, and the classification at Stoke is disorganized. Plans are in preparation for three villas at Stoke, and their completion should be urgently pressed forward.

*Hokitika.*—The population here tends to decrease, and the present slight excess will gradually be overcome without incurring any expense.

*Christchurch.*—Is overcrowded to the extent of 133 patients. Some relief will come immediately with the transfer of 50 workers to the new building at Templeton, but there will still be considerable excess at the end of the year.

*Seacliff.*—The population of Seacliff actually in residence at the 31st December, 1927, was 1,192, representing overcrowding to the extent of 174 patients. Some temporary relief may be gained by the erection of one or possibly two villas at Waitati; but there is little room available, and we shall again have to consider the establishment of an institution elsewhere.

An undue amount of the work of the medical and nursing staff is devoted to the task of overcoming the discomforts and dangers caused by overcrowding, and this detracts from the effectiveness of their legitimate activities in regard to the treatment of the patients.

I desire, in conclusion, to acknowledge the loyal support I have received from the various Medical Superintendents, and my thanks are due to the Head Office staff for their unflinching helpfulness at all times.

I have, &c.,

THEO. G. GRAY.

## MEDICAL SUPERINTENDENTS' REPORTS.

### AUCKLAND MENTAL HOSPITAL.

Dr. PRINS reports :—

I have the honour to present to you my annual report for the year ended 31st December, 1927.

During the year there have been 1,375 patients under care, with a weekly average of 1,105 resident in the Hospital. The new cases numbered 227; of these, 179 were admitted for the first time.

The general health has been good, the only unusual features being a slight outbreak of measles.

The deaths numbered 99, 53 of these being over sixty years of age. Senile decay and heart-diseases were the principal causes.

A total of 96 voluntary boarders have been under care, 47 being new cases and 8 readmissions. The discharges amongst these numbered 36, and deaths 7. In only two cases was certification resorted to. The large increase in voluntary boarders, and the number discharged, is very satisfactory, and shows the advantage of a recognition of the illness and a voluntary request for treatment. Apart from these the discharges numbered 91, 67 being recoveries.

The two most important improvements during the year have been the opening of the Nurses' Home and the new unit for the treatment of suitable female cases. The nurses now have suitable quarters and conveniences, which have been too long denied them.

The Male Hospital Ward continues to be used as an admission ward for every possible case, and the reaction to the freedom allowed continues to be good, there being comparatively little trouble from patients breaking their parole.

The Wolf Home is used as an admission ward for every possible female and occasional suitable male cases.

The policy of "hospitalization" is being carried out as much as possible. Every effort is made to impress on new cases that they are in hospital because they are ill, and that the object of their being there is to be made well again.

During the past year extensive painting has been carried out throughout the whole building not only by our own people, but also by contract.

A much needed veranda is being added to the Female Infirmary.

The steam-kitchen is being renovated, and rearranged generally. It is hoped to shortly rearrange, enlarge, and provide more up-to-date machinery for the laundry. It is intended also to carry out painting and improvements in Female 3 Ward.

Lectures have been given to the nurses and attendants during the year, and a total of nineteen sat for the last final examination.

The general recreation of the Hospital has been carried out. The annual picnic to Henderson consisted of a party of 446. During the winter months the usual fortnightly dances were held, concert parties entertained us, and a performance by the Little Theatre Society was much appreciated. The Salvation Army and Avondale Bands have played on Sunday mornings. The usual picture parties have visited town, seats being placed at our disposal by the management.

During the summer months there have been the usual picnic and swimming parties. The bowlers have played their home and away matches, apart from their usual games. Tennis and croquet are very popular, and tournaments were played.

The "daylight-saving" is a great advantage to the Hospital generally.

The Christmas tree was a great success, the members of the Optimists' Club providing the entertainment.

During the year the Auckland Patriotic Society very kindly donated £10 for sports requisites, and Mrs. Winstone was also kind enough to donate a similar amount for general sports requirements. Mr. J. Alexander also kindly provided funds to assist the periodical parties.

Papers, periodicals, gramophone records, golf clubs and balls, tennis racquets and balls have been received from various donors, and have all been put to good use.

The Auckland Clinical Society held one of their meetings at the Hospital, and a large party of Public Health nurses also visited the Hospital.

The clinic conducted at the Public Hospital continues to be well attended.

Mr. Blomfield and Mr. Alexander have visited the Hospital frequently. Mrs. Armitage, Mrs. von Sturmer, Miss Jackson, and Sister Hannah have visited the female side.

I have to thank all my staff for their help and co-operation in carrying on the work of the Hospital.

### TOKANUI MENTAL HOSPITAL.

Dr. CHILDS reports :—

I have the honour to submit my report for the year ending 31st December, 1927.

On the 1st January there were 337 patients (213 males and 124 females) in the Hospital. The number under care during the year has been 398 (males 259, females 139), the average resident number being 337 (males 214, females 123). The cases admitted numbered 61. Of these, 18 (males 15, females 3) were transfers from other hospitals, while 36 (males 25, females 11) were admitted for the first time. Thirty-eight patients (males 26, females 12) were discharged, 11 of these being transferred to other institutions. The deaths numbered 15 (males 12, females 3), there being no special contributing factor. At the end of the year the number on the register was 345 (221 males, 124 females).

During the year 17 voluntary boarders (males 6, females 11) have been under treatment, 7 being new admissions (males 3, females 4). One male and 1 female have been readmitted, and 3 males and 3 females have been discharged. One male voluntary boarder died.

Dr. Macpherson, whom I relieved in October on account of ill health, resigned on the 1st December. His departure is universally regretted, and on relinquishing his position as Superintendent he was entertained at a social evening, and both he and Mrs. Macpherson received several presents from the staff.

No. 2 Camp has been evacuated and handed over to the Prisons Department, and No. 1 Camp has again been occupied by patients, 10 males being accommodated there.

A new mortuary has been erected. The ventilation of the Hospital has been improved, and the result noted in the dormitories and side rooms.

The picket fences in front of the male and female block have been pulled down, and the shut-in airing-courts done away with. This gives the patients considerably more freedom and improves their outlook.

Walking parties have been started and have proved successful, all patients capable of it now getting sufficient exercise.

The recreation of the patients has been attended to. Occasional concerts and the usual fortnightly dances were held during the winter. A radio set, presented by the Sunshine League, has been installed in B Ward, and loud-speaker extensions have been connected up in F1 and FH Wards. A cinematograph-machine was installed during the year and has proved a great success, a weekly picture entertainment being held, which is regularly attended by the patients from the camp as well as those at the main institution. I have to thank the Australasian Films, Ltd., for their generosity in supplying good-class film programmes free of charge. Croquet sets have been purchased, and the game has proved popular. During the warm weather picnic swimming parties have been frequently held and have been very popular with the female patients. The annual picnic was held at Waikeria, sports and games being indulged in, and an enjoyable day spent.

The Official Visitors, Mr. Battson and Mrs. Woods, have given help in providing amusement and gifts for the patients, and thanks are due to them for the interest they take in the patients.

The work on the farm has proceeded steadily. In addition to the usual routine work, fencing, draining, and roadmaking operations have been carried on throughout the year.

All departments of the staff deserve great credit for the manifest interest they take in the patients' welfare, for their endeavours to make the Hospital as pleasing as possible, and for the ready way they adapt themselves to changing conditions.

#### PORIRUA MENTAL HOSPITAL.

Dr. HAYES reports:—

I have the honour to present my report for the year 1927. On the 1st January there were 1,322 patients on the register (723 males, 599 females). At the end of the year there were 1,408 patients (762 males, 646 females). The total admissions for the year were 291 (158 males, 133 females), and the total discharged recovered were 97 (50 males, 47 females). The total under care during the year was 1,613, and the number died was 81. The principal cause of death was senile decay. At the beginning of the year there were 58 voluntary boarders (27 males, 31 females), and at the end of the year 67 (27 males, 40 females). The total of voluntary boarders admitted was 37, readmitted 26, discharged 47, committed 2, and died 5.

During the year the following buildings have been completed: The admission cottage, "Bella Vista," the new male villa, and a residence for an Assistant Medical Officer. The opening of the cottage and the villa has completed the neuropathic unit, and the examination and treatment of all admissions is now effected in this unit, excepting such cases as have an obviously hopeless prognosis.

Two classes, one for each sex, have been organized for physical exercises and games. These are in the hands of a masseur and masseuse respectively, who supplement their class-work with massage and electrical therapy upon the recent admissions. Their efforts will be greatly helped by the installation and outfitting of a treatment centre at Rauta.

In the Main Building there is still considerable overcrowding, particularly on the female side; and, although some slight relief will be given when the occupation of the Nurses' Home in course of erection takes place, it will become necessary for extension of accommodation or a reduction in numbers.

Renovation of the Main Building inside and outside is a pressing need, as also is the structural alteration to the kitchen and dining-hall to accommodate the increased numbers. The removal of the piggeries from the vicinity of the villas still remains a necessity. The store, too, is urgently in need of extension for similar reasons.

A sanatorium for the accommodation of seven female tubercular patients has been erected and will soon be occupied.

Letter-boxes have been placed in the wards, and ensure the privacy of correspondence to the office. Sitting-up parties have been arranged for parole, and well-conducted patients in the parole villas and wards; these patients are allowed to sit up later than the others, and appreciate this variation from their routine.

Female nurses are in one of the male parole villas and in the new villa of the neuropathic unit; and their presence in these situations is of considerable value.

The clinic at Wellington Hospital continues to afford a valuable means of treating neurosis and psychoneurosis, and is a channel for the admissions of suitable voluntary boarders of all types.

The weekly entertainments have been given as usual, and have been much appreciated. I have to thank the Red Cross Society and the Victoria College Social Service Club for their continued practical interest in the patients' amusements. I wish also to thank Mr. Prosser for affording free passes to the patients for the village cinema.

My thanks are due to the ministers of religion for their services. I wish to tender my thanks to the Official Visitors (Mrs. Fraser, Mrs. McVicar, Messrs. Bothamley and Bradey) for their regular visits and helpful interest in the patients' welfare.

I have to thank my colleagues, Drs. Blair, Macky, and McNickle, for their loyal support and assistance. I also wish to thank the Matrons and Head Attendants and the staff generally for their assistance.

#### NELSON MENTAL HOSPITAL.

Dr. JEFFREYS reports :—

I have the honour to forward my report for the year 1927.

At the beginning of the year there were 389 patients on the register, and on the 31st December there were 418 (males 283, females 135). The total number under care during the year was 446 (males 306, females 140), and the average number resident was 398. Including three transfers from other institutions, there were 57 admissions, and of these 49 (33 males and 16 females) were admitted for the first time. Fifteen voluntary boarders were under treatment during the year, and of these 7 were discharged and 1 died, leaving 7 remaining at the end of the year. Four male and 3 female patients were discharged as "recovered," and 5 males as "relieved" or "not improved." Of the 15 patients who died, no fewer than 9 were defective children of low vitality, who readily succumbed to slight infection.

The general health of the patients has been remarkably good. Our numbers have been steadily increasing, and we are urgently in need of more accommodation both at Nelson and Stoke. A new sleeping-porch has been erected at "El Nido," the boys' ward, and is a great boon, for not only has it helped to relieve the congestion but it also enables us to give continuous open-air treatment to a number of the very frail children committed to our care. As I pointed out in my last report, imbecile boys from all parts of the Dominion are committed to this institution, and at the present time "El Nido" is far too overcrowded, and unless further accommodation is provided in the near future it will be impossible to make room for any more; for although the bigger boys are sent to Stoke Farm, even there the conditions are not much better, for there is not nearly sufficient day-room space, and it is consequently impossible to make a satisfactory classification, as the boys and men are crowded together in the day-rooms on wet days. It is fervently to be hoped that new villas will be erected with as little delay as possible. Conditions at the new villa which was occupied last year are in pleasing contrast to those at the old building. It is in charge of female nurses, and is greatly appreciated by the patients and their relatives.

The majority of the Stoke patients are usefully employed on the farm and in the gardens; a large number are on full parole, and it is a most exceptional occurrence to find any one abusing this privilege.

Every week a number of the Nelson patients and every fortnight a number from Stoke are taken to the pictures, and they look to this more than to any of the entertainments provided for them; and it is to be hoped that before long we will have our own picture plant at Stoke.

My thanks are due to Dr. Hay and the other officers and staff for their loyal assistance throughout the year.

#### HOKITIKA MENTAL HOSPITAL.

Dr. BUCHANAN reports :—

I beg to submit my report for the year ended 31st December, 1927.

At the beginning of the year there were 226 patients on the register; at the end of the year there remained 152 males and 64 females, making a total of 217; also 1 male voluntary boarder. Admissions numbered 14 ordinary patients and 1 transfer. Three voluntary boarders were admitted during the year. Discharges were 13, and deaths 12. Voluntary boarders discharged numbered 2.

The general health of the patients continued to be good.

The only structural alteration made since my last report is the turning of the old wash and bath rooms of "Aorangi" into a dining-room for the more unmanageable patients, and the turning of the boilerhouse into two much-needed single rooms.

Our energies have been directed mainly towards the opening-up of new farm lands. Altogether 8 acres of swamp land have been cleared, drained, and sown down. The stumping of this land has enabled us to put by a large store of firewood for the winter months. The formation of all this new pasturage is most valuable work. At present we carry insufficient cows for our need, necessitating our making use of large quantities of condensed milk. Next year we should show a considerable reduction in this expensive commodity.

To give access to the new paddocks 32 chains 8 yards of road have been constructed.

We have the construction of a bowling-green well on the way, and expect to have it finished by this time next year. Our wants, as you know, are many, and cannot all be gratified owing to the present financial stringency, but I would beg to stress the great need of (1) a new building to take the place of the unsightly ten single rooms attached to "Taupo"; (2) a water-supply of our own, independent of the borough supply; (3) an intercommunicating telephone system, to be used for fire-alarm purposes.

Through the generosity of the West Coast public we have now had installed a wireless set, which gives a great deal of pleasure to the patients and staff. I desire to express my thanks to all who contributed to this object, and would like to specially mention the names of Mr. D. J. Evans and Miss James, of Greymouth, in this connection.

Many concerts and plays have been given to the patients. These are always a source of great interest and pleasure. I would like to record my thanks to all the participants in these events.

Mr. A. Clifton and Miss Reynolds, Official Visitors, have paid regular visits to the institution and have been untiring in their attention to the patients.

We all regret Miss Hanna's approaching severance from the service. She was always helpful and encouraging, and took keen interest in every branch of our work.

Finally, I would like to express gratitude to the whole of my staff for their loyal co-operation in the institution's work.

#### CHRISTCHURCH MENTAL HOSPITAL.

Dr. McKILLOP reports :—

I have the honour to forward my report for the year 1927.

On the 1st January there were 870 patients on the register—397 men and 473 women. During the year we had 166 admissions—89 men and 77 women. Seventy-eight patients were discharged, and 3 transferred to other institutions. The total number of committed cases under care was 1,036, and 886 (inclusive of 17 males and 21 females on probation) remained on the 31st December. Forty-five voluntary boarders received treatment during the year: 5 were committed, 3 ordinary patients, 25 were discharged, and 1 died, leaving 5 men and 13 women under this section receiving treatment.

The general health of the patients has been satisfactory. There were 69 deaths (37 men, 32 women). Fifteen of the deaths were due to senile decay.

During the past year many important additions and alterations have been made to the existing buildings. Ward 3 (female), together with the sewing-room, dormitories, and single rooms attached, have been painted and renovated; also most of the upper floor on the male side.

The Neuropathic Hospital at Hornby has been occupied for the past few months, and is a decided advance. The farm unit at Templeton will shortly be ready for occupation, and will greatly relieve the congestion at Sunnyside. When this unit is available I am hopeful of being able to utilize "North House" solely for epileptic patients.

I am deeply grateful for the consideration our wants have received during the past year: the improvements and alterations have greatly added to the comfort and well-being of the patients. I have again to thank Professor Hercus, of the Otago Medical School, and his assistants for their help during the past year. Valuable work is being done in connection with examinations of blood and with goiter-investigation. For the past six months iodized salt has been used for all purposes, and in many cases there is noticeable decrease of the enlarged thyroid. There have been no toxic symptoms in evidence in any case.

We have had a very successful year on the farm, and the prospects for the coming harvest are exceptionally good. The new stables and garages have been completed, and the new piggeries and runs are in occupation. The farm returns show a substantial credit balance.

To the District Inspector (Mr. Acland), to the Official Visitors (Mrs. Williams and Mr. Hanna), and to Mr. Souter (Patients' Friend) I tender my thanks for their visits and kindness to our inmates. I am very grateful to Drs. Russell and Hart for the valued help they have given me in the medical and general work of the institution. I have also to thank Mr. Thomas 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 the work was performed.

#### SEACLIFF MENTAL HOSPITAL.

Dr. GRIBBEN reports :—

I beg to submit my report for the year ended 31st December, 1927.

At the beginning of the year there were 1,132 patients on the register (617 males and 515 females), and at the end of the year 1,176 (643 males and 523 females). The admissions numbered 164 (93 males and 71 females). One hundred and twenty patients were discharged, comprising 67 males and 53 females. Of voluntary boarders, 37 remained from the previous year and 20 were admitted. Eleven voluntary boarders were discharged, 4 committed as ordinary patients, and 3 died. Four patients (male) were admitted on remand for observation. Fifty-four patients died during the year (33 males and 21 females). The average weekly number of patients resident during the year was 1,138 (627 males and 511 females).

The health of the patients generally has again been satisfactory. There have been epidemics of influenza and of mumps, both mild in type. One patient developed scarlet fever, but his isolation checked any spread of the trouble.

New buildings during the year include quarters for artisans, a motor-garage, a strong-room, a coal-bunker (which is not yet completed), a barn at "Cherry Farm," and the Neuropathic Hospital at Puketeraki. It was hoped to occupy the last-named before the end of the year, but defects in the water-reservoir have necessitated delay in opening this unit. The Admission Cottage was completed in the early part of the year, and is working satisfactorily.



In the case of existing buildings, in addition to ordinary repairs and replacements, extensive alterations and improvements were made to the draught-horse stable and to the roof of G Ward. An extension of the water-pipe line at Omimi now takes it up to the spring which is the source of supply. This will eliminate any chance of contamination. Repairs and renovations were also undertaken at the Engineer's residence which, as a result of the moving ground, called for attention. All necessary outside painting has been completed, and similar work is in progress inside the buildings.

Work on the farm has been carried out on lines similar to those adopted last year. During the winter a considerable amount of work was done in fencing, and in grading and metalling roads. The liming and top-dressing of the grass-land is already showing good results. The making of butter at the institution was discontinued, and the surplus milk is now sent to the cheese-factory at Omimi. The winter and spring were very wet, but the crops, which are now mostly grown at "Cherry Farm," promise well. An increase in the area of root crops and of grass-land devoted to the production of hay and ensilage will enable the fattening of stock to be extended, and will make for economy in eliminating in some measure the purchase of fat stock in the saleyards.

The catches of fish show an increase over last year, but it is still necessary to go a considerable way off shore to obtain most of the varieties formerly found close to the coast.

For the amusement of the patients regular picture entertainments throughout the year and dances in the winter months have been held. In addition, concerts have been given by the Commercial Travellers' Association, the Dunedin Male Choir, and the Kaikorai Band. During the summer months regular picnics have taken place at Puketeraki and Karitane. The annual picnic and sports meeting held in the grounds was much enjoyed by the patients.

I have to express my thanks to Mr. Gallaway (District Inspector), Mr. Slater (Official Visitor), and Mr. Cumming (Patients' Friend) for their practical interest in the welfare of the patients and the institution. I also have to acknowledge the material assistance I have received in the loyalty and co-operation of the staff.

### STATISTICAL.

The patients on the register at the end of the year numbered 5,673 (m. 3,147, f. 2,526), or 206 (m. 103, f. 103) more than at the beginning; and the daily average under treatment during the year was 5,395 (m. 3,022, f. 2,373), or 182 (m. 96, f. 86) more than in the previous year, while the total under care was 6,412. Patients belonging to the Native race numbered 81 (m. 42, f. 39) at the end of the year.

The admissions numbered 945 (m. 531, f. 414), or 2 less (m. 23 more and f. 25 less) than in the previous year. Of these, 163 had been previously under care, making the proportion of readmissions 17.25 per cent., and 782 patients (including 15 Maoris) were admitted for the first time.

The ratio to population of all admissions (exclusive of Maoris) was 6.74 (m. 7.42, f. 6.03) to 10,000, and of first admissions 5.58 (m. 6.17, f. 4.96), so that 1,482 persons in the general population contributed one patient, and 1,792 contributed a patient admitted for the first time.

The discharges (excluding transfers) numbered 390, or 7 more than in 1926. 105 (or 3 more) harmless unrecovered persons were returned to the care of friends, and 285 (m. 157, f. 128) recovered—4 more than last year, representing a percentage of 30.16 (m. 29.56, f. 30.91) on the total admitted. With voluntary boarders added the percentage rises to 36.60. Altogether, 45.79 per cent. of the inmates admitted were able to leave institutional care.

Of a total of 6,412 patients under care, 349 (m. 217, f. 132) died, or 6.47 per cent. on the average number resident. 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, 24.63; disease of the brain and nervous system group, 24.63; heart-disease, 12.60; tuberculosis, 6.19.

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. Hereunder the assigned causations in the table referred to are grouped and shown in their relative proportions:—

	Males.	Females.	Total.
Heredity .. .. .	16.95	9.66	13.75
Congenital .. .. .	11.67	12.07	11.85
Predisposed by previous attack .. .. .	9.41	11.09	10.16
Critical periods .. .. .	19.39	30.91	24.44
Child-bearing (puerperal, non-septic, and lactation) .. .. .	..	4.10	1.80
Mental stress .. .. .	10.54	9.42	10.05
Physiological defect and error .. .. .	2.82	6.04	4.23
Toxic, including	M.	F.	
Syphilis .. .. .	7.72	0.72	16.74
Alcohol .. .. .	7.53	2.41	
Traumatic .. .. .	..	0.56	0.31
Disorder of nervous system, including—	M.	F.	
Epilepsy .. .. .	4.52	3.86	7.15
Other bodily affections .. .. .	..	..	0.18
No definite cause assigned .. .. .	..	..	4.59
	100.00	100.00	100.00

## 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
1924 .. ..	38	44	82	16	20	36	54	64	118	4	8	12	6	3	9	39	48	87	54	80	134
1925 .. ..	64	59	123	15	34	49	79	93	172	10	15	25	6	3	9	60	63	123	57	92	149
1926 .. ..	71	60	131	11	29	40	82	89	171	10	11	21	7	2	9	49	71	120	73	97	170
1927 .. ..	70	70	140	25	32	57	95	102	197	8	6	14	5	12	17	75	58	133	80	123	203

It will be noted that there were 197 voluntary admissions in the year under review, that 133 were discharged, and that 14 boarders, representing 3.80 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 on average number resident was 9.94 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 1927 was 171 (m. 79, f. 92).

## MENTAL NURSES.

In December the usual examination was held for the registration of mental nurses, when the following passed:—

Auckland: First Grade—Elizabeth Ellen Holgate, Wilmot Jackson, Ernest Edward Potter, Elizabeth Reid; Second Grade—Robert Randall Crawford, Beatrice May Heath, Sydney John Jones, Robert James McIntosh, Edward Matsen, Norma Violet Moeller, Alan James Morton, Henry Howard Priestly, Isolene Mary Seales, Finlay Thomson, John Tough Walker, James Arthur West.

Tokanui: Second Grade—Karl Carr, Martha Jeanette Henry, Robert Brown Kinnon, Emily McMillan, Tasma Walker.

Porirua: First Grade—Isabella Duncan Brand, Jeannie Wilson Dunsmore; Second Grade—Ada Barker, James McBride, John Mullins, Colin Simon, Robert Souter.

Nelson: First Grade—Francis Henderson, Howard Sidney Leake, Agnes Louisa Moore; Second Grade—Margaret Edith Mona Cussen, Hilda Isabel Ryrie, Aaron Sydney Thomas, Vera Elizabeth Wilkins, Harry Orlando Winnie.

Hokitika: First Grade—Henrietta Rubina Hoffman; Second Grade—Mark Dent, James Arnold Doyle, Rita Annie Morris.

Christchurch: First Grade—Lillian May Sprott; Second Grade—Maud Elizabeth Clifton, Winifred Ann Doyle, Mercia Kathleen Flanagan, James Kelly, Rita Charlotte Liggins, Margaret Macrae, Nellie Miriam Minards, Doris Isabel McLean, May Parker, John Simpson, Richard Humphreys Watkins.

Seacliff: Second Grade—Roberta Margaret Howie Brown, Annie Chisholm, Martha Hendry Cochrane, Jessie Annie Cumming, Shiela Cumming, Mary Evelyn Daniell, Florence May Dobinson, Evelyn Ethel Edwards, Mary Ogilvie Fleming, Beatrice Fanny Grey, Annie Hocking, David Milne, May Piercy, Dorothy Ranger.

## APPENDIX.

TABLE I.—SHOWING THE ADMISSIONS, READMISSIONS, DISCHARGES, AND DEATHS IN MENTAL HOSPITALS DURING THE YEAR 1927.

	M.	F.	T.	M.	F.	T.
In mental hospitals, 1st January, 1927 .. .. .				3,044	2,423	5,467
Admitted for the first time .. .. .	441	341	782	} 531	414	945
Readmitted .. .. .	90	73	163			
Total under care during the year .. .. .				3,575	2,837	6,412
Discharged and died—						
Recovered .. .. .	157	128	285			
Relieved .. .. .	40	42	82			
Not improved .. .. .	14	9	23			
Died .. .. .	217	132	349			
(Not including transfers—Males 32, females 19.)				428	311	739
Remaining in mental hospitals, 31st December, 1927 .. .. .				3,147	2,526	5,673
Increase over 31st December, 1926 .. .. .				103	103	206
Average number resident during the year .. .. .				3,022	2,373	5,395

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 1927.

Mental Hospitals.	In Mental Hospitals on 1st January, 1927.			Admissions in 1927.									Total Number of Patients under Care.		
	M.	F.	T.	Admitted for the First Time.			Not First Admission.			Transfers.			M.	F.	T.
Auckland .. .. .	652	496	1,148	97	82	179	23	14	37	10	1	11	782	593	1,375
Christchurch .. .. .	397	473	870	71	58	129	16	16	32	2	3	5	486	550	1,036
Dunedin (Seacliff) .. .. .	617	515	1,132	74	54	128	18	15	33	1	2	3	710	586	1,296
Hokitika .. .. .	159	67	226	9	4	13	1	0	1	1	0	1	170	71	241
Nelson .. .. .	269	120	389	33	16	49	1	4	5	3	0	3	306	140	446
Porirua .. .. .	723	599	1,322	129	109	238	24	22	46	5	2	7	881	732	1,613
Tokanui .. .. .	213	124	337	25	11	36	6	1	7	15	3	18	259	139	398
Ashburn Hall (private mental hospital)	14	29	43	3	7	10	1	1	2	2	1	3	20	38	58
Totals .. .. .	3,044	2,423	5,467	441	341	782	90	73	163	39	12	51	3,614	2,849	6,463

  

Mental Hospitals.	Patients discharged, transferred, and died.												In Mental Hospitals on 31st December, 1927.					
	Discharged recovered.			Discharged not recovered.			Transferred.			Died.			Total discharged, transferred, and died.			M.	F.	T.
Auckland .. .. .	45	22	67	15	9	24	4	2	6	63	36	99	127	69	196	655	524	1,179
Christchurch .. .. .	20	25	45	12	21	33	2	1	3	37	32	69	71	79	150	415	471	886
Dunedin (Seacliff) .. .. .	19	13	32	12	17	29	3	2	5	33	21	54	67	53	120	643	533	1,176
Hokitika .. .. .	7	5	12	1	0	1	..	..	..	10	2	12	18	7	25	152	64	216
Nelson .. .. .	4	3	7	5	0	5	1	0	1	13	2	15	23	5	28	283	135	418
Porirua .. .. .	50	47	97	6	1	7	17	3	20	46	35	81	119	86	205	762	646	1,408
Tokanui .. .. .	12	9	21	3	3	6	11	0	11	12	3	15	38	15	53	221	124	345
Ashburn Hall (private mental hospital)	0	4	4	..	..	..	1	4	5	3	1	4	4	9	13	16	29	45
Totals .. .. .	157	128	285	54	51	105	39	12	51	217	132	349	467	323	790	3,147	2,526	5,673

  

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 .. .. .	623	482	1,105	37.50	22.22	31.01	10.11	7.47	8.95
Christchurch .. .. .	395	453	848	23.00	33.78	27.95	9.37	7.06	8.13
Dunedin (Seacliff) .. .. .	627	511	1,138	20.65	18.83	19.88	5.26	4.11	4.74
Hokitika .. .. .	156	67	223	70.00	125.00	85.71	6.41	3.00	5.37
Nelson .. .. .	275	123	398	11.76	15.00	12.96	4.59	1.48	3.58
Porirua .. .. .	717	586	1,303	33.98	35.87	34.15	6.41	5.97	6.21
Tokanui .. .. .	214	123	337	38.71	75.00	48.83	5.60	2.43	4.45
Ashburn Hall (private mental hospital)	15	28	43	0.00	50.00	33.33	20.00	3.57	9.30
Totals .. .. .	3,022	2,373	5,395	29.56	30.91	30.16	7.17	5.65	6.47

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.	M.	F.	T.
Under 5 years ..	1	1	2	..	..	..	2	0	2	..	..	..	1	0	1	..	..	..	0	1	1	..	..	..	4	2	6
From 5 to 10 years ..	1	0	1	..	..	..	0	1	1	..	..	..	9	0	9	..	..	..	..	..	..	..	..	..	12	4	16
" 10 " 15 ..	4	2	6	1	1	2	..	..	7	0	1	1	6	2	8	2	3	5	..	..	..	..	..	..	12	9	21
" 15 " 20 ..	6	6	12	6	10	16	5	2	7	1	0	1	11	7	18	11	7	18	..	..	..	..	..	..	37	28	65
" 20 " 30 ..	21	17	38	19	9	28	19	11	30	2	0	2	5	7	12	29	20	49	7	3	10	..	..	102	67	169	
" 30 " 40 ..	25	15	40	10	9	19	20	13	33	0	2	2	3	3	6	30	19	49	2	2	4	1	1	2	91	64	155
" 40 " 50 ..	20	24	44	15	18	33	14	19	33	3	0	3	1	1	2	29	39	68	12	3	15	1	3	4	95	107	202
" 50 " 60 ..	15	13	28	15	12	27	14	13	27	1	0	1	2	2	4	26	19	45	5	3	8	0	2	2	78	64	142
" 60 " 70 ..	10	11	21	9	7	16	9	4	13	1	1	2	1	1	2	19	10	29	2	0	2	0	1	1	51	35	86
" 70 " 80 ..	9	4	13	8	4	12	6	5	11	..	..	..	..	..	5	7	12	..	..	..	..	..	..	..	29	22	51
" 80 " 90 ..	5	3	8	2	2	4	2	1	3	1	0	1	..	..	0	4	4	..	..	..	..	..	..	..	12	10	22
" 90 " 100 ..	..	..	..	0	2	2	1	0	1	1	0	1	..	..	1	0	1	..	..	..	..	..	..	..	2	2	4
Unknown ..	3	0	3	2	0	2	1	0	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	6	0	6
Transfers ..	10	1	11	2	3	5	1	2	3	1	0	1	..	..	3	0	3	..	..	..	..	..	..	..	39	12	51
Totals ..	130	97	227	89	77	166	93	71	164	11	4	15	37	20	57	158	133	291	46	15	61	6	9	15	570	426	996

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.	M.	F.	T.	
First class (first attack and within 3 months on admission)	44	33	77	30	25	55	31	16	47	4	1	5	6	6	12	90	76	166	15	3	18	1	3	4	221	163	384	
Second class (first attack above 3 months and within 12 months on admission)	16	15	31	6	3	9	13	9	22	1	1	2	0	1	1	19	8	27	1	1	2	0	2	2	56	40	96	
Third class (not first attack, and within 12 months on admission)	24	21	45	19	24	43	16	24	40	2	0	2	1	5	6	16	16	32	10	4	14	1	1	2	89	95	184	
Fourth class (first attack or not, but of more than 12 months on admission)	36	27	63	32	22	54	32	20	52	3	2	5	27	8	35	28	31	59	5	4	9	2	2	4	165	116	281	
Unknown ..	10	1	11	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Transfers ..	..	..	..	2	3	5	1	2	3	1	0	1	3	0	3	5	2	7	..	..	..	..	..	..	..	39	12	51
Totals ..	130	97	227	89	77	166	93	71	164	11	4	15	37	20	57	158	133	291	46	15	61	6	9	15	570	426	996	

TABLE V.—AGES OF PATIENTS DISCHARGED "RECOVERED" AND "NOT RECOVERED" DURING THE YEAR 1927.

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	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.	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	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 10 " 15 "	2 0 2	0 1 1	7 1 1	2 2 4	1 1 1	2 0 1	0 1 1	1 0 1	1 0 1	1 0 1	..	..	..	..	..	..	..	..
" 15 " 20 "	10 0 10	3 3 3	3 2 5	3 3 6	6 5 11	2 2 4	1 0 1	1 0 1	1 0 1	1 0 1	2 0 2	10 10 20	2 1 3	3 2 1	8 5 13	33 18 51	5 5 13	2 2 4
" 20 " 30 "	12 5 17	2 1 3	3 2 5	3 3 6	3 6 9	1 4 5	1 2 3	1 0 1	1 0 1	1 0 1	2 4 6	11 11 22	1 0 1	2 4 6	34 22 56	34 22 56	6 8 14	6 8 14
" 30 " 40 "	12 10 22	..	5 8 13	1 3 4	5 1 6	3 8 4	1 5 5	..	..	..	12 14 26	1 0 1	4 2 6	0 2 2	43 37 80	22 22 44	7 8 15	7 8 15
" 40 " 50 "	5 4 9	2 3	1 6 7	0 3 3	2 1 3	4 7 0	2 2	..	..	..	2 1 1	2 3 4	..	0 2 2	16 10 26	4 2 6	4 2 6	4 2 6
" 50 " 60 "	4 2 6	1 0 1	4 2 6	2 1 3	3 0 3	0 1 1	..	..	..	..	4 4 8	1 0 1	..	0 1 1	0 2 2	0 2 2	5 4 9	5 4 9
" 60 " 70 "	..	..	..	4 2 6	0 2 2	..	..	..	..	..	..	..	..	..	..	..	..	..
" 70 " 80 "	..	..	..	1 2 3	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 80 " 90 "	..	..	..	0 1 1	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 90 " 100 "	0 1 1	7 4 11	1 1 2	0 1 1	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Unknown	..	..	..	2 1 3	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Transfers	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals	45 22 67	19 11 30	20 25 45	14 22 36	19 13 32	15 19 34	7 5 12	1 0 1	4 3 7	6 0 6	50 47 97	23 4 27	12 9 21	14 3 17	0 4 4	1 4 5	157 128 285	93 63 156

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	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.	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	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 10 " 15 "	1 1 1	1 2 1	1 0 1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 15 " 20 "	1 1 0	1 2 1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 20 " 30 "	4 0 4	0 4 4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 30 " 40 "	3 1 4	2 4 6	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 40 " 50 "	4 2 6	4 6 10	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 50 " 60 "	12 4 16	6 6 12	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 60 " 70 "	5 6 11	6 10 16	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 70 " 80 "	15 7 22	10 3 13	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 80 " 90 "	8 8 16	5 2 7	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 90 " 100 "	8 6 14	0 2 2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Unknown	1 0 1	1 0 1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals	63 36 99	37 32 69	33 21 54	10 2 12	13 2 15	46 35 81	12 3 15	3 1 4	217 132 349									

TABLE VII.—CONDITION AS TO MARRIAGE.

					Admissions.			Discharges.			Deaths.			
					M.	F.	T.	M.	T.	T.	M.	F.	T.	
AUCKLAND—					64	36	100	33	8	41	36	10	46	
Single ..	..	..	..	..	43	47	90	20	20	40	17	16	33	
Married ..	..	..	..	..	7	11	18	3	2	5	6	8	14	
Widowed ..	..	..	..	..	6	2	8	4	1	5	4	2	6	
Unknown ..	..	..	..	..	10	1	11	4	2	6	..	..	..	
Transfers ..	..	..	..	..	130	97	227	64	33	97	63	36	99	
Totals ..	..	..	..	..	CHRISTCHURCH—									
Single ..	..	..	..	..	42	33	75	19	23	42	24	14	38	
Married ..	..	..	..	..	39	29	68	11	22	33	8	12	20	
Widowed ..	..	..	..	..	6	12	18	0	1	1	2	6	8	
Unknown ..	..	..	..	..	..	..	..	2	0	2	3	0	3	
Transfers ..	..	..	..	..	2	3	5	2	1	3	..	..	..	
Totals ..	..	..	..	..	89	77	166	34	47	81	37	32	69	
DUNEDIN (SEACLIFF)—					DUNEDIN (SEACLIFF)—									
Single ..	..	..	..	..	57	29	86	19	17	36	20	9	29	
Married ..	..	..	..	..	27	32	59	12	12	24	11	7	18	
Widowed ..	..	..	..	..	8	8	16	0	1	1	2	5	7	
Unknown ..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Transfers ..	..	..	..	..	1	2	3	3	2	5	..	..	..	
Totals ..	..	..	..	..	93	71	164	34	32	66	33	21	54	
HOKITIKA—					HOKITIKA—									
Single ..	..	..	..	..	6	1	7	4	0	4	5	1	6	
Married ..	..	..	..	..	3	3	6	2	5	7	4	0	4	
Widowed ..	..	..	..	..	..	..	..	..	..	..	1	1	2	
Unknown ..	..	..	..	..	1	0	1	1	0	1	..	..	..	
Transfers ..	..	..	..	..	1	0	1	1	0	1	..	..	..	
Totals ..	..	..	..	..	11	4	15	8	5	13	10	2	12	
NELSON—					NELSON—									
Single ..	..	..	..	..	31	12	43	6	1	7	10	1	11	
Married ..	..	..	..	..	2	8	10	3	2	5	3	0	3	
Widowed ..	..	..	..	..	1	0	1	1	0	1	0	1	1	
Unknown ..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Transfers ..	..	..	..	..	3	0	3	..	..	..	..	..	..	
Totals ..	..	..	..	..	37	20	57	10	3	13	13	2	15	
PORIRUA—					PORIRUA—									
Single ..	..	..	..	..	97	51	148	33	14	47	25	14	39	
Married ..	..	..	..	..	51	66	117	20	27	47	18	12	30	
Widowed ..	..	..	..	..	5	14	19	3	7	10	3	9	12	
Unknown ..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Transfers ..	..	..	..	..	5	2	7	17	3	20	..	..	..	
Totals ..	..	..	..	..	158	133	291	73	51	124	46	35	81	
TOKANUI—					TOKANUI—									
Single ..	..	..	..	..	15	3	18	9	2	11	10	..	10	
Married ..	..	..	..	..	14	7	21	6	10	16	2	2	4	
Widowed ..	..	..	..	..	2	2	4	..	..	..	0	1	1	
Unknown ..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Transfers ..	..	..	..	..	15	3	18	11	0	11	..	..	..	
Totals ..	..	..	..	..	46	15	61	26	12	38	12	3	15	
ASHBURN HALL—					ASHBURN HALL—									
Single ..	..	..	..	..	2	5	7	0	3	3	1	1	2	
Married ..	..	..	..	..	2	2	4	0	1	1	2	0	2	
Widowed ..	..	..	..	..	0	1	1	..	..	..	..	..	..	
Unknown ..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Transfers ..	..	..	..	..	2	1	3	1	4	5	..	..	..	
Totals ..	..	..	..	..	6	9	15	1	8	9	3	1	4	
TOTALS—					TOTALS—									
Single ..	..	..	..	..	314	170	484	123	68	191	131	50	181	
Married ..	..	..	..	..	181	194	375	74	99	173	65	49	114	
Widowed ..	..	..	..	..	29	48	77	7	11	18	14	31	45	
Unknown ..	..	..	..	..	7	2	9	7	1	8	7	2	9	
Transfers ..	..	..	..	..	39	12	51	39	12	51	..	..	..	
Totals ..	..	..	..	..	570	426	996	250	191	441	217	132	349	

TABLE VIII.—NATIVE COUNTRIES.

Countries.	Auckland.		Christchurch.		Dunedin (Seaciff).		Hokitika.		Nelson.		Porirua.		Tokanui.		Ashburn Hall (Private M.H.).		Total.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.			
England and Wales	119	90	68	87	93	61	29	7	12	13	161	102	48	14	4	4	534	378	912
Scotland	30	23	24	14	65	54	5	2	14	6	40	28	13	3	2	2	193	132	325
Ireland	45	33	24	30	45	43	21	7	11	3	47	61	11	15	0	1	205	192	397
New Zealand	322	314	268	305	401	342	64	45	192	68	423	393	113	85	9	21	1,792	1,573	3,365
Australian States	40	23	14	14	19	27	10	3	10	5	33	24	12	3	0	2	138	101	239
France	0	1	..	..	..	..	1	0	1	0	7	..	2	0	..	..	4	1	5
Germany	5	2	2	3	4	0	1	0	1	1	0	1	3	1	..	..	23	13	36
Austria	17	1	0	2	1	0	1	..	0	2	0	1	3	0	..	..	23	4	27
Norway	5	0	0	1	2	0	1	1	0	2	3	1	1	0	..	..	12	2	14
Sweden	3	1	4	0	3	0	3	0	3	..	3	1	1	0	..	..	19	2	21
Denmark	2	0	4	0	2	1	3	0	3	1	6	2	1	0	..	..	14	4	18
Italy	3	1	..	..	1	0	6	0	1	0	5	2	1	0	..	..	17	3	20
China	1	0	..	..	4	0	1	0	1	..	2	1	..	..	..	..	8	1	9
Maoris	18	19	..	..	..	..	3	0	3	5	13	16	3	2	..	..	42	39	81
Other countries	32	9	6	8	3	5	7	0	7	1	19	7	10	1	..	..	78	30	108
Unknown	13	7	3	6	..	..	..	..	29	38	..	..	..	..	..	..	45	51	96
Totals	655	524	415	471	643	533	152	64	283	135	762	646	221	124	16	29	3,147	2,526	5,673

TABLE IX.—AGES OF PATIENTS ON 31ST DECEMBER, 1927.

Ages.	Auckland.		Christchurch.		Dunedin (Seaciff).		Hokitika.		Nelson.		Porirua.		okanui.		Ashburn Hall (Private M.H.).		Total.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.			
From 1 to 5 years	..	..	..	..	2	0	..	..	12	0	..	..	0	1	..	..	14	1	15
" 5 " 10 "	0	2	0	10	1	1	..	..	29	2	0	9	..	..	..	..	30	24	54
" 10 " 15 "	6	7	6	6	2	3	0	1	49	5	0	14	1	2	..	..	64	38	102
" 15 " 20 "	16	14	12	13	17	8	..	..	24	4	13	23	8	2	..	..	90	64	164
" 20 " 30 "	82	59	64	41	84	38	5	3	25	20	92	65	14	10	..	..	366	236	602
" 30 " 40 "	105	104	74	65	98	88	17	7	33	20	148	119	25	20	2	2	502	425	927
" 40 " 50 "	156	119	107	129	162	132	47	19	32	19	195	160	68	27	3	6	770	611	1,381
" 50 " 60 "	132	110	68	107	123	122	41	16	35	24	165	132	65	31	2	5	631	547	1,178
" 60 " 70 "	91	60	46	64	80	91	25	10	28	26	87	71	27	20	7	8	391	350	741
" 70 " 80 "	41	30	30	25	58	39	7	3	13	7	49	35	5	10	2	6	205	155	360
" 80 " 90 "	10	6	6	8	9	10	3	4	1	5	11	18	3	1	0	2	43	54	97
Upwards of 90 "	..	..	1	1	1	0	1	0	1	0	1	0	..	..	..	..	5	1	6
Unknown	16	13	1	2	6	1	6	1	1	3	1	0	5	0	..	..	36	20	56
Totals	655	524	415	471	643	533	152	64	283	135	762	646	221	124	16	29	3,147	2,526	5,673

TABLE X.—LENGTH OF RESIDENCE OF PATIENTS WHO DIED DURING 1927.

Length of Residence.	Auckland.			Christchurch.			Dunedin (Seacliff).			Hokitika.			Nelson.			Porirua.			Tokanui.			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 ..	8	4	12	3	5	8	0	2	2	..	..	..	4	0	4	6	5	11	1	1	2	1	0	1	1	0	1	23	17	40
From 1 to 3 months ..	5	3	8	1	2	3	1	1	1	1	0	1	..	..	..	4	4	8	..	..	3	0	3	3	0	3	15	10	25	
" 3 " 6 " ..	5	1	6	3	2	5	1	1	1	1	0	1	..	..	..	4	1	5	1	0	1	1	0	1	..	..	16	5	21	
" 6 " 9 " ..	5	2	7	3	2	5	0	3	3	..	..	..	..	..	..	3	0	2	3	2	..	2	..	..	..	..	15	6	21	
" 9 " 12 " ..	3	2	5	5	1	6	4	3	3	..	..	..	..	..	..	0	1	4	3	7	2	..	..	..	..	..	10	9	19	
" 1 " 2 years ..	9	6	15	6	2	8	1	2	2	3	3	..	..	..	3	1	4	3	7	1	..	..	..	..	..	..	23	15	38	
" 2 " 3 " ..	3	2	5	1	0	1	2	2	4	3	0	3	..	..	..	1	0	1	1	1	2	0	1	1	0	1	11	6	17	
" 3 " 5 " ..	4	0	4	1	3	4	3	0	3	1	0	1	..	..	..	1	0	1	1	2	5	1	1	..	..	..	12	5	17	
" 5 " 7 " ..	4	2	6	2	0	2	1	1	0	1	1	0	1	0	1	3	2	5	3	2	5	0	..	..	..	..	11	4	15	
" 7 " 10 " ..	3	1	4	1	2	3	3	1	4	3	1	4	3	1	4	3	1	4	5	5	1	0	1	1	..	..	11	9	20	
" 10 " 12 " ..	1	0	1	2	3	5	1	1	2	1	0	1	..	..	..	3	1	4	4	4	1	0	1	1	..	..	8	5	13	
" 12 " 15 " ..	0	3	3	1	0	1	1	0	1	..	..	..	..	..	..	3	1	4	4	4	1	0	1	..	..	..	6	4	10	
Over 15 years ..	13	8	21	8	10	18	12	6	18	5	1	6	1	0	1	9	6	15	6	15	3	0	3	..	..	..	51	31	82	
Died while absent on trial ..	0	2	2	..	..	..	3	0	3	0	1	1	..	..	..	2	3	5	..	..	..	..	..	..	..	..	5	6	11	
Totals ..	63	36	99	37	32	69	33	21	54	10	2	12	13	2	15	46	35	81	3	1	4	12	3	15	217	132	349			

TABLE XI.—LENGTH OF RESIDENCE OF PATIENTS DISCHARGED "RECOVERED" DURING 1927.

Length of Residence.	Auckland.			Christchurch.			Dunedin (Seacliff).			Hokitika.			Nelson.			Porirua.			Tokanui.			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 ..	3	2	5	3	5	8	4	0	4	3	0	3	1	0	1	2	0	2	2	0	2	2	0	2	11	2	13		
From 1 to 3 months ..	10	1	11	5	4	9	4	4	8	1	0	1	0	1	1	7	10	17	0	3	3	7	1	8	32	21	53		
" 3 " 6 " ..	3	6	9	4	4	8	5	1	6	1	0	1	..	..	..	12	4	16	0	1	1	0	1	27	25	52			
" 6 " 9 " ..	9	7	16	4	4	8	2	1	3	1	0	1	1	0	1	10	7	17	0	2	2	0	2	29	21	50			
" 9 " 12 " ..	5	0	5	2	5	7	2	1	3	1	3	4	1	0	1	8	15	23	1	1	2	1	1	22	17	39			
" 1 " 2 years ..	12	3	15	3	5	8	3	4	7	..	..	..	2	1	3	0	2	2	..	..	..	..	..	..	..	..	28	28	56
" 2 " 3 " ..	2	0	2	3	1	4	0	2	2	0	1	1	..	..	..	0	2	2	..	..	..	..	..	..	..	2	4	6	
" 3 " 5 " ..	0	2	2	3	1	4	..	..	..	..	..	..	..	..	..	0	2	2	..	..	..	..	..	..	..	3	6	9	
" 5 " 7 " ..	1	0	1	0	1	1	0	1	1	..	..	..	0	1	1	..	..	..	..	..	..	..	..	..	..	1	0	1	
" 7 " 10 " ..	0	1	1	0	1	1	..	..	..	..	..	..	0	1	1	..	..	..	..	..	..	..	..	..	..	0	4	4	
" 10 " 12 " ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 12 " 15 " ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Over 15 years ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals ..	45	22	67	20	25	45	19	13	32	7	5	12	4	3	7	50	47	97	0	4	4	12	9	21	157	128	285		



TABLE XII.—CAUSES OF DEATH.

Causes.	Auckland.		Christchurch.		Dunedin (Seacliff).		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.
<b>I. GENERAL DISEASES.</b>																		
Tuberculosis—																		
General .. .. .	3	0	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Of lungs .. .. .	2	2	1	1	2	0	..	..	..	..	5	3	..	..	0	1	10	7
Diabetes .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	0	1	..	..	0	1
Typhoid fever .. .. .	..	..	0	1	..	..	..	..	..	..	..	..	0	1	..	..	0	2
Rheumatic fever .. .. .	..	..	..	..	..	..	..	..	..	..	0	1	..	..	..	..	0	1
Cancer .. .. .	2	1	4	2	1	1	1	0	1	0	2	1	..	..	..	..	11	5
Pyæmia .. .. .	..	..	..	..	..	..	..	..	..	..	0	3	..	..	..	..	0	3
Septicæmia .. .. .	..	..	..	..	..	..	..	..	..	..	0	1	..	..	..	..	0	1
Toxæmia .. .. .	..	..	..	..	..	..	..	..	..	..	0	2	..	..	..	..	0	2
Measles .. .. .	1	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	2
Pernicious anæmia .. .. .	..	..	1	0	..	..	..	..	..	..	..	..	..	..	..	..	1	0
Syphilis .. .. .	..	..	0	1	..	..	..	..	..	..	..	..	2	0	..	..	2	1
<b>II. DISEASES OF THE NERVOUS SYSTEM.</b>																		
Melancholia, exhaustion from ..	4	1	0	1	0	1	..	..	..	..	..	..	..	..	..	..	4	3
Mania, exhaustion from ..	1	1	..	..	2	1	1	0	..	..	0	1	..	..	..	..	4	3
Confusional insanity, exhaustion from ..	..	..	..	..	..	..	..	..	..	..	3	2	1	0	..	..	4	2
General paralysis of insane ..	6	1	7	1	7	0	..	..	..	..	6	1	1	0	..	..	27	3
Organic brain-disease ..	1	1	..	..	0	1	..	..	..	..	..	..	..	..	..	..	1	2
Epilepsy .. .. .	4	0	1	1	1	1	..	..	1	0	4	0	..	..	..	..	11	2
Œdema of brain .. .. .	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	1	1
Locomotor ataxia .. .. .	..	..	..	..	..	..	..	..	..	..	1	0	..	..	..	..	1	0
Cerebral hæmorrhage .. .. .	4	4	..	..	..	..	1	0	0	1	..	..	..	..	..	..	5	5
Cerebral abscess .. .. .	..	..	0	1	..	..	..	..	..	..	..	..	..	..	..	..	0	1
Lateral sclerosis .. .. .	1	0	..	..	..	..	..	..	..	..	..	..	1	0	..	..	2	0
Apoplexy .. .. .	..	..	..	..	4	0	..	..	..	..	..	..	..	..	..	..	4	0
<b>III. DISEASES OF THE RESPIRATORY SYSTEM.</b>																		
Pneumonia .. .. .	0	2	4	1	1	0	2	0	5	0	1	1	4	0	..	..	17	4
Pleurisy .. .. .	1	0	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	0
Empyema .. .. .	..	..	..	..	..	..	..	..	1	0	..	..	..	..	..	..	1	0
Bronchitis .. .. .	3	0	..	..	..	..	0	1	..	..	..	..	..	..	..	..	3	1
Œdema of lungs .. .. .	..	..	..	..	..	..	..	..	1	0	2	0	..	..	..	..	3	0
<b>IV. DISEASES OF THE CIRCULATORY SYSTEM.</b>																		
Heart-disease .. .. .	3	2	4	8	4	5	1	0	..	..	3	3	1	0	..	..	16	18
Arterio-sclerosis .. .. .	1	2	3	4	..	..	..	..	..	..	2	1	..	..	..	..	6	7
Cerebral embolism .. .. .	1	0	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	0
Thrombosis .. .. .	..	..	1	1	..	..	..	..	..	..	1	2	..	..	..	..	2	3
<b>V. DISEASES OF THE DIGESTIVE SYSTEM.</b>																		
Enteritis .. .. .	1	0	..	..	0	1	..	..	1	0	..	..	..	..	..	..	2	1
Peritonitis .. .. .	1	0	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	0
Hæmorrhage pancreatitis .. .. .	0	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	0	1
Cirrhosis of liver .. .. .	0	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	0	1
Intestinal obstruction .. .. .	..	..	1	0	..	..	..	..	..	..	..	..	..	..	..	..	1	0
Chronic diarrhœa .. .. .	1	0	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	0
Ulcer of stomach .. .. .	1	0	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	0
<b>VI. DISEASES OF THE GENITO-URINARY SYSTEM.</b>																		
Nephritis .. .. .	..	..	..	..	..	..	..	..	..	..	2	1	..	..	..	..	2	1
Ovarian tumour .. .. .	0	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	0	1
Uræmia .. .. .	..	..	0	1	..	..	..	..	..	..	..	..	..	..	..	..	0	1
<b>VII. OLD AGE.</b>																		
Senile decay .. .. .	18	12	9	6	6	8	3	0	0	1	11	8	0	1	3	0	50	36
<b>VIII. DISEASES OF THE BONES.</b>																		
Osteomyelitis .. .. .	1	0	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	0
Osteoma of skull .. .. .	..	..	0	1	..	..	..	..	..	..	..	..	..	..	..	..	0	1
<b>IX. ILL-DEFINED CAUSES.</b>																		
Coma .. .. .	..	..	..	..	1	0	..	..	..	..	..	..	..	..	..	..	1	0
Asthenia .. .. .	..	..	..	..	..	..	0	1	..	..	..	..	..	..	..	..	0	1
Marasmus .. .. .	..	..	..	..	..	..	..	..	2	0	..	..	1	0	..	..	3	0
<b>X. EXTERNAL CAUSES.</b>																		
Suicide .. .. .	..	..	1	1	0	1	..	..	1	0	..	..	..	..	..	..	2	2
Traumatic hæmorrhage .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	1	0	..	..	1	0
Asphyxia .. .. .	..	..	..	..	..	..	1	0	..	..	..	..	..	..	..	..	1	0
<b>XI. DIED WHILE ON TRIAL</b>																		
.. .. .	2	2	..	..	3	0	..	..	..	..	2	3	..	..	..	..	7	5
Totals .. .. .	63	36	37	32	33	21	10	2	13	2	46	35	12	3	3	1	217	132

TABLE XIII.—PRINCIPAL ASSIGNED CAUSES OF INSANITY

Causes.	Auckland.		Christchurch.		Dunedin (Seacliff).		Hokitika.		Nelson.		Porirua.		Tokanui.		Asbburn Hall (P.M.H.).		Total.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Heredity .. ..	11	7	22	7	9	8	2	0	8	1	25	14	12	3	1	0	90	40
Congenital .. ..	18	12	3	7	11	4	0	2	18	6	7	16	5	3	..	..	62	50
Previous attack .. ..	0	2	14	11	17	21	..	..	..	..	19	12	..	..	..	..	50	46
Puberty or adolescence .. ..	18	10	8	6	6	2	..	..	..	..	10	0	..	..	..	..	42	18
Climacteric .. ..	0	2	0	15	0	16	..	..	0	2	0	18	..	..	0	3	0	56
Senility .. ..	19	16	13	8	13	8	2	1	1	1	10	19	1	0	2	1	61	54
Lactation .. ..	..	..	..	..	..	..	..	..	..	..	..	..	0	1	..	..	0	1
Puerperal .. ..	0	6	0	2	..	..	0	1	0	1	0	6	..	..	..	..	0	16
Sexual .. ..	..	..	..	..	..	..	..	..	..	..	0	1	..	..	1	1	1	2
Mental stress—																		
Sudden .. ..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	1	1
Prolonged .. ..	18	14	6	5	8	4	2	0	0	3	21	12	..	..	..	..	55	38
Alcohol .. ..	4	4	5	2	11	0	2	0	3	0	13	3	..	..	0	1	40	10
Syphilis .. ..	7	0	6	0	10	1	..	..	..	..	15	1	3	1	..	..	41	3
Drug habit .. ..	1	0	..	..	1	0	..	..	..	..	1	0	..	..	..	..	3	0
Isolation .. ..	..	..	1	0	2	0	..	..	..	..	..	..	..	..	..	..	3	0
Post-operative .. ..	..	..	..	..	..	..	..	..	..	..	0	2	..	..	..	..	0	2
Traumatic .. ..	1	0	1	0	..	..	..	..	..	..	..	..	1	0	..	..	3	0
Overwork .. ..	..	..	..	..	..	..	..	..	..	..	1	0	..	..	..	..	1	0
Epilepsy .. ..	4	1	3	6	2	1	..	..	0	1	12	7	3	0	..	..	24	16
Arterio-sclerosis .. ..	8	3	1	1	..	..	..	..	..	..	3	0	..	..	..	..	12	4
Exhaustion .. ..	0	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	0	1
Encephalitis .. ..	..	..	0	1	..	..	..	..	..	..	..	..	..	..	..	..	0	1
Influenza .. ..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	0	1	1	2
Ill health .. ..	8	10	..	..	..	..	..	..	..	..	5	9	..	..	..	..	13	19
Toxic .. ..	0	1	0	2	1	1	..	..	0	1	..	..	4	3	..	..	5	8
Cerebral hæmorrhage .. ..	..	..	..	..	..	..	..	..	..	..	0	1	..	..	..	..	0	1
Hemiplegia .. ..	..	..	..	..	..	..	..	..	..	..	..	..	0	1	0	1	0	2
Organic brain-disease .. ..	0	1	..	..	..	..	..	..	..	..	2	0	..	..	..	..	2	1
Heart-disease .. ..	0	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	0	4
Diabetes .. ..	..	..	1	0	..	..	..	..	..	..	..	..	..	..	..	..	1	0
Thyroid deficiency .. ..	..	..	..	..	0	2	..	..	..	..	..	..	..	..	..	..	0	2
Privation .. ..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	1	1
Unknown .. ..	3	2	2	0	..	..	2	0	4	4	8	9	..	..	..	..	19	15
Transfers .. ..	10	1	2	3	1	2	1	0	3	0	5	2	15	3	2	1	39	12
Totals .. ..	130	97	89	77	93	71	11	4	37	20	158	133	46	15	6	9	570	426



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.

Table with columns: Year, Admitted (M, F, T), Recovered (M, F, T), Discharged (M, F, T), Not Improved (M, F, T), Died (M, F, T), Remaining 31st Dec (M, F, T), Average Numbers resident (M, F, T), Percentage of Recoveries on Admissions (M, F, T), Percentage of Deaths on Average Numbers resident (M, F, T).

Excluding transfers between institutions—1,515 males, 1,031 females.

TABLE XVI.—SHOWING THE ADMISSIONS, DISCHARGES, AND DEATHS FROM 1ST JANUARY 1876, TO 31ST DECEMBER, 1927 (EXCLUDING TRANSFERS).

	M.	F.	T.
In hospitals, 31st December, 1875 .. .. .	482	254	736
Admissions .. .. .	18,032	13,036	31,068
	<u>18,514</u>	<u>13,290</u>	<u>31,804</u>
Discharged—			
Recovered .. .. .	6,984	5,796	12,780
Relieved .. .. .	1,307	1,190	2,497
Not improved .. .. .	364	268	632
Died .. .. .	<u>6,712</u>	<u>3,510</u>	<u>10,222</u>
	15,367	10,764	26,131
Remaining on 31st December, 1927 .. .. .	<u>3,147</u>	<u>2,526</u>	<u>5,673</u>

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

	Males.	Females.	Both Sexes.
Recovered .. .. .	38.77	44.46	41.13
Relieved .. .. .	7.77	8.12	8.03
Not improved .. .. .	2.01	2.05	2.03
Died .. .. .	37.22	26.91	33.63
Remaining .. .. .	14.23	18.46	15.18
	<u>100.00</u>	<u>100.00</u>	<u>100.00</u>

TABLE XVIII.—DEBITS FOR THE FINANCIAL YEAR, 1927-28.

—	Auckland.		Christchurch.		Dunedin.		Hokitika.		Nelson.		Porirua.		Tokelau.		Head Office.		Total.	
	£	s. d.	£	s. d.	£	s. d.	£	s. d.	£	s. d.	£	s. d.	£	s. d.	£	s. d.	£	s. d.
Salaries ..	38,161	18 0	37,303	11 5	49,469	8 3	13,811	13 2	17,299	1 4	45,727	5 6	16,867	8 6	6,718	18 6	220,359	4 8
Official Visitors ..	50	8 0	25	4 0	23	2 0	13	13 0	..	..	45	19 9	17	2 9	..	..	175	9 6
Advertising, books, &c. ..	2	2 0	12	5 9	16	16 6	11	3 9	3	17 6	8	6 0	4	16 6	62	11 2	121	19 2
Bacteriological research ..	..	..	7	1 0	0	7 0	..	..	1	11 6	17	0 6	3	13 6	..	..	29	13 6
Bedding and clothing ..	5,196	18 4	3,655	13 4	5,259	19 5	948	11 4	3,469	4 3	6,812	1 2	2,403	5 7	..	..	27,745	13 5
Buildings : including additions, &c. ..	1,279	2 10	1,539	19 8	1,550	5 5	348	8 10	71	6 0	961	19 9	983	7 0	..	..	6,734	9 6
Dental services ..	..	..	12	8 6	10	11 6	2	15 0	100	0 7	178	2 2	36	4 8	..	..	411	9 5
Developmental ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1,179	17 7
Fares and expenses of medical officers from United Kingdom ..	211	16 9	..	..	..	..	..	..	..	..	250	12 0	..	..	..	..	462	8 9
Farms, maintenance of ..	1,451	10 6	705	18 4	2,452	6 1	398	1 1	1,284	18 10	1,822	0 0	1,829	8 11	..	..	9,944	3 9
Fencing, draining, and roading ..	170	6 4	125	10 0	537	0 6	51	4 9	53	14 6	211	1 10	329	9 11	..	..	1,478	7 10
Freight, cartage, and transport ..	107	15 1	219	6 5	495	17 6	49	15 10	128	1 3	262	8 11	179	14 11	1	4 1	1,444	4 0
Fuel, light, water, &c. ..	5,017	14 0	5,242	16 3	5,387	1 4	938	12 2	2,525	6 0	5,282	13 11	1,723	0 6	..	..	26,117	4 2
Funerals, expenses of ..	79	15 0	60	10 0	22	10 0	9	15 0	33	10 0	89	2 6	27	13 0	..	..	322	15 6
Furniture and furnishings ..	422	9 9	379	17 8	308	15 0	205	4 4	157	2 6	625	8 0	251	15 9	4	8 6	2,355	1 6
Gardens and shrubberies, expenses of ..	52	15 7	166	16 4	32	18 9	25	18 11	24	18 11	30	5 0	44	7 7	..	..	378	1 1
Laundry ..	316	12 4	323	3 5	1,978	15 0	936	19 9	248	9 2	536	1 9	249	16 6	108	19 9	4,589	17 11
Legal and inquiry costs ..	..	..	..	..	75	17 5	..	..	..	..	..	..	..	..	..	..	184	17 2
Machinery, repairs, and stores ..	97	4 1	243	2 5	193	13 10	22	12 1	62	19 9	315	6 4	184	4 9	..	..	1,119	3 3
Medical fees for certificates, &c. ..	471	5 0	395	9 4	394	8 6	36	10 6	87	5 6	667	1 5	88	10 0	..	..	2,140	10 3
Motor-vehicles, maintenance of ..	35	18 4	35	5 0	104	12 0	10	11 5	85	17 4	264	16 10	63	4 6	..	..	600	5 5
Motor-vehicles, purchase of ..	..	..	281	1 3	..	..	..	..	277	1 6	..	..	210	6 5	..	..	768	9 2
Nursing Staff—	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Engagement of ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Uniforms, purchase of ..	354	6 11	513	18 6	522	8 4	146	8 1	135	19 0	537	10 0	136	9 3	..	..	2,347	0 1
Office equipment ..	0	11 6	6	1 11	0	11 0	5	8 0	4	14 9	0	10 6	0	10 6	28	12 10	47	1 0
Patients' expenses connected with—	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
"Patients' friends" ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Gratuities ..	94	18 0	100	0 0	100	0 0	31	14 6	76	14 11	78	18 2	21	16 1	..	..	200	0 0
Recreation ..	..	..	4	14 0	264	4 4	420	12 7	545	2 11	695	14 4	711	4 10	..	..	573	0 0
Transfers ..	1,301	5 11	1,095	8 7	1,767	19 11	14	0 0	14	0 0	85	4 0	11	5 8	..	..	6,537	9 1
Postages and telegrams ..	63	7 6	93	11 3	123	3 11	11	0 0	33	19 1	111	13 3	40	14 8	197	16 7	187	0 1
Printing and stationery ..	111	2 11	162	18 3	174	12 3	44	11 6	61	10 1	117	7 9	62	6 9	109	4 6	675	6 3
Rations ..	16,654	10 1	11,830	4 5	20,465	12 9	4,186	2 11	5,286	13 0	15,527	19 7	2,726	18 5	..	..	843	14 0
Rents and rates ..	..	..	1,963	18 9	148	0 9	..	..	..	..	..	..	..	..	..	..	76,678	1 2
Stores ..	1,020	12 8	876	7 5	1,089	5 0	149	12 10	333	8 8	887	9 11	345	2 10	..	..	2,111	19 6
Surgery and dispensary—	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Drugs and instruments ..	396	8 6	528	12 3	397	0 4	57	12 0	187	1 5	1,041	1 1	102	13 6	..	..	2,710	9 1
Wines, spirits, ales, and porter ..	..	..	7	18 0	25	16 8	1	17 6	5	2 0	28	6 8	5	19 7	..	..	75	0 5
Telephone services ..	54	18 11	84	1 0	206	8 9	17	14 3	41	17 10	134	2 11	57	18 0	80	0 6	677	2 2
Transfer and removal expenses ..	98	4 8	2	0 3	..	..	..	..	4	0 0	38	19 8	155	12 10	..	..	298	17 5
Travelling-allowances ..	62	8 11	54	11 3	54	9 2	..	..	63	4 2	9	0 8	11	10 11	295	9 9	550	14 10
Travelling-expenses ..	96	14 2	73	6 0	249	17 11	20	4 11	45	9 7	85	14 9	91	8 8	296	4 2	959	0 2
Treatment and maintenance in General Hospitals—	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Patients ..	19	10 0	3	5 6	59	7 0	12	12 0	6	16 6	78	0 6	5	8 0	..	..	184	19 6
Staff ..	36	8 0	2	2 0	3	10 0	28	10 0	4	4 0	4	2 0	2	2 0	..	..	80	18 0
Contingencies ..	1	2 1	..	..	4	15 5	1	2 6	2	0 6	1	9 0	0	8 0	..	..	11	15 11
Official trip abroad, Deputy Inspector-General ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	487	17 5	487	17 5
Total expenditure ..	68,612	4 6	68,152	17 10	93,999	5 1	22,956	14 6	32,752	4 10	83,590	18 1	31,166	19 4	8,391	7 9	409,622	11 11
Credits ..	22,503	1 11	23,158	11 2	30,645	11 6	3,516	6 8	9,434	0 11	32,068	3 8	13,478	2 2	1	4 0	134,805	2 0
Net expenditure ..	46,109	2 7	44,994	6 8	63,353	13 7	19,440	7 10	23,318	3 11	51,522	14 5	17,688	17 2	8,390	3 9	274,817	9 11

TABLE XVIII.—CREDITS FOR THE FINANCIAL YEAR, 1927-28.

	Auckland.	Christchurch.	Dunedin.	Hokitika.	Nelson.	Porirua.	Tokanui.	Head Office.	Total.
Receipts for maintenance ..	£ s. d. 21,086 8 6	£ s. d. 17,792 15 10	£ s. d. 25,277 3 3	£ s. d. 2,554 2 3	£ s. d. 7,326 4 10	£ s. d. 29,365 16 1	£ s. d. 7,883 1 4	£ s. d. ..	£ s. d. 111,285 12 1
Receipts for farms ..	£ s. d. 735 10 5	£ s. d. 3,332 18 4	£ s. d. 1,501 0 0	£ s. d. 111 16 4	£ s. d. 1,512 15 4	£ s. d. 1,058 8 3	£ s. d. 4,921 4 10	£ s. d. ..	£ s. d. 13,173 13 6
Miscellaneous ..	£ s. d. 681 3 0	£ s. d. 2,032 17 0	£ s. d. 3,867 8 3	£ s. d. 850 8 1	£ s. d. 595 0 9	£ s. d. 1,643 19 4	£ s. d. 673 16 0	£ s. d. 1 4 0	£ s. d. 10,345 16 5
Totals ..	£ s. d. 22,503 1 11	£ s. d. 23,158 11 2	£ s. d. 30,645 11 6	£ s. d. 3,516 6 8	£ s. d. 9,434 0 11	£ s. d. 32,068 3 8	£ s. d. 13,478 2 2	£ s. d. 1 4 0	£ s. d. 134,805 2 0

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

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 Payments.	Net Cost per Patient.	Net Cost previous Year.	Increase in 1927-28.	Decrease in 1927-28.	Increase in 1927-28.	
Auckland ..	1,162	£ s. d. 28 11 7½	£ s. d. 4 9 5½	£ s. d. 1 2 0	£ s. d. 1 5 0	£ s. d. 4 6 7½	£ s. d. 14 6 7½	£ s. d. 0 6 10	£ s. d. ..	£ s. d. 4 13 0	£ s. d. 59 0 11½	£ s. d. 11 18 2 11½	£ s. d. 1 4 4½	£ s. d. 4½ 39 13 7½	£ s. d. 7½ 37 13 9½	£ s. d. ..	£ s. d. ..	£ s. d. 1 19 S	
Christchurch ..	857	£ s. d. 43 13 5½	£ s. d. 4 5 3½	£ s. d. 1 15 10½	£ s. d. 0 16 5½	£ s. d. 4 13 16 1	£ s. d. 4 13 16 1	£ s. d. 0 12 4	£ s. d. 0 0 2	£ s. d. 8 8 5½	£ s. d. 79 10 6	£ s. d. 20 15 3	£ s. d. 6 5 2½	£ s. d. 21 52 10 0½	£ s. d. 0½ 55 2 11½	£ s. d. 2 12 1½	£ s. d. ..	£ s. d. ..	
Dunedin (Seacliff) ..	1,187	£ s. d. 41 15 7	£ s. d. 4 8 7½	£ s. d. 1 6 1½	£ s. d. 2 1 4	£ s. d. 4 10 9½	£ s. d. 17 4 10	£ s. d. 0 6 8½	£ s. d. 0 0 5½	£ s. d. 7 9 5	£ s. d. 79 3 9½	£ s. d. 21 5 10½	£ s. d. 4 10 5½	£ s. d. 5½ 53 7 5½	£ s. d. 5½ 57 16 11½	£ s. d. 4 9 6	£ s. d. ..	£ s. d. ..	
Hokitika ..	220	£ s. d. 62 16 10½	£ s. d. 4 6 2½	£ s. d. 1 11 8	£ s. d. 1 16 3	£ s. d. 4 5 4	£ s. d. 19 0 5½	£ s. d. 0 5 3	£ s. d. 0 0 2	£ s. d. 104 6 11½	£ s. d. 104 6 11½	£ s. d. 11 12 2½	£ s. d. 4 7 5½	£ s. d. 88 7 4 90	£ s. d. 4 71 3½	£ s. d. 1 17 3½	£ s. d. ..	£ s. d. ..	
Nelson ..	407	£ s. d. 42 10 1	£ s. d. 1 8 10 5½	£ s. d. 0 3 6	£ s. d. 3 3 1½	£ s. d. 4 1 12 19 9½	£ s. d. 4 1 12 19 9½	£ s. d. 0 9 2½	£ s. d. 0 0 3	£ s. d. 8 8 11	£ s. d. 80 9 5	£ s. d. 18 0 0	£ s. d. 5 3 7	£ s. d. 57 5 10 53	£ s. d. 1 61 1½	£ s. d. ..	£ s. d. ..	£ s. d. ..	
Porirua ..	1,387	£ s. d. 33 0 0½	£ s. d. 4 18 3	£ s. d. 0 13 9½	£ s. d. 1 6 3½	£ s. d. 3 16 2	£ s. d. 11 3 11	£ s. d. 0 15 0	£ s. d. 0 0 5	£ s. d. 4 11 5½	£ s. d. 60 5 4	£ s. d. 21 3 5	£ s. d. 1 19 0 37	£ s. d. 2 11 41 4 5½	£ s. d. 1 41 4 5½	£ s. d. 0 9 1½	£ s. d. ..	£ s. d. ..	
Tokanui ..	350	£ s. d. 48 4 10	£ s. d. 6 17 4	£ s. d. 2 16 2½	£ s. d. 8 11 11½	£ s. d. 4 18 5	£ s. d. 7 15 10	£ s. d. 0 5 10½	£ s. d. 0 0 4	£ s. d. 9 10 2	£ s. d. 89 0 11½	£ s. d. 22 10 5½	£ s. d. 15 19 8½	£ s. d. 50 10 9½	£ s. d. 50 19 10½	£ s. d. 0 9 1½	£ s. d. ..	£ s. d. ..	
Head Office (Wellington) ..	..	£ s. d. 1 4 1	£ s. d. ..	£ s. d. ..	£ s. d. ..	£ s. d. ..	£ s. d. ..	£ s. d. ..	£ s. d. ..	£ s. d. 0 6 0	£ s. d. 1 10 1	£ s. d. ..	£ s. d. ..	£ s. d. 1 11 0	£ s. d. 0 0 11	£ s. d. ..	£ s. d. ..	£ s. d. ..	
Totals ..	5,570	£ s. d. 39 12 7	£ s. d. 4 19 7½	£ s. d. 1 4 2	£ s. d. 1 19 11	£ s. d. 4 13 9½	£ s. d. 13 15 4	£ s. d. 0 9 9	£ s. d. 0 0 3½	£ s. d. 6 15 4½	£ s. d. 73 10 9½	£ s. d. 19 19 7	£ s. d. 4 4 5½	£ s. d. 49 6 2½	£ s. d. 9½ 51 6 2½	£ s. d. 1 19 5½	£ s. d. ..	£ s. d. ..	£ s. d. ..

TABLE XX.—EXPENDITURE, OUT OF PUBLIC WORKS FUND, ON MENTAL HOSPITAL BUILDINGS, ETC., DURING THE FINANCIAL YEAR ENDED 31ST MARCH, 1928, AND LIABILITIES AT THAT DATE.

	Net Expenditure for Year ended 31st March, 1928.	Liabilities on 31st March, 1928.
Auckland ..	£ 12,213	£ 859
Christchurch (Sunnyside) ..	£ 10,164	£ 408
Hokitika ..	£ 141	£ ..
Nelson and Stoke ..	£ 753	£ 11
Porirua ..	£ 16,315	£ 1,065
Seacliff ..	£ 9,408	£ 1,369
Tokanui ..	£ 2,124	£ 287
Waitati ..	£ ..	£ ..
Total ..	£ 51,118	£ 3,952

TABLE XXI.—TOTAL EXPENDITURE, OUT OF PUBLIC WORKS FUND, FOR BUILDINGS AND EQUIPMENT AT EACH MENTAL HOSPITAL FROM 1ST JULY, 1877, TO 31ST MARCH, 1928.

Mental Hospitals.	1877-1919.	1919-20.	1920-21.	1921-22.	1922-23.	1923-24.	1924-25.	1925-26.	1926-27.	1927-28.	Total Net Expenditure, 1st July, 1877, to 31st March, 1928.
Auckland	£ 146,643	£ 543	£ 8,040	£ 9,013	£ 777	£ 5,188	£ 2,393	£ 2,073	£ 19,988	£ 12,213	£ 206,871
Reception-house at Auckland	5,059	..	..	..	..	..	..	..	..	..	5,059
Christchurch (Sunnyside)	182,844	2,490	5,139	3,494	2,245	1,497	6,272	2,901	7,229	10,164	224,475
Dunedin (The Camp)	4,891	..	..	..	..	..	..	..	..	..	4,891
Hokitika	3,727	..	..	984	4,789	10,216	16,013	8,034	1,745	141	45,649
Hornby	..	7,370	928	2,682	122	..	..	..	..	..	11,102
Motuihi Island	561	..	..	..	..	..	..	..	..	..	561
Napier	147	..	..	..	..	..	..	..	..	..	147
Nelson	26,045	208	3,496	3,316	1,929	1,429	2,389	1,182	805	..	40,799
Richmond	1,097	..	..	..	..	..	..	..	..	..	1,097
Seacliff	181,630	2,069	40	3,389	1,602	1,246	3,016	4,767	17,888	9,408	225,057
Stoke	76,229	4,111	5,381	9,774	337	1,450	3,095	12,568	2,691	753	21,704
Tokanui	8,935	848	3,620	3,217	515	2,743	16,076	8,097	1,638	2,124	126,708
Waitati	29,641	..	..	..	848	194	..	..	637	..	18,299
Wellington	205,799	638	724	5,969	638	2,578	18,374	38,213	16,004	..	29,641
Wellington (Porirua)	..	..	..	..	..	..	..	..	..	..	..
Totals	873,248	18,277	27,368	41,838	13,882	26,541	68,438	77,835	68,635	51,118	1,267,152

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