SOME ESSENTIALS OF A STATE PROGRAM FOR MENTAL HYGIENE

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I am scheduled to talk on "Some Essentials of a State Program for Mental Hygiene." Not everybody yet realizes that the State has a mental health problem. Probably few people do realize it more keenly than the Poor Law officials. You meet it again and again in your daily work. The problem of mental defect, especially, aggravates and complicates a very large number of the situations with which you have to deal.

On the other hand, the slowness of the general public in realizing the importance of mental health has been in strange contrast to the advances of recent years in the domain of physical public health. The public health worker now finds it easier than it was some years ago to get measures protecting the public health of the community adopted and carried out. Public health work in the physical realm has "arrived"; it is a part of the program of nearly every county, city and state. Public funds are made available in increasing amounts for facilities to conserve physical health and build up physical efficiency.

It is a more recent development, however, that mental health has been recognized as equally important to happiness, efficiency and welfare, and steps taken to promote mental hygiene. On such a program we are well started in this State. What I desire to discuss with you to-day is the program for the immediate future. What are the next steps in dealing with the insane and feeble-minded? What are the things which need doing first and most and which give promise of the

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most substantial results in the way of better care for these classes and in lessening public taxation and building up efficiency?

I do not feel it necessary before this gathering of men accustomed to dealing with so many phases of human inefficiency, disease, disability and deterioration to spend much time emphasizing the gravity of the problems of feeble-mindedness and insanity.

I have no doubt but that your experience in administering the Poor Law in your respective counties has led you to the conclusion that mental defect, or feeble-mindedness as we are more apt to call it, is an extremely serious, deep-seated, and discouraging cause of poverty and dependency and that if we could get at this phase of the problem of dependency in the sixty-two counties of this State in any adequate degree, it would be among the more important steps which could be taken toward the eradication of poverty.

The curious thing about it is that this has not been done before. The early recognition of mental deficiency and adequate provision for wise supervision or custodial care would not, of course, relieve you as Superintendents of the Poor from your entire burden, but it would do a great deal to cut down the counties' bills for the relief of the poor, shiftless and vicious.

There is no reason why the State should not get busy resolutely and right soon to plan its work and then work its plan, under a definite financial policy, to deal with the question of feeble-mindedness adequately within a definite time. And there are signs that it is about to do so.

No one knows just how many feeble-minded there are. Dr. Walter E. Fernald, Superintendent of the Massachusetts School for the Feeble-minded, at Waverley, says that there is probably one to every two hundred and fifty of the population. That estimate would give New York State about thirty-nine thousand. If the figures of the recent survey in Nassau County, N. Y., indicating one feeble-minded person to every one hundred and eighty three of the population are correct, the State has over fifty thousand feeble-minded. The British Royal Commission, after a careful and comprehensive survey, reached the conclusion that there was one feeble-minded person to each two hundred and seventeen of the general population in England. This estimate would give New York State over forty-five thousand.

Conservative authorities place the number of feeble-minded in New York State at not less than thirty-five thousand—about one to every two hundred and seventy-six of the population.

Let us take that conservative estimate. Where are these thirty-five thousand feeble-minded persons? Six thousand of them are in institutions established for them; forty-five hundred are in other institutions not intended for them, like jails, almshouses, prisons and reformatories. This leaves some twenty-four thousand five hundred unprotected in the community, causing untold misery, poverty, crime, disease and immorality, complicating many functions of government, hindering efforts at social betterment, entailing heavy expense upon taxpayers, and propagating their kind to burden succeeding generations.

A very substantial proportion of the feeble-minded require institutional care and custody for their own safety and for the safety and protection of society. Of course not every feeble-minded person requires such care, but generally speaking the mentally defective should either be cared for in institutions or placed under some sort of supervision in the community, best secured through institutional agencies.

There is no more mistaken idea than that feeblemindedness is merely a "State problem"—that it is a vague, far-off question affecting only the government at Albany or the treasury of the State.

On the contrary, it is a peculiarly local problem. The feeble-minded are at our very front doors—and back doors, too, living often in hovels and shanties. Feeble-mindedness is a Plattsburgh problem, a Clinton County problem, a Watertown problem, a Westchester County problem. Every community has its quota of feeble-minded. Right here, not 'way off somewhere, are they living and breeding and causing the expense and trouble. They are "on the town" in your village and mine; they are in the jails or courts of this county; they are raising dependent children for whom your town and your county must
When we fully realize this, we will be more ready to help the State deal with the problem. Every community and county has a vital interest in its solution, and a duty to help solve it.

What are the "next steps," in dealing with the feeble-minded? But before we come to the "next steps," what are the "first steps?"

Mental deficiency is largely a hereditary condition. The first step, therefore, is to check the propagation of the feeble-minded. So long as mental defectives are allowed at large to marry and produce their kind, we are making sure of a bumper crop of paupers, defectives, criminals, degenerates and ne'er-do-wells in the generations to come. Feeble-minded persons should not be permitted to marry or to become parents. The feeble-minded should be segregated or carefully guarded during the child-bearing period. As Dr. Fernald has said, "Parenthood is not for all."

One forward step toward enabling the State Board of Charities to deal more efficiently with the problem of feeble-mindedness was taken during the past winter. Mr. Charles H. Johnson, Secretary of the board, is to be commended for his effective efforts in securing the establishment, among other new departments, of a Division of Mental Defect and Delinquency in the State Board of Charities.

Our experience and present knowledge would seem to indicate the following as the wisest and most promising next steps in dealing with the problem:

1. More adequate segregation of the feeble-minded, especially women of child-bearing age, by enlarging and increasing the number of State institutions for their custody and care, and incidentally their training in useful pursuits.

2. Facilities to determine the mental status of all public school children, establishment of special classes for such of the retarded and defective as they will help, and the taking of steps to get institutional care or supervision for such others as require it.

3. Provision for official supervision in the community of such mentally deficient persons as give promise of being able to remain at home with safety to themselves and the community. This supervision should be somewhat like that exercised by probation officers over persons placed on probation, or by the field agents of the State hospitals for the insane over patients on parole.

4. More general establishment in centres of population of free clinics for diagnosis and advice as to future treatment and care.

5. Uniform, simplified procedure to govern the admission and discharge of patients in institutions.

Providing enough institutions for the defectives who require institutional care is clearly the most urgent step. All five State institutions for the feeble-minded and epileptic are full and have waiting lists. There should be quarters for a much larger proportion of the thirty-five thousand feeble-minded persons in the State, instead of for only six thousand as at present.

A recent directory of some of the feeble-minded persons in eighteen counties in the State, compiled by the State Charities Aid Association's County Agents for Dependent Children, contains six hundred and thirty-one families with feeble-minded members known to the County Agents and Poor Law officials; the number of feeble-minded individuals in these families is eight hundred and thirty-two. They, of course, do not comprise a complete census of the feeble-minded persons in these counties. They are (with negligible exceptions) only those who came to the attention of the agents in the routine of their work and were found to be in need of institutional care, protection and training. These counties constitute fifteen per cent. of the population of the State. If the same proportion holds good throughout the State, the number of feeble-minded persons who have already come to the notice of public officials by reason of poverty or anti-social conduct is not less than 5,543. Whatever variation there may be in the estimates of authorities as to the total number of feeble-minded in the State, it is certain that there are at least 5,543 feeble-minded persons in the State this very day who are not in institutions but who ought to be!

For at least this number the State should provide the earliest possible institutional accommodations. This means practically doubling the present capacity of the State institutions for the feeble-minded and epileptic. It is clearly the
first, most urgent and most important step toward relieving the present intolerable situation.

In due course, as the program to increase institutional facilities is carried out, the State should be districted so that feeble-minded persons will not have to be sent such great distances from home as at present. Special and separate provision should be made for defective delinquents. The inability of the feeble-minded to take care of themselves is well-known. **

"The feeble-minded are a parasitic, predatory class, never capable of self-support or of managing their own affairs. The great majority ultimately become public charges in some form. They cause utterable sorrow at home and are a menace and danger to the community. Feeble-minded women are almost invariably immoral, and if at large, usually become carriers of venereal diseases or give birth to children who are as defective as themselves. ** We have only begun to understand the importance of feeble-mindedness as a factor in the causation of pauperism, crime and other social problems. Hereditary pauperism, or pauperism of two or more generations of the same family, generally means hereditary feeble-mindedness. In this State (Massachusetts), there are families who have been paupers for many generations. Some of the members were born or even conceived in the poor house. **

"A very large proportion of the neglected and dependent children in the care of the State are feeble-minded and are the offspring of the feeble-minded. Many of the immoral and diseased girls found in rescue homes and shelters are defective and absolutely incapable of reform or of self-support. ** In one county almshouse in Pennsylvania there were one hundred and five mothers of illegitimate children, and of these mothers, one hundred were feeble-minded. **

"It has been truly said that feeble-mindedness is the mother of crime, pauperism and degeneracy. It is certain that the feeble-minded and the progeny of the feeble-minded constitute one of the great social and economic problems of modern times. **

"There is an urgent demand for greatly increased institutional provision for this class. The cost of this provision will be great, but not as great as the present cost of caring for these same persons, to say nothing of their progeny, in future generations. It would cost less money, be more economical in social life, and of immense value morally. These people are never self-supporting but are eventually supported by the public in some way. From the economic standpoint alone, no other investment could be so profitable, not even in canals, or railroads or factories. ** In a few years, the expense of institutions and farm colonies for the feeble-minded will be counterbalanced by the reduction in the population of almshouses, prisons and other expensive institutions. When the feeble-minded are recognized in childhood and trained properly, many of them are capable of being supported at low cost under institutional supervision."

The need of increased accommodations for the feeble-minded has existed for a long time, but it has been seen dimly, when at all, by legislatures. Generally speaking, they have temporized with the problem. Frequently they have admitted the need of appropriations for more institutions but have put off granting them.

We will do something for the feeble-minded “next year” —always “next year”—has been, up to this year, sort of a byword at Albany. “Next year” never came, and the feeble-minded continue to increase. The State’s procrastination reminds me of a peanut stand in a nearby city years ago. On this stand was a sign: “Free Peanuts To-morrow.” Small boys went for those “‘free” peanuts a good many times before they found that “to-morrow” never came.

But the 1917 Legislature distinguished itself by actually doing something “this year.” It granted $1,144,000 in appropriations and authorizations for new construction. This will provide eight hundred and ninety beds and increase the present capacity of the institutions by about sixteen per cent.

I am sure there was no one to whom this was better news than to you public officials who are so put to it to get feeble-minded dependents into State institutions where they belong and into which it is so often impossible to get them because all the institutions are full and have waiting lists.

In addition to these substantial grants of funds this year, the Legislature and Governor Whitman took two other important forward steps.

1. The Lockwood Bill provides for the establishment of special classes in all public schools where there are ten or
more children needing them. This is merely extending to public schools everywhere the same system of instruction especially adapted to backward and defective children which has been provided to some extent in the schools of the larger centers of population for a number of years.

2. The Legislature created a Hospital Development Commission of legislators, elective and appointive officials and citizens to make a thorough study of the whole question of the further needs of the insane and the feeble-minded in order to formulate a building program and determine upon a definite financial policy for the State to pursue in an earnest effort to deal with this problem within a definite period.

I believe that the Superintendents of the Poor, as well as all other public authorities whose problem and budget grow to such an extent out of the presence of uncared-for feeble-minded in the community have the greatest opportunity that has come in this generation to help settle—and settle right—the ever-recurring question, "What are we going to do about the feeble-minded and insane?" By co-operating with the Commission through furnishing them the facts as they are turned up by you in your daily routine and by your observation, you can point the way to the need of more buildings to house the feeble-minded who must be segregated to protect themselves and others. You can help eventually to provide for enough clinics to examine the feeble-minded; to obtain a system of supervision for such persons as give promise of being able to remain safely in the community, and can help impress upon the taxpayers the necessity of looking matters squarely in the face, exactly as they are—not as we would like to have them be—but as they are, and deciding here and now to do something toward cleaning up this situation and meeting the obligation of the State to the feeble-minded.

Soon the Development Commission, of which Senator Henry M. Sage is chairman, will begin its study of the number and types of the feeble-minded who need custodial care; types of buildings needed for different classes, and the number of each; the maximum size for existing institutions; desirable new institutions and their size and location; a uniform statute for the administration of State institutions, a uniform committal law, and other questions. I can think of no more important and constructive contribution which you men in your official position can make toward lessening dependency in your own counties and communities than by putting the facts at your disposal into the hands of this Commission in the due course of its investigation.

I have not said much about the insane for the reason that in this State the problem of institutional care of the insane has been much more substantially solved than has the problem of the feeble-minded. The State has had a big job to care for its insane and on the whole has done the job well. The number of the insane to be cared for, however, constantly increases and the most serious phase of the problem in recent years has been to get money enough to provide for adequate buildings. This the responsible authorities have not so far been able to accomplish, though the appropriations granted by the last Legislature toward this task were larger than in a number of years.

The thirteen civil State hospitals are overcrowded about six thousand patients. The annual increase is something like nine hundred a year, and has been for the last ten years. It is perfectly evident that enough money must be provided to take care of this excess of patients over accommodations and provide for the normal annual increase. But by and large, the State is much nearer doing its duty by the insane than it is by the feeble minded. There are, however, two or three things which it is clearly indicated should be done in this connection.

First, under a law passed in 1913, the State hospitals are establishing free mental clinics at the institutions and at various communities scattered all through their districts where any person with nervous or mental ailments may come at stated times and receive free consultation, diagnosis and treatment from a mental specialist. There are now twenty-seven such clinics in operation under a regular schedule. They are being attended by more than five hundred persons a month—persons who fear a nervous or mental breakdown, or who are actually in the early stages of mental disorder. The results in these and other clinics have shown that mental disease, like tuberculosis and many other physical diseases, yields more readily to treatment when discovered in the early stages, and that prompt treatment in a very substantial number of instan-
ces means recovery and obviates the necessity of long hospital residence.

The number of these clinics should be increased until there is one in every large center of population in the State. The State hospitals now employ trained social workers, or field agents who go out into the community from the hospital, supervise patients who are convalescing after treatment in the hospitals, and who carry to the family the advice and suggestions of the hospital physicians to prevent a recurrence of the trouble. These social workers also do important preventive work with the cases in the early stages either by seeing that they are treated by a physician at a clinic, while they continue to reside in their own homes, or, if it is necessary for them to go into an institution, by seeing that they go there in time.

This system of clinics really constitutes a department of prevention of the State Hospital Commission. There is no question but that a substantial number of persons are being spared long periods in institutions and the State saved large sums of money by the operation of these clinics and the efforts of the State, the hospitals and various organizations working to prevent mental diseases. It costs about $220 a year to maintain a patient in a State hospital, so the saving through the clinic system has already amounted to large sums in a very short time.

The next step to increase the efficiency of the clinic system should be additional field workers, especially for the large metropolitan hospitals, and the appointment of a qualified medical director to have full-time charge of the clinic work. To set in motion a system with such vast possibilities as the out-patient departments of the State hospitals and continue its operation without a full-time, technically-qualified head is unthinkable.

Another important need in regard to the insane occurs to me; namely, the need of suitable quarters in every community for the temporary care of the insane while undergoing observation or awaiting commitment to a State institution. The law plainly says that any insane person shall not be detained in a jail or lockup while awaiting commitment or undergoing observation, but a surprisingly small number of communities have suitable places for the care of these persons as sick persons instead of criminals.

Every community should have a suitable place entirely apart from its jail or lockup where kindly nursing and medical care and treatment can be given in the early stages of their trouble while the necessary legal formalities are being gone through with. No community should tolerate transporting mentally sick people in the police patrol wagon or locking them in jails as the first step toward restoring their health.

Last, but one of the most important needs of all, is the need for the establishment of psychopathic hospitals in various centers of population in the State to furnish the type of service to the community and to the State hospital system which the Boston Psychopathic Hospital provides for the metropolitan district of Boston and for the Massachusetts system of State hospitals. Such an institution provides first care, examination and observation for all classes of mental patients, and provides short intensive treatment for incipient, acute, and curable cases. Its functions also include clinical and laboratory investigation, clinical instruction and training of students and physicians, and out-patient work in after-care, prevention and cure.

These and other questions regarding the insane will be studied by the State Hospital Commission during the coming months.

Perhaps some of you may have noticed in the June issue of The State Charities Aid Association News the story of the almost incredible delays by the State of New York in the past in erecting, furnishing and getting the use of State institutions after the money for their construction is appropriated. The actual record in cold type is astounding. It shows that:

The Legislatures of 1911 to 1915 inclusive, made appropriations for forty-three buildings.
Five of them have not yet been begun.
Six for which money was provided in 1911-1912 are not yet ready for use—after more than five years.
Two were ready between five and six years after the appropriations were made.
Two of the buildings were finished between four and five years after the money was available.
Thirteen were completed between three and four years after the appropriations.

Eleven were finished between two and three years after.

Four were finished within two years.

Only thirty-two of the forty-three buildings have been completed.

Is it not pertinent to ask, what in the world is the matter with the State? What sort of paralysis has got into its affairs? Who is to blame for this intolerable business management?

It is bad enough that these costly delays have occurred in the past and that people for whom the State intended to make provision have, instead, been allowed in the community pursuing their ways of crime, poverty and degeneracy. But what should be said of the State if such a dilatory, expensive, and wholly indefensible policy should be allowed to continue? Is it not time that the State turned over a new leaf and got to work vigorously preparing plans for the buildings for which money has been appropriated this year, getting the work started, pushing it through and actually moving into and getting the use of the buildings. If you started to build a house, it would not take you five or six years to build and move into it. There is no reason why it should take the State of New York so long.

As public officials in your counties and communities charged with provision for the dependent and for taking all the necessary steps within your power to prevent dependency, you can perform a very vital service to the taxpayers by demanding that the State institutions now or henceforth to be constructed shall be finished and put to their intended uses before the persons whom they are intended to house have cost the communities more in crime and poverty than the cost of the institutions in which to segregate and protect both them and society.