

**PUBLIC POLICY IN THE CARE OF THE INSANE.**

BY L. L. UHLS.

A friend interested in The Conservative asked me to write an article for publication dealing with public policy as exhibited in the care of the insane. I consented, not because I thought I could do this better than others, but because of the great importance of the subject and the hope that my experience and observation might be helpful to the readers of The Conservative, and that in this way I might aid in making the sad lot of this helpless and dependent part of our population more satisfactory and possibly the expense to the state, less.

The manner in which this matter has been discussed in recent years plainly proves that the present policy in many instances has not proven satisfactory. Yet it is pleasing to note the improvement that is being made. I am sure that it is not possible to make laws that will fit all localities equally well. Frank B. Sanborn says, "customs, traditions, peculiarities of race, of religion, of social habit, interfere to prevent that which seems similar from actually resulting in similarity."

**Practical Questions.**

The following are, I think, practical questions: First. What is the prime object to be attained by the state in caring for the insane? Second. Who shall pay the bills? Third. By what methods shall care be administered? The prime object is to restore the insane to sanity, and send them home competent to assume the responsibilities of citizenship. And yet, when we remember that not one-third of those afflicted with insanity ever recover, all must agree that a large problem remains, viz: The care and maintenance of the chronic insane. Here let me say that the care of the insane brings the largest item of expense to the states. As to who shall pay the bills: It might be done by the family, the municipality, the county or the state, or all of these may contribute to carry the burden. I shall take issue with many excellent men and say that I think the state should pay the bills, and in all cases where the insane person cannot be sent to a private institution, he should be sent to a state institution and kept at the expense of the state. I believe he will get better care in this way. The state will provide better buildings, more sanitary surroundings, and probably physicians with larger experience in the treatment of mental and nervous diseases than would otherwise be provided.

By what methods shall care be administered? In some way I have received the impression that this is the

question my friend wishes me to discuss in this article.

I cannot take time to discuss at length the policies adopted by other countries, nor even to refer to many of the states of the Union. I shall confine myself to conditions as they have come under my own observation, rather than refer to the difference in the almost exclusive state care in New York and Ohio, and the state care and county custody of Wisconsin and other states.

Let us consider the insane individual from the time he presents the first symptom of insanity. What shall be done and who shall be responsible? How can we best look after the welfare of the insane person and at the same time best serve the state?

**Insanity a Disease.**

First, insanity is a disease. Qualified physicians are competent to diagnose and treat diseases better than



others. A person thought to be insane should not be legally declared insane and placed in an asylum without first having his case passed upon by a commission, of which the majority of the members shall be physicians. In addition, he should not be denied the right of a trial by jury if he, or a responsible friend, demands it. Nine cases in ten a jury will not be wanted or needed. The insane man, his family and friends, should be spared all unnecessary inconvenience and annoyance. The unfortunate man should not be arrested, tried, convicted and committed in the same way as the man who is guilty of some great crime. In other words, the machinery that handles criminals should not handle the insane. The insane man is not a criminal. He should not be subjected to a public trial, and he should not have to go to jail. He should be kept at home, restrained if necessary, until time to remove him

to an asylum, and then he should be taken by a trained attendant who is connected with an asylum, unless the man's family or friends can do it safely. If the man is very violent it is possible but not probable, that a sheriff, constable or marshal ought to be called to make the arrest, but he should have nothing more to do with the case. I admit that a sheriff can handle a criminal better than can an asylum attendant. But that he can handle an insane man better than can the attendant, I deny. However, from a recent personal experience, I would suggest that it might be well to make the office of sheriff a salaried office before the above is attempted.

Now that we have the insane man safely lodged in the asylum what is the further duty of the state? We may here properly refer to the appointive power, the board of control, the board of charities, the trustees, or as in Kansas, the state board of charities and corrections, and then to the local officers, their qualifications, authority, etc, the employes, their qualifications, duties, etc, and last of all, the inmate or patient.

Who should appoint the board which controls the state charitable institutions? The governor.

Who should discharge them if they prove to be incompetent or unfaithful? The governor.

What institutions should be under the care of the board having charge of the insane asylum? One board should have charge of all state charitable institutions. This board should consist of three members and their salaries should be ample and they should devote their entire time to the work. Their duties should be to have the general management of these institutions, audit the accounts, oversee the purchase of supplies, let contracts for new buildings and all large improvements, look after needed legislation and appropriations. They should appoint the superintendents of all the state charitable institutions, and discharge them if incompetent or unfaithful. They should devote much time to studying advanced methods. They should attend all meetings, if possible, of state and national charities, etc., and as in Iowa, they should be fined if they even suggest to a superintendent the appointment of any employe in a state charitable institution. They should appoint and discharge superintendents without any aid from a legislative committee, or any other committee. A superintendent should not be appointed for political reasons. Neither should he be discharged for political reasons. Fitness for the place alone should be the requirement for appointment and unfitness the occasion for discharge. In other words, the state should employ